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Critical illness protection  
CritiPartner Critical  
Illness Plan

A photograph of a family—a man, a woman, and a young girl—walking hand-in-hand on a paved path. The man is wearing a blue sweater and khaki pants, the woman is wearing a striped shirt and a beige skirt, and the girl is wearing a white shirt and blue shorts. They are all smiling and looking towards the right. A large red diagonal graphic element is overlaid on the right side of the image. The background shows a clear blue sky and some greenery.

**Walking  
hand-in-hand on  
the road to recovery**

Product brochure

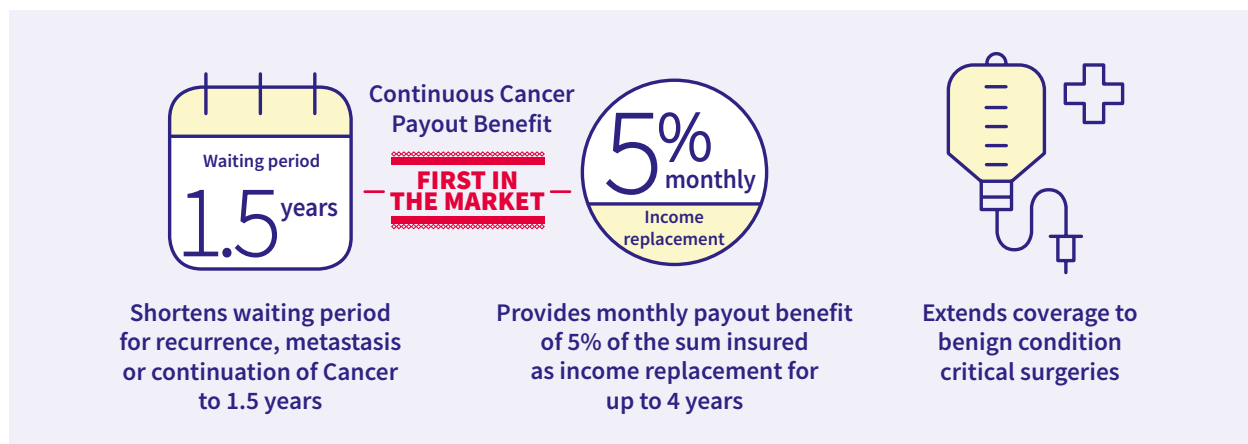
It is never easy when facing critical illness. There are so much to think about – from deciding between your treatment options to managing your family’s everyday needs. Without adequate protection, critical illness can place a strain on you and your family, financially and emotionally.



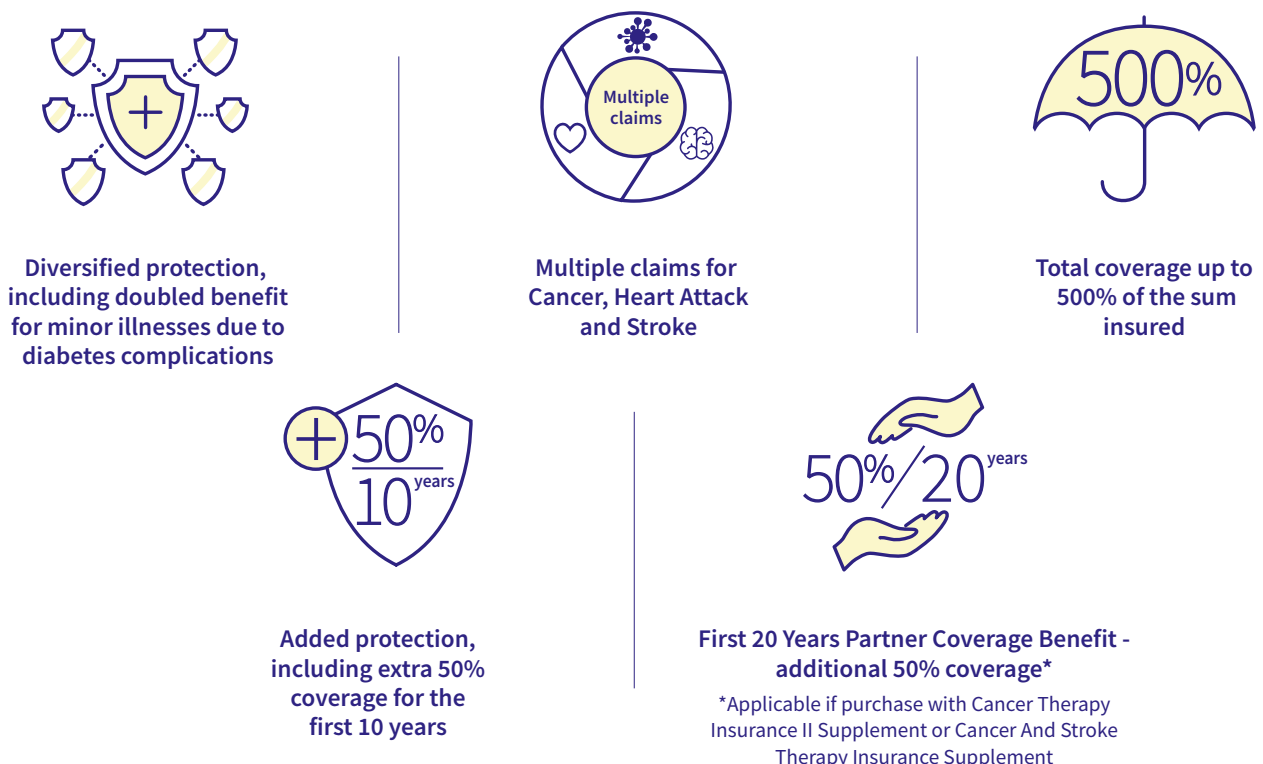
# CritiPartner Critical Illness Plan

As your lifelong partner, AXA walks alongside you in times of difficulties. Our **CritiPartner Critical Illness Plan** (“**CritiPartner**” or “basic plan”), a participating life insurance plan, offers you pioneering and comprehensive protection against unforeseen health challenges. In case a critical illness strikes, you still have the peace of mind of knowing you and your family are financially protected, so you can focus your energy on what truly matters – your recovery.

## Major breakthroughs



## Other highlights





## Diversified protection

**CritiPartner** provides diversified protection against critical health conditions up to age 100<sup>1</sup> of the insured. In addition to common major illnesses and minor illnesses, **CritiPartner** extends its protection to benign condition critical surgeries<sup>2</sup> and boosts the benefit for minor illnesses due to diabetes complications<sup>3</sup> so as to cover the unforeseen.

**CritiPartner** will pay a lump sum cash benefit if you are diagnosed with / require any one of the covered illnesses / benign condition critical surgeries, offering you financial support when you need it most.

Covered illnesses / surgeries	Benefits	Benefit amount for each claim (% of the sum insured)
62 major illnesses (as set out in Table 1 below)	Major Illness Benefit <sup>5</sup>	100%*
66 minor illnesses <sup>4</sup> Include: • Minor illnesses for juvenile; • Benign condition critical surgeries <sup>2</sup> <b>Extended coverage</b> ; and • Minor illnesses due to diabetes complications <sup>3</sup> <b>Doubled benefit</b> (as set out in Table 2, Table 3 and Table 4 below)	Minor Illness Benefit <sup>5,6</sup>  { Minor Illness Benefit <sup>5,6</sup> + Diabetes Complications Protection Benefit <sup>5,6</sup>	20%  20% + 20%

\* Plus any terminal dividend (minus any amount claimed for the Minor Illness Benefit and Diabetes Complications Protection Benefit)

All benefits paid and payable under the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit are up to 100% of the sum insured. As long as the 100% of the sum insured is not exhausted, there is no limit on the number of claims under the Minor Illness Benefit, while the Major Illness Benefit or Diabetes Complications Protection Benefit can be claimed once.



## Multiple claims for Cancer, Heart Attack and Stroke

We understand that major illness can strike more than once. To enhance your protection, **CritiPartner** allows multiple claims for 3 common major illnesses - Cancer, Heart Attack and Stroke, protection up to age 85 of the insured.

Covered major illnesses	Maximum number of claims <sup>7</sup>
Cancer	3 claims
Heart Attack	2 claims
Stroke	

After all benefits paid and payable reach 100% of the sum insured, **CritiPartner** will continue to cover a maximum of 4 claims for Cancer, Heart Attack and Stroke. We will pay Multiple Claims Major Illness Benefit<sup>5,8</sup> equal to 100% of the sum insured for each claim. Together with the Continuous Cancer Payout Benefit<sup>5,8,9</sup>, **CritiPartner** provides additional coverage for Cancer, Heart Attack and Stroke up to 400% of the sum insured. Being financially secured, you can still keep your mind at ease even when a critical illness strikes again.





## Long-term financial support throughout the Cancer recovery journey

**FIRST IN THE MARKET**

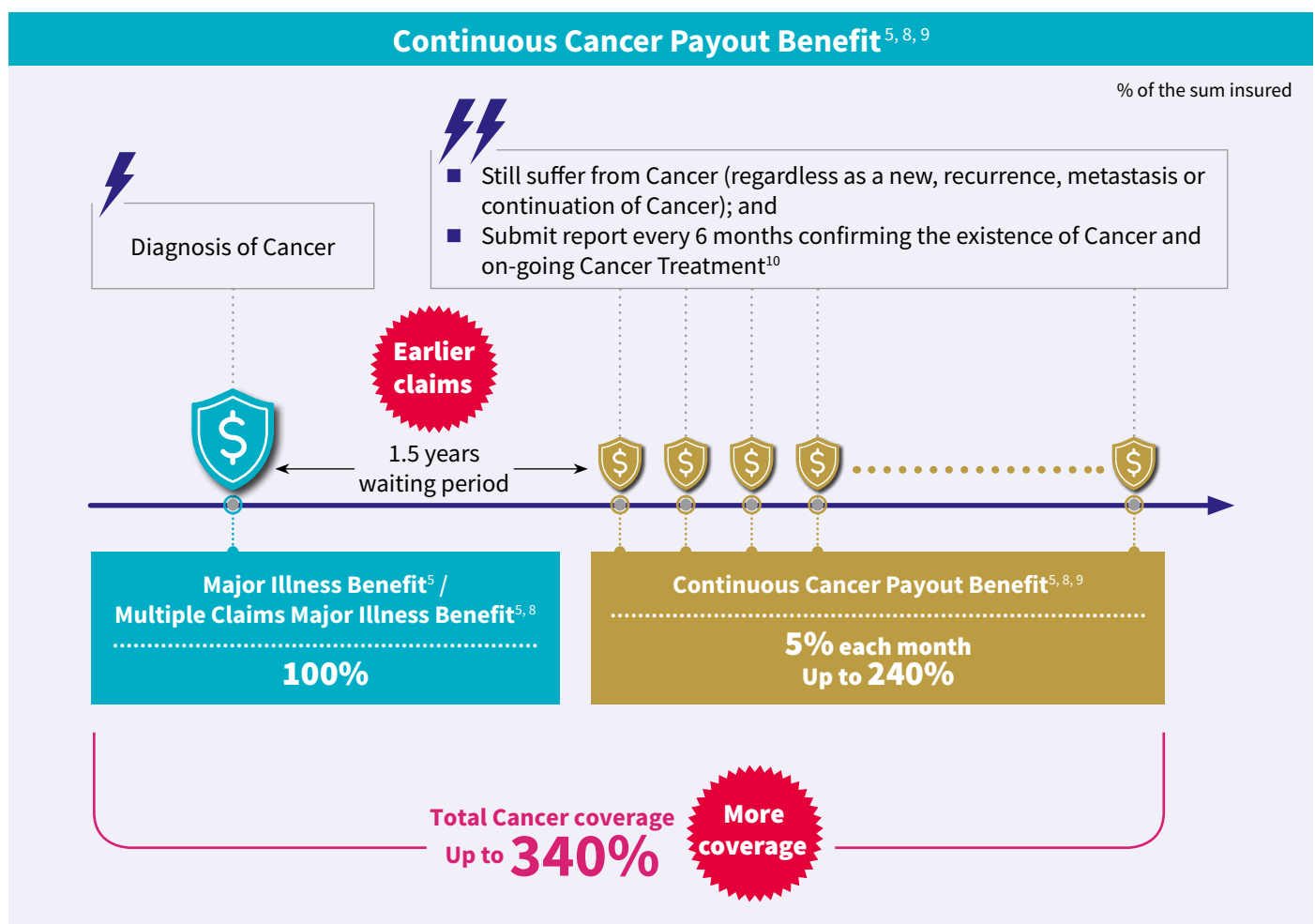
Cancer does not only pose a serious threat to our health, but worst of all, the lengthy treatment may keep one from working and result in loss of income, causing a financial hardship to the family.

To make sure that you are not alone in this journey, **CritiPartner** presents our pioneering Continuous Cancer Payout Benefit<sup>5, 8, 9</sup> which provides you with long-term financial support if you are still suffering from Cancer after a Cancer claim. The protection is up to age 85 of the insured. Outperforming other similar products, the waiting period for recurrence, metastasis or continuation of Cancer under the Continuous Cancer Payout Benefit is greatly shortened to 1.5 years so that you can receive the financial support earlier. In addition, other than paying lump sum cash benefit, Continuous Cancer Payout Benefit provides monthly payout benefit up to 4 years, offering you income replacement throughout the battle with Cancer. You can take time for recovery without worrying about everyday expenses.

As short as 1.5 years from the diagnosis date of the preceding Cancer (where a benefit has been paid), if you:

- (i) still suffer from Cancer (regardless as a new, recurrence, metastasis or continuation of Cancer); and
- (ii) submit report every 6 months confirming the existence of Cancer and you are treated with on-going Cancer Treatment<sup>10</sup>,

you can choose to receive Continuous Cancer Payout Benefit equal to 5% of the sum insured each month, up to 240% of the sum insured. Together with the previously claimed Major Illness Benefit<sup>5</sup> and / or Multiple Claims Major Illness Benefit<sup>5, 8</sup> for Cancer, **CritiPartner** provides Cancer protection up to 340% of the sum insured!



Once Continuous Cancer Payout Benefit has been paid under **CritiPartner** for any period, no Multiple Claims Major Illness Benefit for Cancer will be payable for any Cancer.



## Total coverage<sup>11</sup> up to 500% of the sum insured

**CritiPartner** offers a total coverage up to 500% of the sum insured. You can focus on treatment and recovery with adequate protection provided.



### Coverage 100% of the sum insured

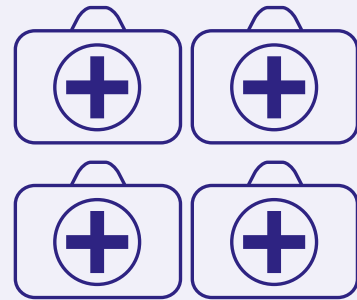
(up to age 100 of the insured)

Major Illness Benefit<sup>5</sup>

Minor Illness Benefit<sup>5, 6</sup>

Diabetes Complications Protection Benefit<sup>5, 6</sup>

Once all benefits paid and payable reach 100% of the sum insured, the additional coverage up to 400% of the sum insured will kick in with all the future premiums being waived.



### Additional coverage 400% of the sum insured

(up to age 85 of the insured)

Multiple Claims Major Illness Benefit<sup>5, 8</sup>

Continuous Cancer Payout Benefit<sup>5, 8, 9</sup>

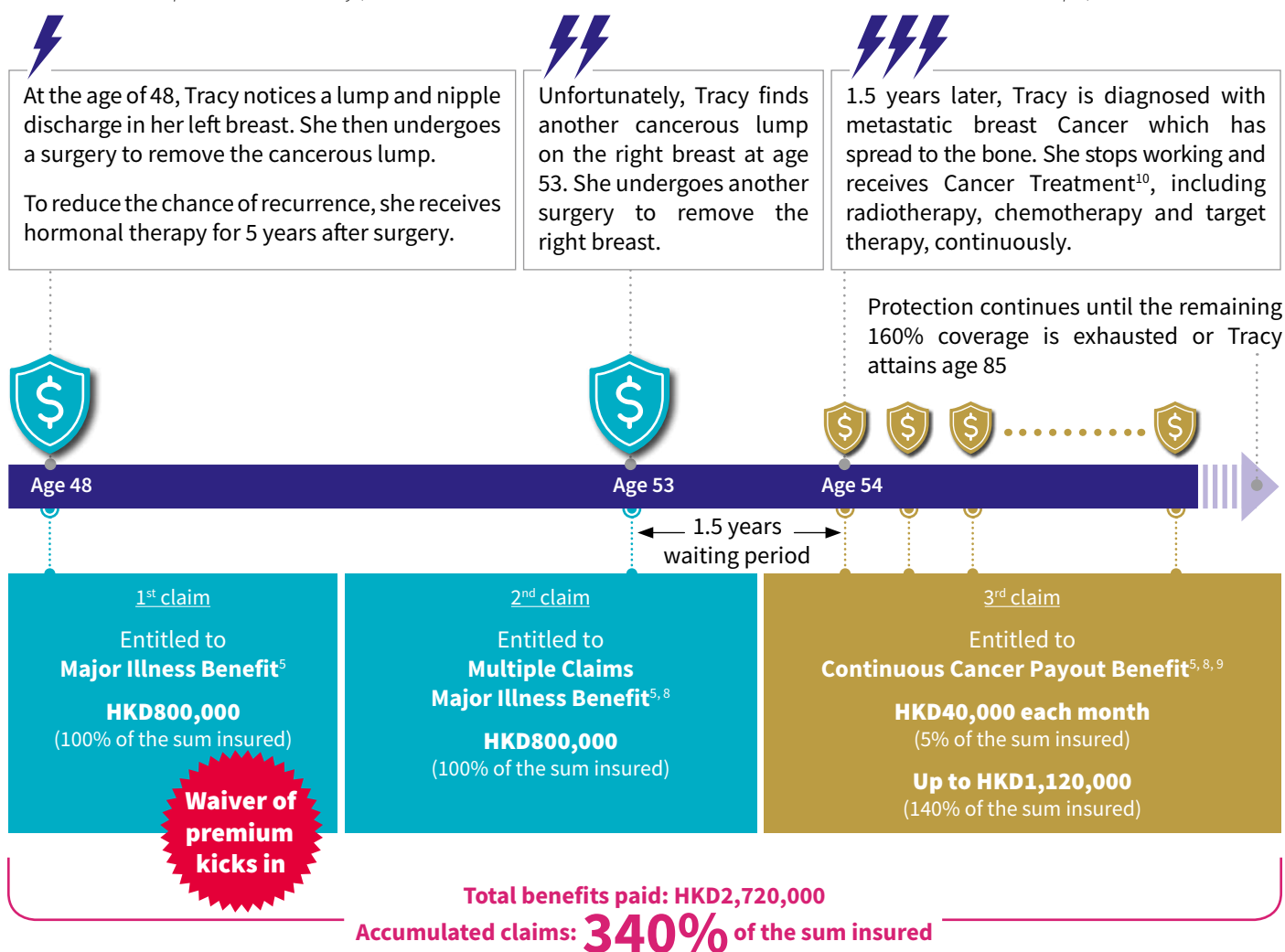
Total coverage  
up to **500%** of the sum insured

## Illustrative example 1

Insured : Tracy Chan  
Age : 35  
Occupation : Interior designer

Understanding irregular hours and unhealthy diet can be a source of health problems, Tracy decides to take out a **CritiPartner** policy with sum insured of HKD800,000 at age 35.

This illustrative example is for reference only (Terminal dividend and Index-linked Increase Endorsement are not illustrated in this example).



How can **CritiPartner** help Tracy?



**Multiple Cancer claims provide Tracy with immediate financial support even facing Cancer recurrence**



**Only 1.5-year waiting period is required for metastatic Cancer, letting Tracy receive monthly payout benefit much earlier**



**Continuous Cancer Payout Benefit<sup>5, 8, 9</sup> provides long-term income replacement, giving Tracy extra peace of mind**

Note: Assuming (a) the relevant illnesses are not excluded from the coverage of **CritiPartner** and have fulfilled the relevant eligibility requirements and conditions as set out in the policy contract; (b) no other claim has been paid and / or becomes payable under the policy; (c) there is no indebtedness under the policy; (d) Tracy does not make any change to the sum insured of **CritiPartner** throughout the contract term of the policy; (e) all premiums are paid in full when due and as planned; and (f) no other optional supplements are attached to the policy.



## Added protection

### ■ **Death benefit**<sup>5, 12</sup>

The designated beneficiary will receive 100% of the sum insured plus any terminal dividend<sup>13</sup> (minus any amount claimed under the Minor Illness Benefit<sup>5, 6</sup> and Diabetes Complications Protection Benefit<sup>5, 6</sup>) in the unfortunate event that the insured passes away.

### ■ **Extra Coverage Benefit**<sup>14</sup>

Before the 10<sup>th</sup> policy anniversary and while the coverage is in effect, if the Major Illness Benefit<sup>5</sup> or death benefit<sup>5, 12</sup> is payable, an additional benefit of 50% of the sum insured will be paid.

### ■ **Index-linked Increase Endorsement**<sup>15, 16</sup>

To guard against the pressure of inflation, an Index-linked Increase Endorsement may be attached to your policy. While this endorsement is in effect, the sum insured will be automatically increased every year with extra premiums. The rate of increase will be determined with reference to rises in the consumer price index, subject to a minimum determined by the Company from time to time.

### ■ **Continuous supplementary protection**

You can combine **CritiPartner** with a wide range of other supplements such as accident and medical protection to suit your insurance needs. Even after the coverage of the **CritiPartner** terminates, all subsisting attached supplements will not automatically terminate provided that premium payment of such supplements continues (subject to the terms and conditions of each of the supplements).



## Long-term savings return

### ■ **Guaranteed cash value**<sup>13</sup>

From the 3<sup>rd</sup> policy anniversary onwards, **CritiPartner** provides a guaranteed cash value upon policy surrender or at policy maturity.

### ■ **Terminal dividend**<sup>13</sup>

When your policy has been in force for 5 years, **CritiPartner** may pay you a non-guaranteed terminal dividend. This non-guaranteed terminal dividend (if any) is a one-off payment which may be payable when (a) all benefits payable under the Major Illness Benefit<sup>5</sup>, Minor Illness Benefit<sup>5, 6</sup> and Diabetes Complications Protection Benefit<sup>5, 6</sup> reach 100% of the sum insured; (b) the policy is surrendered; (c) the policy matures; or (d) the insured passes away, whichever is the earliest. Terminal dividend may be reduced or increased by the Company from time to time. Its actual amount will only be determined when payable.





## Extra financial flexibility

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### ■ Waiver of Premium

Once all benefits paid and payable reach 100% of the sum insured, all future premiums will be waived from the next premium due date, allowing you to focus on treatment and rehabilitation.

### ■ Extended Grace Period Benefit<sup>17</sup>

Starting from the 2<sup>nd</sup> policy year, if you become a parent, get married, become divorced or become involuntarily unemployed during the premium payment term, you can choose to apply for the Extended Grace Period Benefit to stay protected by **CritiPartner** while enjoying an extended grace period for premium payment up to 365 days.



## Wide-ranging value-added services<sup>18</sup>

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You can enjoy a range of value-added services from prevention through to treatment and rehabilitation under the Critical Illness Support Programme 2. For details, please refer to the relevant programme flyer.



## First 20 Years Partner Coverage Benefit<sup>19, 20</sup>

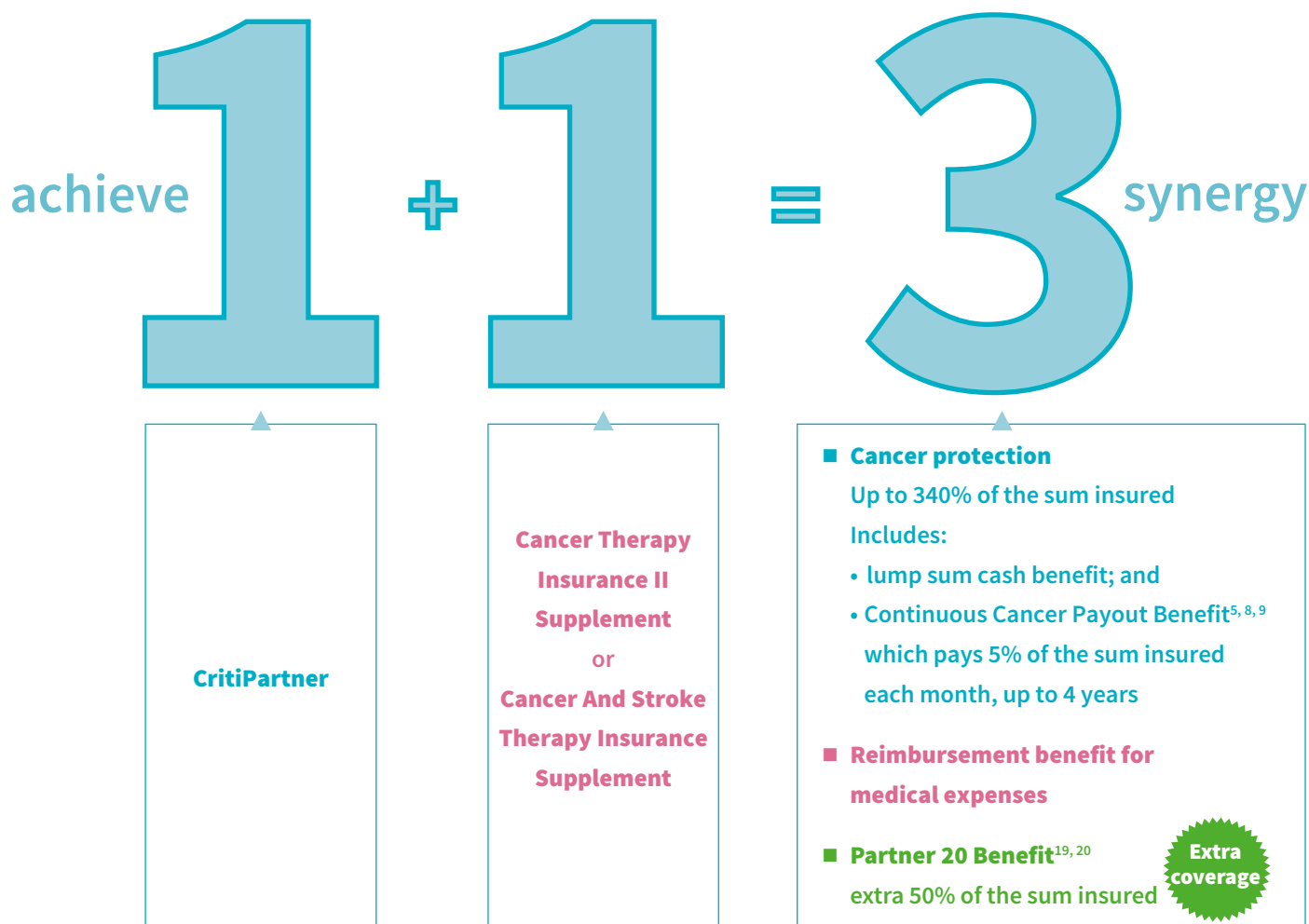
In the prime of your life, you are working hard to establish your ideal family life. However, in the unfortunate event of suffering from Cancer, treatment can be a lengthy process. With the rising medical expenses and loss of income during absence of work, you may face a significant threat to your finances.

AXA understands the importance of sufficient protection for you and your family. Therefore, we present you the Cancer Therapy Insurance II Supplement and Cancer And Stroke Therapy Insurance Supplement, which can be attached to AXA's insurance plans. By adding this supplement, you can have comprehensive reimbursement for Cancer and Stroke treatment expenses, both inpatient and outpatient, throughout different stages of healing journey.

Better still, if you successfully apply for Cancer Therapy Insurance II Supplement or Cancer And Stroke Therapy Insurance Supplement together with **CritiPartner**, you can be entitled to a First 20 Years Partner Coverage Benefit ("Partner 20 Benefit") equal to an additional 50% of the sum insured when either a Major Illness Benefit<sup>5</sup> or death benefit<sup>5, 12</sup> becomes payable under **CritiPartner** during the first 20 policy years / before the policy anniversary on or immediately following the insured's 75<sup>th</sup> birthday, whichever is earlier, further enhancing your protection.

The combination of **CritiPartner** and Cancer Therapy Insurance II Supplement or Cancer And Stroke Therapy Insurance Supplement is your powerful backing of health, giving you the confidence in pursuing your goals free from worries and achieving a wonderful life.

### All-round Cancer benefit to



## Illustrative example 2

Insured : Timmy Lai  
Age : 38  
Occupation : Executive chef

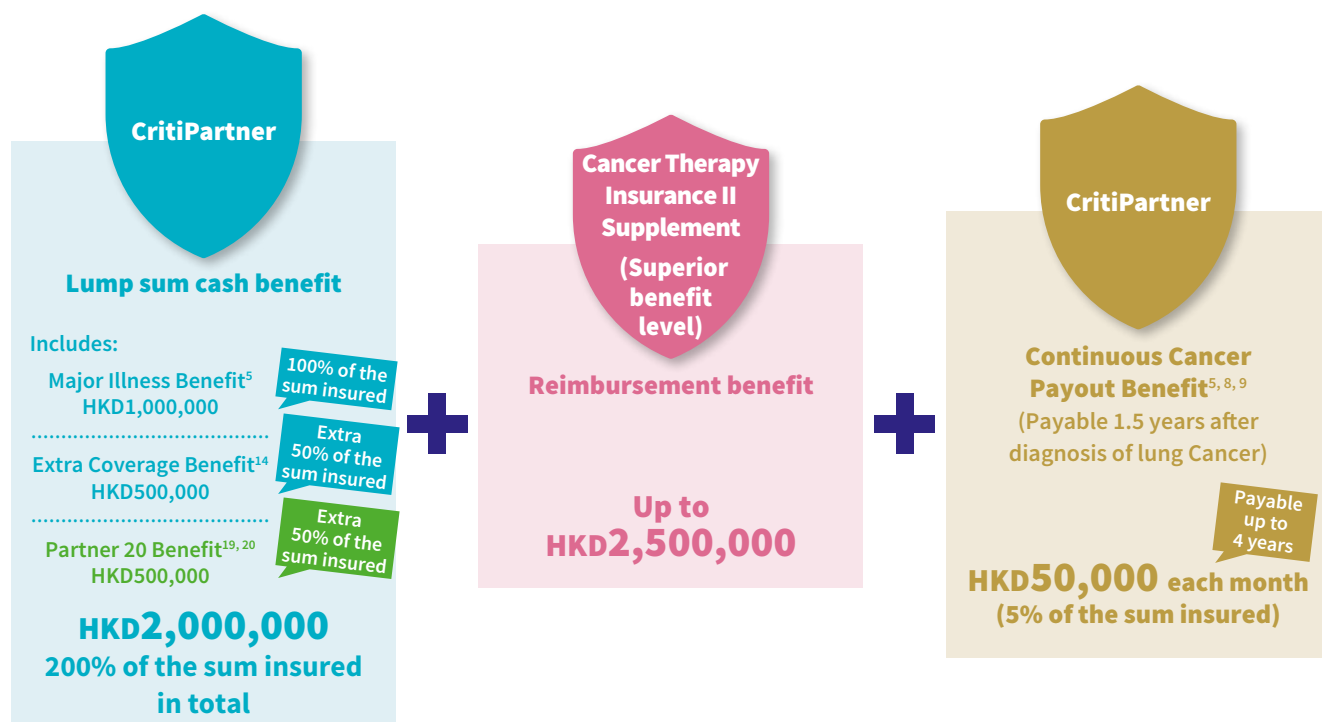
Timmy is married and has an 8-year-old daughter and a 6-year-old son. His wife has a part-time job and earns an unstable income. His elderly parents are dependent on him financially. At age 38, he takes out:

- (1) C ritiPartner with sum insured of HKD1,000,000; and
- (2) Cancer Therapy Insurance II Supplement (Superior benefit level)

*This illustrative example is for reference only (Terminal dividend and Index-linked Increase Endorsement are not illustrated in this example).*

Timmy is diagnosed with lung Cancer at age 46. He conducts a surgery to remove a portion of the lung at a private hospital. 1.5 years later, Timmy continues to receive chemotherapy and target therapy until recovery.

Benefits payable to Timmy include:



How can we help Timmy?



### Immediate financial relief

Helps Timmy cope with everyday expenses such as tuition fees and mortgage repayment, safeguarding his family against the financial impact brought by the illness



### Coping with medical expenses

Eases the financial burden of medical expenses so that Timmy can focus on his recovery



### Income replacement

Gives Timmy long-term financial support to maintain his family's lifestyle when he is absent from work

Note: Assuming (a) the relevant illnesses are not excluded from the coverage of **C ritiPartner** and have fulfilled the relevant eligibility requirements and conditions as set out in the policy contract; (b) no other claim has been paid and / or becomes payable under the policy; (c) there is no indebtedness under the policy; (d) Timmy does not make any change to the sum insured of **C ritiPartner** throughout the contract term of the policy; and (e) all premiums are paid in full when due and as planned.

**Table 1: Major illnesses covered**

Major illness <sup>(a)</sup>	
<b>Major illnesses related to Cancer</b>	
1. Cancer <sup>(b)</sup>	2. Carcinoma-in-situ of Breast Treated with Radical Mastectomy and Radiotherapy
<b>Major illnesses related to Heart and Blood Vessels</b>	
3. Cardiomyopathy	8. Heart Attack
4. Coronary Artery Angioplasty - Triple Vessel	9. Heart Valve Surgery
5. Coronary Artery Bypass Surgery	10. Primary Pulmonary Arterial Hypertension
6. Dissecting Aortic Aneurysm	11. Severe Infective Endocarditis
7. Eisenmenger's Syndrome	12. Surgery to Aorta
<b>Major illnesses related to the Nervous System</b>	
13. Amyotrophic Lateral Sclerosis	22. Multiple Sclerosis
14. Apallic Syndrome	23. Muscular Dystrophy <sup>(c)</sup>
15. Bacterial Meningitis	24. Paralysis
16. Benign Brain Tumour	25. Poliomyelitis
17. Blindness	26. Progressive Bulbar Palsy
18. Encephalitis	27. Progressive Supranuclear Palsy <sup>(c)</sup>
19. Hemiplegia	28. Spinal Muscular Atrophy <sup>(c)</sup>
20. Major Head Injury <sup>(c)</sup>	29. Stroke
21. Motor Neurone Disease	30. Tuberculosis Meningitis
<b>Major illnesses related to Organ Failure</b>	
31. Chronic Adrenal Insufficiency (Addison's Disease)	36. Loss of Capacity for Independent Living <sup>(d)</sup>
32. Chronic and Irreversible Kidney Failure	37. Major Organ or Bone Marrow Transplantation
33. Chronic Liver Disease	38. Medullary Cystic Disease
34. Coma	39. Pheochromocytoma
35. End Stage Lung Disease	
<b>Major illnesses related to Blood</b>	
40. AIDS / HIV due to Blood Transfusion	42. Occupationally Acquired AIDS / HIV
41. Aplastic Anaemia	
<b>Major illnesses related to the Digestive System</b>	
43. Chronic Relapsing Pancreatitis	45. Severe Crohn's Disease
44. Fulminant Hepatitis	46. Severe Ulcerative Colitis
<b>Major illnesses related to Immunology and Rheumatology</b>	
47. Severe Rheumatoid Arthritis	49. Systemic Scleroderma
48. Systemic Lupus Erythematosus (S.L.E.) with Lupus Nephritis	
<b>Major illnesses related to Neurological Degeneration</b>	
50. Parkinson's Disease	52. Severe Dementias
51. Severe Creutzfeld-Jacob Disease (CJD)	

**Table 1: Major illnesses covered (cont'd)**

Major illness <sup>(a)</sup>	
<b>Major illnesses related to the Musculoskeletal System</b>	
53. Amputation of Feet due to Complication from Diabetes	56. Severance of Limbs
54. Major Burns	57. Severe Myasthenia Gravis
55. Necrotising Fasciitis	
<b>Other major illnesses</b>	
58. Deafness (Loss of Hearing)	61. Loss of Speech
59. Ebola Hemorrhagic Fever	62. Terminal Illness
60. Elephantiasis	

**Table 2: Minor illnesses covered**

Minor illness <sup>(a)</sup>	
<b>Minor illnesses related to Cancer</b>	
1. Carcinoma-in-situ (as set out in Table 5 below)	2. Early Stage Cancer of Specified Organs <sup>(e)</sup>
<b>Minor illnesses related to Heart and Blood Vessels</b>	
3. Angioplasty and other Invasive Treatments for Coronary Artery	9. Keyhole Coronary Bypass Surgery
4. Aortic Aneurysm	10. Less Severe Heart Attack
5. Early Cardiomyopathy	11. Moderately Severe Infective Endocarditis
6. Endovascular Treatment of Peripheral Arterial Disease	12. Percutaneous Valve Surgery
7. Insertion of a Veno-cava Filter	13. Pericardectomy
8. Insertion of Pacemaker or Defibrillator	
<b>Minor illnesses related to the Nervous System</b>	
14. Carotid Artery Surgery or Intracranial Artery Surgery	21. Glaucoma Surgical Treatment
15. Cerebral Aneurysm or Arteriovenous Malformation Requiring Surgery	22. Moderately Severe Bacterial Meningitis
16. Cerebral Shunt Insertion	23. Moderately Severe Encephalitis
17. Early Amyotrophic Lateral Sclerosis	24. Moderately Severe Muscular Dystrophy <sup>(c)</sup>
18. Early Spinal Muscular Atrophy <sup>(c)</sup>	25. Surgery for Subdural Haematoma
19. Early Stage Major Head Injury <sup>(c)</sup>	26. Surgical Removal of Pituitary Tumour
20. Facial Reconstructive Surgery for Injury due to Accident	
<b>Minor illnesses related to Organ Failure</b>	
27. Chronic Auto-immune Hepatitis	30. Major Organ Transplantation (On Waitlist)
28. Interstitial Lung Fibrosis	31. Surgical Removal of One Kidney
29. Liver Surgery	32. Surgical Removal of One Lung
<b>Minor illnesses related to Blood</b>	
33. Acute Aplastic Anaemia	
<b>Minor illnesses related to the Digestive System</b>	
34. Acute Necrohemorrhagic Pancreatitis	36. Hepatitis with Cirrhosis
35. Biliary Tract Reconstruction Surgery	



**Table 2: Minor illnesses covered (cont'd)**

Minor illness <sup>(a)</sup>	
<b>Minor illnesses related to Immunology and Rheumatology</b>	
37. Early Systemic Scleroderma	39. Systemic Lupus Erythematosus (S.L.E.)
38. Moderately Severe Rheumatoid Arthritis	
<b>Minor illnesses related to Neurological Degeneration</b>	
40. Moderately Severe Creutzfeld-Jacob Disease (CJD)	42. Moderately Severe Parkinson's Disease
41. Moderately Severe Dementias	
<b>Minor illnesses related to the Musculoskeletal System</b>	
43. Amputation of One Foot due to Complication from Diabetes	46. Moderately Severe Burns
44. Nephropathy due to Complication from Diabetes	47. Moderately Severe Myasthenia Gravis
45. Retinopathy due to Complication from Diabetes	48. Severance of One Limb
<b>Other minor illnesses</b>	
49. Benign Condition Critical Surgery <sup>(f)</sup>	52. Loss of Speech due to Vocal Cord Paralysis
50. Cochlear Implant Surgery	53. Severe Psychiatric Illness
51. Early Elephantiasis	

**Table 3: Juvenile minor illnesses covered**

Minor illness <sup>(a)</sup> for juvenile <sup>(g)</sup>	
1. Autism	8. Rheumatic Fever with Valvular Impairment
2. Hemophilia A and Hemophilia B	9. Severe Asthma
3. Insulin Dependent Diabetes Mellitus	10. Severe Dengue Haemorrhagic Fever
4. Juvenile Huntington Disease	11. Still's Disease
5. Kawasaki Disease with Heart Complication	12. Type I Juvenile Spinal Amyotrophy
6. Osteogenesis Imperfecta	13. Wilson's Disease
7. Pompe's Disease	

**Table 4: Benign condition critical surgeries covered**

Organs	Benign condition critical surgeries <sup>(f)</sup>
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

**Table 4: Benign condition critical surgeries covered (cont'd)**

Organs	Benign condition critical surgeries <sup>(f)</sup>
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 tumor
	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 tumor
Urinary system	21. Radical cystectomy and orthotopic bladder reconstruction, laparoscopic with robot assistance
	22. Total cystectomy & cystoplasty

**Table 5: Carcinoma-in-situ covered**

Carcinoma-in-situ – all organs except skin, including but not limited to the organs listed below			
1. Ampulla of vater	10. Fallopian tube	19. Oesophagus	28. Stomach
2. Anal canal	11. Gallbladder	20. Oral cavity	29. Tear duct
3. Bladder <sup>(h)</sup>	12. Kidney	21. Ovary	30. Testicles
4. Breast	13. Larynx	22. Pancreas	31. Ureter
5. Cervix uteri <sup>(i)</sup>	14. Lip	23. Penis	32. Urethra
6. Colon	15. Liver	24. Pharynx (including tongue, soft palate and uvula)	33. Vagina
7. Conjunctiva	16. Lung	25. Rectum	34. Vulva
8. Corpus uteri	17. Maxillary sinus	26. Renal pelvis	
9. Extra-hepatic bile duct	18. Nasopharynx	27. Small intestine (including duodenum, jejunum and ileum)	

- (a) Major Illness Benefit / Minor Illness Benefit / Diabetes Complications Protection Benefit / Multiple Claims Major Illness Benefit / Continuous Cancer Payout Benefit are payable according to the definitions of the major illnesses and minor illnesses as set out in the policy contract of the basic plan.
- (b) Cancer does not include (1) all chronic lymphocytic leukaemia classified as less than RAI stage III; (2) all prostate tumours which are histologically classified as less than T2N0M0 according to the TNM classification system and having a Gleason score below 7; (3) all thyroid tumours which are histologically classified as T1N0M0 or a lower stage according to the TNM classification system; and (4) all skin tumours except malignant melanoma. For full details, please refer to the policy contract.
- (c) To be eligible to receive a benefit, the insured must be above age 5 at the time of first diagnosis.
- (d) To be eligible to receive a benefit, the insured must be between age 15 and age 75 at the time of first diagnosis.
- (e) Early Stage Cancer of Specified Organs means the presence of any one of the following malignant conditions: (1) prostate tumours which are histologically classified as less than T2N0M0 according to the TNM classification system and having a Gleason score below 7; (2) chronic lymphocytic leukaemia classified as RAI stage I or RAI stage II; (3) thyroid tumours which are histologically classified as T1N0M0 according to the TNM classification system; and (4) non-melanoma skin cancer which are classified as AJCC stage I or above. For full details, please refer to the policy contract.
- (f) For full details of benign condition critical surgery, please refer to the policy contract.
- (g) To be eligible to receive benefit from the illnesses as listed in the table, the insured must be under age 22 at the time of first diagnosis.
- (h) For Carcinoma-in-situ of bladder, stage Ta and Tis of papillary carcinoma is included.
- (i) For Carcinoma-in-situ of cervix uteri, it must be at a grading of not less than CIN III and be positively diagnosed upon the basis of a microscopic examination of fixed tissue from a cone biopsy or colposcopy with cervical biopsy.

## CritiPartner at a glance

Premium payment term and issue age	10 years (age 0 – 65)	15 years (age 0 – 60)	20 years (age 0 – 55)	25 years (age 0 – 50)
<b>Benefit period</b>	Up to age 100 (except Multiple Claims Major Illness Benefit and Continuous Cancer Payout Benefit which are up to age 85)			
<b>Premium<sup>#</sup></b>	<ul style="list-style-type: none"> <li>Will not be adjusted based on the insured's attained age</li> <li>Premium rates are not guaranteed</li> </ul>			
<b>Minimum sum insured<sup>*</sup></b>	<ul style="list-style-type: none"> <li>Below age 45 : HKD120,000<sup>21</sup></li> <li>Age 45 or above : HKD80,000<sup>21</sup></li> </ul>			
<b>Total coverage<sup>11</sup></b>	Up to 500% of the sum insured			
<b>Major Illness Benefit<sup>5</sup></b>	100% of the sum insured plus any terminal dividend, minus any amount claimed for the Minor Illness Benefit and Diabetes Complications Protection Benefit			
<b>Minor Illness Benefit<sup>5, 6</sup></b>	20% of the sum insured for each claim, subject to a maximum of HKD400,000 / MOP400,000 / USD50,000 for each minor illness			
<b>Diabetes Complications Protection Benefit<sup>5, 6</sup></b>	In addition to Minor Illness Benefit, 20% of the sum insured will be payable, subject to a maximum of HKD400,000 / MOP400,000 / USD50,000 (including the benefits paid and payable under Minor Illness Benefit and Diabetes Complications Protection Benefit) for each minor illness due to diabetes complications			
<b>Multiple Claims Major Illness Benefit<sup>5, 8</sup></b>	After all benefits paid and payable reach 100% of the sum insured, <b>CritiPartner</b> will continue to cover a maximum of 4 claims for Cancer, Heart Attack and Stroke, together with Continuous Cancer Payout Benefit, up to 400% of the sum insured			
<b>Continuous Cancer Payout Benefit<sup>5, 8, 9</sup></b>	5% of the sum insured each month, up to 240% of the sum insured (together with the previously claimed Major Illness Benefit and / or Multiple Claims Major Illness Benefit for Cancer, up to 340% of the sum insured in total)			
<b>Extra Coverage Benefit<sup>14</sup></b>	An extra 50% of the sum insured will be payable if a Major Illness Benefit or death benefit is payable before the 10 <sup>th</sup> policy anniversary			
<b>Partner 20 Benefit<sup>19, 20</sup></b>	If <b>CritiPartner</b> is applied together with Cancer Therapy Insurance II Supplement or Cancer And Stroke Therapy Insurance Supplement, an extra 50% of the sum insured will be payable if a Major Illness Benefit or death benefit is payable under <b>CritiPartner</b> during the first 20 policy years / before the policy anniversary on or immediately following the insured's 75 <sup>th</sup> birthday, whichever is earlier			
<b>Guaranteed cash value<sup>13</sup></b>	Payable upon the surrender or maturity of the policy			
<b>Terminal dividend<sup>13</sup></b>	Non-guaranteed; payable after the policy has been in force for 5 years on the earliest occurrence of the following: <ul style="list-style-type: none"> <li>when all benefits payable under the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit reach 100% of the sum insured; or</li> <li>the surrender of the policy; or</li> <li>the maturity of the policy; or</li> <li>the death of the insured</li> </ul>			
<b>Surrender value<sup>5</sup></b>	100% of the guaranteed cash value plus any terminal dividend as at the policy surrender date, minus any claimed amount for the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit			
<b>Maturity value<sup>5</sup></b>	100% of the guaranteed cash value plus any terminal dividend as at the policy maturity date, minus any claimed amount for the Minor Illness Benefit and Diabetes Complications Protection Benefit			
<b>Death benefit<sup>5, 12</sup></b>	100% of the sum insured plus any terminal dividend, minus any claimed amount for the Minor Illness Benefit and Diabetes Complications Protection Benefit			
<b>Extended Grace Period Benefit<sup>17</sup></b>	Starting from the 2 <sup>nd</sup> policy year, extension of the grace period up to 365 days (inclusive of the usual grace period of 31 days) will be available if the insured: <ul style="list-style-type: none"> <li>gets married; or</li> <li>becomes a parent; or</li> <li>is made redundant or laid off; or</li> <li>becomes divorced</li> </ul>			

<sup>#</sup> Please refer to **Premium adjustment** under the section Important information for details.

<sup>\*</sup> We offer Macau policies denominated in Macau Pataca (MOP) or other available currency(ies).



## The conditions required for Multiple Claims Major Illness Benefit<sup>5, 8</sup> and Continuous Cancer Payout Benefit<sup>5, 8, 9</sup>

### Multiple Claims Major Illness Benefit

A maximum of 4 eligible claims are allowed under the “Multiple Claims Major Illness Benefit” Provision subject to the requirements stated below:

#### **(a) Covered major illnesses**

Only Cancer, Heart Attack and Stroke will be covered under this benefit.

#### **(b) Multiple claims for Cancer**

A maximum total of 3 eligible claims for Cancer will be allowed under Major Illness Benefit<sup>5</sup> and this Multiple Claims Major Illness Benefit of the basic plan provided that:

where a Major Illness Benefit or a Multiple Claims Major Illness Benefit has been paid in respect of any Cancer(s) (“Preceding Cancer(s)”) under the basic plan, and the insured is later diagnosed as suffering from a Cancer (“Later Cancer”), any claim for the Later Cancer shall not be considered as an eligible claim unless:

- (1) the Later Cancer is a new Cancer caused by a different malignant cell origin from the Preceding Cancer(s) and the date of diagnosis of the Preceding Cancer (which is immediately preceding the Later Cancer) and that of the Later Cancer are separated by at least 1 year; or
- (2) the Later Cancer is a recurrence or metastasis or continuation of any Cancer (regardless of whether it is the recurrence or metastasis or continuation of Preceding Cancer(s)), and the date of diagnosis of the Preceding Cancer (which is immediately preceding the Later Cancer) and that of the Later Cancer are separated by at least 3 years.

Any claim for recurrence, metastasis or continuation of a Cancer will not be considered as an eligible claim unless a Major Illness Benefit or Multiple Claims Major Illness Benefit has been paid for Cancer under the basic plan and the requirements as set out in the provision have been fulfilled.

In case of recurrence or metastasis or continuation of any Cancer, the date of diagnosis shall mean the date of a report of any objective diagnostic procedures that confirm the existence of Cancer, performed on a date at least 3 years after the date of diagnosis of the immediate Preceding Cancer (for which a Major Illness Benefit or a Multiple Claims Major Illness Benefit has been paid). For the avoidance of doubt, clinical diagnosis alone does not meet the standard as an objective medical evidence for such recurrence or metastasis or continuation of Cancer.

In the case of recurrence or metastasis or continuation of prostate Cancer, if the date of diagnosis of such recurrence or metastasis or continuation of prostate Cancer is after age 70 of the insured, the insured should have received Cancer Treatment on the recommendation of a specialist during the period between the date of diagnosis of the Preceding Cancer (which is immediately preceding such recurrence or metastasis or continuation of prostate Cancer) and date of diagnosis of such recurrence or metastasis or continuation (both dates inclusive).

Multiple Claims Major Illness Benefit for Later Cancer is subject to provisions under “BENEFIT PROVISION – CONTINUOUS CANCER PAYOUT BENEFIT” in policy contract.

#### **(c) Multiple claims for Heart Attack and Stroke**

An aggregate maximum total of 2 eligible claims for Heart Attack and Stroke will be allowed under Major Illness Benefit and this Multiple Claims Major Illness Benefit of the basic plan.

In case of both claims are Heart Attack claims, the 2<sup>nd</sup> claim of Heart Attack shall fulfil the additional conditions and / or requirements as set out below:

In order to qualify for a benefit under Heart Attack for the 2<sup>nd</sup> time, a specialist must certify the diagnosis of another episode of acute Myocardial Infarction and the diagnosis must be supported with new evidence at least 1 year after the date of diagnosis of the preceding eligible claim of Heart Attack (for which benefit has been paid).

As for the 2<sup>nd</sup> claim for Heart Attack, the date of diagnosis shall mean the date when the 2<sup>nd</sup> Heart Attack is diagnosed as having fulfilled the meaning together with the terms and conditions stated in the definition of Heart Attack and the above additional conditions and / or requirements.

In case of both claims are Stroke claims, the 2<sup>nd</sup> claim of Stroke shall fulfil the additional conditions and / or requirements as set out below:

In order to qualify for a benefit under Stroke for the 2<sup>nd</sup> time, a specialist must certify the diagnosis of a new Stroke and the diagnosis must be supported with new imaging evidence at least 1 year after the date of diagnosis of the preceding eligible claim of Stroke (for which benefit has been paid).

As for the 2<sup>nd</sup> claim for Stroke, the date of diagnosis shall mean the date when the 2<sup>nd</sup> Stroke is diagnosed as having fulfilled the meaning together with the terms and conditions stated in the definition of Stroke and the above additional conditions and / or requirements.

#### **(d) Intervals between 2 major illnesses in the eligible claims**

In addition to the other requirements (including the different intervals required in different scenarios) as set out in the provisions, the date of diagnosis of (1) and (2) as set out below shall be separated by at least 1 year:

- (1) the major illness in the preceding eligible claim (which is immediately preceding the eligible claim in (2) below); and
- (2) the major illness in the subsequent eligible claim.

#### **Continuous Cancer Payout Benefit**

A maximum of 240% of sum insured of eligible claims for Cancer under the basic plan are allowed under the “Continuous Cancer Payout Benefit” Provision subject to the requirements stated below:

where a Major Illness Benefit or a Multiple Claims Major Illness Benefit has been paid in respect of any Preceding Cancer (for the purpose of this Continuous Cancer Payout Benefit, as defined under the sub-heading “Multiple Claims for Cancer” in “BENEFIT PROVISION – MULTIPLE CLAIMS MAJOR ILLNESS BENEFIT” in policy contract) and the insured is later diagnosed as suffering from a Later Cancer, any claim for the Later Cancer shall not be considered as an eligible claim unless:

- (1) the Later Cancer is a new, recurrence, metastasis or continuation of any Cancer (regardless of whether it is the recurrence or metastasis or continuation of Preceding Cancer(s)), and the date of diagnosis of the Preceding Cancer (for which a Major Illness Benefit or a Multiple Claims Major Illness Benefit has been paid) and that of the Later Cancer are separated by at least 18 months; and
- (2) we receive from you a report compiled by a specialist of any objective diagnostic procedures that confirm the existence of Cancer, performed on a date at least 18 months after the date of diagnosis of the Preceding Cancer (for which a Major Illness Benefit or a Multiple Claims Major Illness Benefit has been paid); and
- (3) we receive from you a report showing that the insured has received Cancer Treatment on a date at least 18 months after the date of diagnosis of the Preceding Cancer (for which a Major Illness Benefit or a Multiple Claims Major Illness Benefit has been paid) on the recommendation of a specialist.

You will provide us with the following report(s) on a continuous basis in order to be eligible to this Continuous Cancer Payout Benefit. Your failure to do so will immediately cease the monthly payout of Continuous Cancer Payout Benefit:

- (1) a report of any objective diagnostic procedures that confirm the existence of Cancer as at the date of the report; and
- (2) a report confirming that the insured is treated with on-going Cancer Treatment as at the date of the report,

each compiled by a specialist, submitted to and received by us on a date at least 6 months but not more than 7 months from the date of diagnosis of the relevant Later Cancer or the date of immediately preceding report submitted to us, as the case may be, whether or not the reports submitted for the purpose respectively of (1) and (2) above covering the same period will be contained within the same document submitted to us.

For the avoidance of doubt, clinical diagnosis alone does not meet the standard as an objective medical evidence for such new, recurrence, metastasis or continuation of Cancer.

Once Continuous Cancer Payout Benefit has been paid under **CritiPartner** for any period, no Multiple Claims Major Illness Benefit for Cancer will be payable for any Cancer.



## Important information

### Cooling-off period

If you are not completely satisfied with the policy, you have the right to cancel it by returning the policy and giving written request. Such letter of request must be signed by you and received directly by our Customer Service at Suite 2001, 20/F, Tower Two, Times Square, 1 Matheson Street, Causeway Bay, Hong Kong / Avenida do Infante D. Henrique No.43-53A, 20 Andar, The Macau Square, Macau within 21 days after the delivery of the policy or issue of the notice (informing about the availability of the policy and the expiry date of the cooling-off period) to you or your representative, whichever is earlier. The policy will then be cancelled and a refund of any premium(s) paid will be returned to you on the condition that no claim has been admitted.

### Non-guaranteed benefits

#### Dividend philosophy

The plan is designed to provide you with all-round critical illness insurance protection, and at the same time an additional return through a combination of:

- (a) guaranteed benefits, such as cash value and various critical illness benefits; and
- (b) non-guaranteed terminal dividend.

#### How do we determine your terminal dividend?

The premiums from you and the owners of other policies pooled together will form a participating fund and will be invested. We will make deductions for expenses, surrenders, claims, charges and profit sharing from this participating fund, while it earns investment returns. The value of this participating fund is called the “asset share”. It is an important reference to help us determine your terminal dividend.

When we determine the amount of the terminal dividend of your policy, we will take into account the following:

- (a) the asset share;
- (b) both the current and the expected future amount of guarantees; and
- (c) the returns we expect the participating fund to earn in the future.

In the plan, profit and loss arising from investment, claims, expenses and policy persistency will impact your terminal dividend. To align our interest with yours, we aim to share with you 65% of the profit and loss while the remaining 35% goes to us.

Your participating policy is designed to be held for long term. When we determine your terminal dividend, we also take into account the policy duration, and it is adjusted downward in the early policy years to reflect this.

#### What will affect your terminal dividend?

We consider the past performance and future outlook of the following factors when determining your terminal dividend and they may significantly affect it.

##### Investment return

This includes changes in interest rates that will cause changes in interest earnings, as well as changes in market value of the assets in the participating fund due to changes in financial markets and economic conditions. These may result from risks or changes in factors, such as interest rates, currency risk, liquidity risk, credit / default risk, volatility risk and also general investment conditions.

##### Claims

These include the cost of providing death benefit and other insurance benefits. If the amount of benefit claims turns out to be higher, your terminal dividend will be lower.

##### Policy persistency

If policies lapse or are surrendered (whether in full or partially), profits or losses arise when the benefits paid out differ from the asset share of the terminated policies. Such profits or losses will be added to the asset share of the remaining policies.

##### Expenses

These include both expenses directly related to the policy (e.g. distribution costs and taxes) and indirect expenses allocated to the product group (e.g. office rent). If the actual expenses become higher, there will be less money available to pay you as terminal dividend.

We may also apply smoothing when determining the terminal dividend. The value of the participating fund may go up and down sharply within days. Instead of sharing with you the gains or losses immediately, we may even out some short-term fluctuations.

As your policy will be grouped together with other similar policies, the terminal dividend of your policy may also vary if the characteristics of policies in your group change.

Based on these, we conduct a detailed analysis of the participating business and make recommendation of the terminal dividend to be declared at least annually.

## Investment objective and strategy

### Investment objective

The overall objective of investing the participating fund is to ensure that the guarantees we committed to the policies are met, while seeking competitive and stable returns over a medium to long term.

### Investment strategy

We employ a rigorous and disciplined approach in determining strategic asset allocations which defines the nature of assets and how much we invest in. We monitor market positions carefully and frequently, and update our allocations when appropriate. In addition, we may complement our investment strategies with the use of derivatives and other financial agreements to manage liquidity, achieve an efficient and effective risk management and / or capture attractive investment opportunities.

From time to time we will review the investment strategies and asset allocations, and will modify them if necessary. We aim to ensure all guarantees are met while maintaining non-guaranteed return potential for the terminal dividend. We also assess factors such as risk tolerance, changes in market conditions and economic outlook in order to maintain an optimal portfolio.

### Selection of assets

We maintain a robust asset portfolio for the participating funds by investing in a wide range of investments, primarily with exposure to the U.S. and Asia (including Hong Kong and China). Generally, we aim to match the currency of the investments and the underlying policy currency denomination to the extent appropriate investments are available and acceptable. However, taking into consideration the aforementioned market constraints, we also invest in assets that are not denominated in the same currency as the underlying policies ("currency mismatch"). In such case, we may consider using derivatives to hedge the currency risk, and more broadly to ensure a proper matching between the assets and the policies. Overall, we target to limit the extent of currency mismatch, except for some specific strategies where it may bring additional returns or be a source of diversification. We also aim at maintaining adequate liquidity with respect to the policies and an appropriate level of risk diversification.

### Asset allocations

You can find the current target asset allocations below:

Assets	Allocations*
Government bonds, corporate bonds and other similar instruments	45% - 75%
Growth assets	25% - 55%

\* There may be some holdings in cash. In addition, we may accept certain degree of deviation from the above targets in order to manage the portfolio efficiently.

For more details, please refer to the relevant participating policy fact sheet which can be found at our website <https://www.axa.com.hk/participating-policy-fact-sheets> or <https://www.axa.com.mo/en/participating-policy-fact-sheets>.

For the fulfilment ratios and total value ratios of our participating life insurance plans, please refer to our website at <https://www.axa.com.hk/fulfilment-ratios-and-total-value-ratios> or <https://www.axa.com.mo/en/fulfilment-ratios-and-total-value-ratios>.

## Policy currency

If your policy is denominated in a currency other than your local currency, you may face an exchange rate risk. Upon currency conversion, the amounts you receive and the premiums you pay may vary as a result of changes in exchange rate.

## Premium adjustment

The premium is calculated with reference to a number of factors including but not limited to the age, gender, smoking habit and risk class of the insured at the time of policy issuance and will not increase subsequently based on the insured's attained age. However, premium rates are not guaranteed. We reserve the right to review and adjust the premium rates on each policy anniversary with reference to the past performance and future outlook of factors such as claims, investment returns, policy persistency and expenses.

## Non-payment of premium

You should pay premiums for the whole of your premium payment term. Any premiums remaining outstanding at the end of the grace period (i.e. 31 days after premium due date) may lead to termination of your policy. You may lose the insurance protection offered by the policy and the policy value (if any) to be received may be considerably less than your premiums paid.

## Early surrender

The policy is designed to be held for long term. Early surrender of the policy may result in a significant loss where you may get back considerably less than your premiums paid.

## Inflation

The cost of living in the future is likely to be higher than it is today due to inflation. In case the actual rate of inflation is higher than expected, the purchasing power of the amounts you receive under the policy may be lower than expected.

## Termination

When no further benefits or coverage under Major Illness Benefit, Minor Illness Benefit, Diabetes Complications Protection Benefit, Continuous Cancer Payout Benefit and Multiple Claims Major Illness Benefit will be provided under the basic plan, the sum insured will be reduced to zero and the coverage under the basic plan will automatically terminate.

The policy will automatically terminate upon the earliest occurrence of any of the following:

- (a) on the death of the insured; or
- (b) on the maturity date of the policy (i.e. on the policy anniversary on or immediately following the insured's 100<sup>th</sup> birthday, whichever is earlier); or
- (c) when the last subsisting attached supplement (apart from any attached Waiver of Premium Supplement / Applicant's Waiver of Premium at Death Supplement / Applicant's Waiver of Premium at Death or Disability Supplement, if any) is terminated in case where coverage under the basic plan has already been terminated; or
- (d) when the indebtedness equals or exceeds the cash value minus the aggregate amount of all benefits paid and payable under the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit of the basic plan; or
- (e) when there is no further coverage under the basic plan and all attached supplements and endorsements (if any); or
- (f) when the policy lapses, or is cancelled or surrendered; or
- (g) when this right of policy termination is exercised pursuant to the "Source of Funds; No Money Laundering, No Tax Evasion" Provision (Clause 19.1), "Breach of Representations; Company's Right to Terminate" Provision (Clause 19.2) and "Policy of Cooperating with Tax and Other Governmental Authorities; Consent to Disclose Information to Tax and Other Governmental Authorities" Provision (Clause 19.3) of the policy.

### Key exclusions

If the insured commits suicide within 1 year from the policy date or any date of reinstatement of the policy, whichever is later, whether sane or insane, the death proceeds will be limited to a refund of the premiums paid without interest. The amount of premiums to be refunded will be calculated from the policy date or any date of reinstatement of the policy, whichever is later.

If the insured commits suicide within 1 year from the date of approval of any increase in the sum insured, whether sane or insane, such increase shall be deemed not to have taken effect in determining the death proceeds payable. The additional premium paid for the increase in the sum insured will be refunded.

No benefit will be payable under the Major Illness Benefit, Minor Illness Benefit, Diabetes Complications Protection Benefit, Multiple Claims Major Illness Benefit or Continuous Cancer Payout Benefit of the basic plan:

- if the insured experiences symptoms or signs for (even if the insured has not consulted a medical practitioner); or receives treatment, medication or investigation for; or is diagnosed with any covered illness (except for any covered illness, which is solely and directly caused by an accident and independently of any other causes) within a period of 60 days following the policy date or any date of reinstatement, whichever is later;
- if any illnesses are resulted (directly or indirectly) from or caused or contributed by (in whole or in part) any of the following:
  - (a) any Pre-Existing Conditions (as defined below); or
  - (b) any congenital defect or disease which has manifested or was diagnosed before the insured attains age 18 (except Eisenmenger's Syndrome, Hemophilia A and Hemophilia B, Insulin Dependent Diabetes Mellitus, Interstitial Lung Fibrosis, Juvenile Huntington Disease, Osteogenesis Imperfecta, Pompe's Disease and Type I Juvenile Spinal Amyotrophy); or
  - (c) 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 AIDS / HIV due to Blood Transfusion and Occupationally Acquired AIDS / HIV); or
  - (d) any self-inflicted injury or suicide, whether sane or insane; or
  - (e) intoxication by alcohol or drugs not prescribed by a medical practitioner; or
  - (f) any criminal act; or
  - (g) travel in any aircraft, except as a fare paying passenger in a commercial aircraft or aircrew working on an aircraft.

"Pre-Existing Condition" shall mean any condition, disability, illness or injury:

- (i) which existed or continued to exist; or
  - (ii) for which the insured experienced symptoms or signs (even if the insured has not consulted a medical practitioner); or
  - (iii) for which the insured had received or continued to receive treatment, medication or any investigation; or
  - (iv) where diagnostic tests showed the pathological existence;
- prior to the policy date or any date of reinstatement, whichever is later.

- In respect of each claim for Multiple Claims Major Illness Benefit, no benefit will be payable if the insured dies within 14 days from the date of diagnosis of the major illness (including the date of diagnosis).
- In respect of Continuous Cancer Payout Benefit, no benefit will be payable if the insured dies within 14 days from the date of immediately preceding Cancer report submitted to us as specified under "BENEFIT PROVISION – CONTINUOUS CANCER PAYOUT BENEFIT" provision (including the date of such report submitted).

For full details of exclusions, please refer to the policy contract.

### Levy on insurance premium (Only applicable to the policies issued in Hong Kong)

Levy collected by the Insurance Authority through the Company will be imposed on the policy at the applicable rate. Policyholders must pay the levy in order to avoid any legal consequences.

## Rights of third parties

### Applicable to the policies issued in Hong Kong

The policy is excluded from the application of the Contracts (Rights of Third Parties) Ordinance (Cap 623 of the Laws of Hong Kong) ("TP Ordinance"). Any person or entity which is not a party to the policy shall have no rights under the TP Ordinance to enforce any terms of the policy.

### Applicable to the policies issued in Macau

Any person or entity which is not a party to the policy shall have no rights to enforce any terms of the policy.

## U.S. Foreign Account Tax Compliance Act

Under the U.S. Foreign Account Tax Compliance Act ("FATCA"), a foreign financial institution ("FFI") is required to report to the U.S. Internal Revenue Service ("IRS") certain information on U.S. persons that hold accounts with that FFI outside the U.S. and to obtain their consent to the FFI passing that information to the IRS. An FFI which does not sign or agree to comply with the requirements of an agreement with the IRS ("FFI Agreement") in respect of FATCA and / or who is not otherwise exempt from doing so (referred to as a "nonparticipating FFI") will face a 30% withholding tax ("FATCA Withholding Tax") on all "withholdable payments" (as defined under FATCA) derived from U.S. sources (initially including dividends, interest and certain derivative payments).

The U.S. and Hong Kong / Macau have signed an inter-governmental agreement ("IGA") to facilitate compliance by FFIs in Hong Kong / Macau with FATCA and which creates a framework for Hong Kong / Macau FFIs to rely on streamlined due diligence procedures to (i) identify U.S. indicia, (ii) seek consent for disclosure from its U.S. policyholders and (iii) report relevant tax information of those policyholders to the IRS.

FATCA applies to the Company and this policy. The Company is a participating FFI. The Company is committed to complying with FATCA. To do so, the Company requires you to:

- (i) provide to the Company certain information including, as applicable, your U.S. identification details (e.g. name, address, the US federal taxpayer identifying numbers, etc); and
- (ii) consent to the Company reporting this information and your account information (such as account balances, interest and dividend income and withdrawals) to the IRS.

If you fail to comply with these obligations (being a "Non-Compliant Accountholder"), the Company is required to report "aggregate information" of account balances, payment amounts and number of non-consenting US accounts to IRS.

The Company could, in certain circumstances, be required to impose FATCA Withholding Tax on payments made to, or which it makes from, your policy. Currently the only circumstances in which the Company may be required to do so are:

- (i) if the Inland Revenue Department of Hong Kong / Macau Government fails to exchange information with the IRS under IGA (and the relevant tax information exchange agreement between Hong Kong / Macau and the U.S.), in which case the Company may be required to deduct and withhold FATCA Withholding Tax on withholdable payments made to your policy and remit this to the IRS; and
- (ii) if you are (or any other account holder is) a nonparticipating FFI, in which case the Company may be required to deduct and withhold FATCA Withholding Tax on withholdable payments made to your policy and remit this to the IRS.

You should seek independent professional advice on the impact FATCA may have on you or your policy.

## Remarks

1. A maturity value will be payable if the insured survives on the policy anniversary on or immediately following the insured's 100<sup>th</sup> birthday, whichever is earlier, provided that no Major Illness Benefit or death benefit has been paid or becomes payable under the basic plan.
2. If the surgery performed under benign condition critical surgery is directly or indirectly arising from or in connection with any other minor illness, the benefit under the policy is only payable for such minor illness.
3. The minor illnesses due to diabetes complications include (i) Amputation of One Foot due to Complication from Diabetes; (ii) Nephropathy due to Complication from Diabetes; and (iii) Retinopathy due to Complication from Diabetes.
4. Each minor illness can be claimed once only other than (i) Angioplasty and Other Invasive Treatments for Coronary Artery; and (ii) Carcinoma-in-situ, which a maximum of 2 Minor Illness Benefit claims are allowed for each of them, subject to the exclusions and terms and conditions of this benefit. A second claim payable under Minor Illness Benefit can be made subject to the additional conditions below:
  - For Angioplasty and Other Invasive Treatments for Coronary Artery: the treatment must be performed on a location of stenosis in major coronary artery where no stenosis of greater than 50% was identified in the medical examination relating to the first claim.
  - For Carcinoma-in-situ: the Carcinoma-in-situ is of a different covered organ from that of the first claim.
5. Any indebtedness and outstanding premiums will be deducted from the relevant benefit(s) when payable.
6. The aggregate amount of all benefits paid and payable under Minor Illness Benefit and Diabetes Complications Protection Benefit in respect of each covered minor illness of the insured under all policies issued by the Company and any authorised insurers in Hong Kong and / or Macau which are affiliated with the Company shall not exceed HKD400,000 / MOP400,000 / USD50,000 (as the case may be depending on the policy currency of the policy). The premiums remain unchanged after this benefit is paid except where all benefits paid and payable reach 100% of the sum insured.
7. The maximum number of claims includes the benefit payable for the Major Illness Benefit.
8. The aggregate amount of all benefits paid and payable under Multiple Claims Major Illness Benefit and Continuous Cancer Payout Benefit is subject to a maximum of 400% of the sum insured.

9. Continuous Cancer Payout Benefit will commence when (i) the aggregate amount of all benefits paid and payable under the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit of the basic plan reaches 100% of the sum insured; and (ii) after a Major Illness Benefit or Multiple Claims Major Illness Benefit has been paid for Cancer.
  10. Cancer Treatment is any surgery or treatment designed to potentially treat Cancer using one or a combination of interventions prescribed by or administered under the direct supervision of a specialist. It will not include any treatment given solely as palliative treatment. It includes but not limited to chemotherapy, radiotherapy and target therapy. Hormonal therapy is not included as Cancer Treatment.
  11. The Extra Coverage Benefit and the Partner 20 Benefit are excluded in the computation of the total coverage of 500% of the sum insured.
  12. Death benefit is only available while the aggregate amount of all benefits payable under the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit has not reached 100% of the sum insured. Once this benefit is payable, the policy will terminate.
  13. No guaranteed cash value and terminal dividend will be available after the aggregate amount of all benefits paid and payable under the Major Illness Benefit, Minor Illness Benefit and Diabetes Complications Protection Benefit reaches 100% of the sum insured.
  14. The benefit payable under the Extra Coverage Benefit is equivalent to 50% of the sum insured as at the date when the Major Illness Benefit or death benefit (as the case may be) becomes payable (excluding any amount of the sum insured which is increased by the Index-linked Increase Endorsement) before the 10<sup>th</sup> policy anniversary. This benefit will automatically cease and terminate if no Major Illness Benefit or death benefit is payable before the 10<sup>th</sup> policy anniversary. Any indebtedness and outstanding premiums will be deducted from the benefit when payable.
  15. The availability of Index-linked Increase Endorsement is subject to the Company's underwriting requirements.
  16. You have the option to decline the increase in sum insured and premium under the Index-linked Increase Endorsement of a particular policy year by giving us a written notice not later than 30 days after the relevant policy anniversary.  
  
The Index-linked Increase Endorsement will automatically terminate upon the earliest occurrence of any of the following: (a) when you decline 2 consecutive increases made in accordance with the conditions in the endorsement; or (b) on the day immediately preceding the 6<sup>th</sup> / 11<sup>th</sup> / 16<sup>th</sup> policy anniversary for premium payment term of the basic plan being 15 / 20 / 25 years respectively; or (c) on the policy anniversary on or immediately following the insured's 60<sup>th</sup> birthday; or (d) when any Minor Illness Benefit or Major Illness Benefit becomes payable; or (e) when the basic plan of the policy becomes fully paid-up. The endorsement is not applicable with premium payment term of 10 years.
  17. To be eligible for the Extended Grace Period Benefit, the policy owner must provide the relevant evidence to the Company. Please refer to the policy contract for further details.
  18. The details of the value-added services will be determined by AXA at its sole discretion and AXA reserves the right to amend the Critical Illness Support Programme 2 at any time without prior notice. The value-added services are provided by third-party service providers as AXA may designate from time to time. AXA shall not be responsible for any value-added services so provided or any act or failure to act on the part of the third-party service providers. The third-party service providers are solely responsible for all obligations and liabilities relating to such value-added services and all auxiliary services so provided. All matters and disputes are subject to the final decision of AXA and the third-party service providers.
  19. The maximum amount payable under the First 20 Years Enhanced Coverage Benefit (if any) and the Partner 20 Benefit shall be HKD1,000,000 / MOP1,000,000 / USD125,000 per life insured. Any portion of the sum insured which is increased by the Index-linked Increase Endorsement attached to the policy (if any) and Extra Coverage Benefit shall be excluded in the computation of the Partner 20 Benefit. At the time when the Partner 20 Benefit is payable, the basic plan and Cancer Therapy Insurance II Supplement or Cancer And Stroke Therapy Insurance Supplement (as the case may be) must be in force and all the premiums due under the basic plan and its supplement (if any) must be fully paid. This benefit will not be taken into account in determining the amount of terminal dividend payable under **CritiPartner**.
  20. Partner 20 Benefit will automatically cease and terminate on the 20<sup>th</sup> policy anniversary / on the policy anniversary on or immediately following the insured's 75<sup>th</sup> birthday, whichever is earlier.
  21. Please contact your financial consultant for availability of other currency(ies) and the respective minimum and maximum sum insured.
- Note: Unless otherwise specified, all ages mentioned in this product brochure refer to the age of the insured on his or her last birthday.

**CritiPartner Critical Illness Plan** is underwritten by AXA China Region Insurance Company (Bermuda) Limited (Incorporated in Bermuda with limited liability) ("AXA", the "Company", or "we").

The plan is subject to the terms, conditions and exclusions of the relevant policy contract. AXA reserves the final right to approve any application. This product brochure contains general information only and does not constitute any contract between any parties and AXA. It is not a policy. For detailed terms, conditions and exclusions of the plan, please refer to the relevant policy contract, which will be made available by the Company upon request.

## ABOUT AXA HONG KONG

AXA Hong Kong, a member of the AXA Group, prides itself of serving over 1 million customers<sup>1</sup> in Hong Kong and Macau. Besides being one of the largest health protection providers in Hong Kong, it is also the number 1 General Insurance provider<sup>2</sup> and the number 1 insurance brand worldwide for the ninth consecutive year<sup>3</sup>.

AXA Hong Kong has a clear goal of "empowering people to live a better life". This is reflected in everything we do. AXA Hong Kong is one of the most diversified insurer providing full range coverage for individual and commercial customers. We offer all-round, integrated solutions across Life, Health and Property & Casualty to address all their insurance needs.

AXA Hong Kong leverages on Big Data and AI to transform end-to-end customer experience, making insurance simpler and more personal. As an innovative insurer, we continue to drive innovation notably in health and protection, supporting customers in prevention, treatment and recovery.

We also believe it is our inherent responsibility to support the communities we operate in. The AXA Foundation is our flagship corporate social responsibility programme covering all of our efforts in promoting health, education and community support to create positive and lasting impact to Hong Kong.

<sup>1</sup> Including customers of AXA China Region Insurance Company Limited, AXA China Region Insurance Company (Bermuda) Limited (Incorporated in Bermuda with limited liability) and AXA General Insurance Hong Kong Limited

<sup>2</sup> Based on 2016 Insurance Authority market share statistics represented by overall gross premiums

<sup>3</sup> Interbrand Best Global Brand 2017 (By brand value)

AXA China Region Insurance Company (Bermuda) Limited  
(Incorporated in Bermuda with limited liability)





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## CritiPartner Critical Illness Plan Product Brochure

December 2018

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