



**CRITICAL  
ILLNESS  
PROTECTION**

# SMART ELITE ULTRA (SEU)

Have no fear  
Our love is with you all the way



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AIA International Limited  
(Incorporated in Bermuda with limited liability)



**HEALTHIER, LONGER,  
BETTER LIVES**

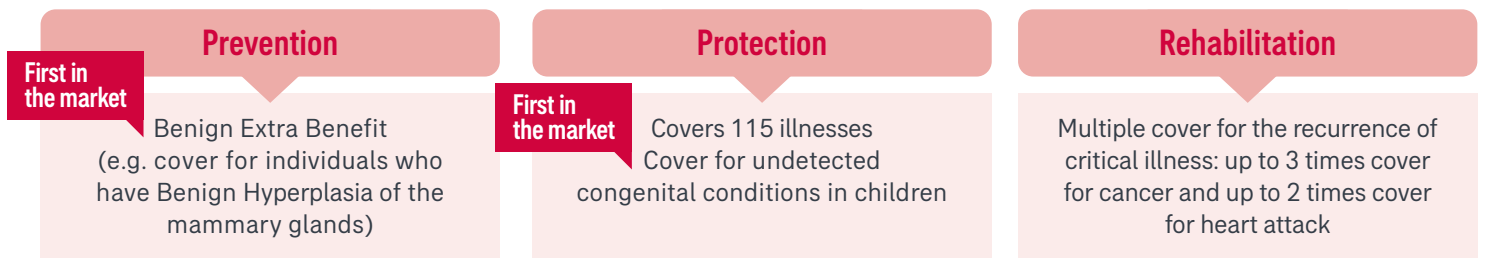
# Life can be full of relentless challenges when it comes to your wellbeing, so it's essential to plan ahead

## AIA is committed to extending cover to give protection to more people

Which is why we are the first in the market to expand our protection to individuals with benign conditions that could potentially increase the risk of cancer.

To meet the full range of your critical illness needs, we also provide you multiple cover as high as 900% of the amount you purchased.

As an integrated plan created to offer you multiple illnesses protection, life insurance protection and potential long term savings, the brand new Smart Elite Ultra takes care of different critical illness needs from prevention to protection, and rehabilitation, we stand by you to overcome every hurdle in life.

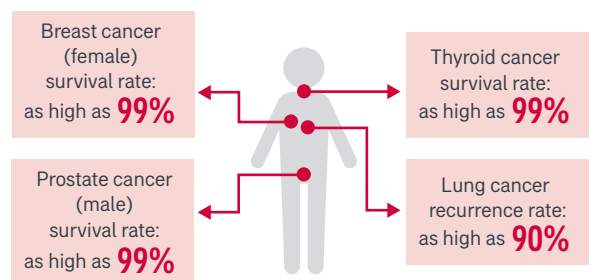


Critical illness is striking with increasing frequency even among the young, making it more common for individuals to suffer more than one critical illness in a lifetime. Fortunately, modern medical advancements have led to advanced diagnostics and new treatments for many critical illnesses, boosting the odds of overcoming illness again and again.

Studies conducted by professional medical organisations have revealed the following:

### Cancer

- Through medical advancement, cancer has become increasingly treatable and early diagnosis is known to improve survival rates. The 5-year survival rate for some cancers such as prostate cancer, breast cancer and thyroid cancer can be as high as **99%**<sup>1</sup>.
- Cancers may recur after treatment. For example, the chance for lung cancer to recur 2 years after chemotherapy could be as high as **90%**<sup>2</sup>. However, the sooner treatment begins, the higher the chance of recovery.



#### Sources:

1. American Cancer Society, Cancer Facts & Figures 2017, 2006-2012 statistics, 5-year relative survival rates for local cancers at diagnosis
2. Hong Kong Anti-Cancer Society, reproduced on Hospital Authority website (Data collection date: June 2017)

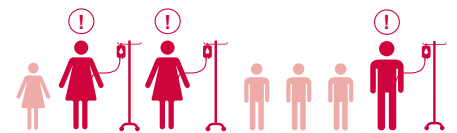
The above information was gathered from external sources on a general basis and is for reference only.

The information is extracted from AIA's Research of Critical Illness Trends and Medical Expenses by GfK Hong Kong, an independent market research company (data collected in June 2017).



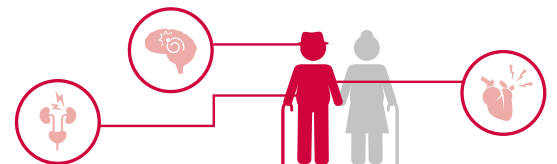
## Benign Conditions

- Certain common benign conditions could potentially increase the risk of cancer, for example women with certain benign breast diseases are **66%** more likely to develop breast cancer<sup>3</sup>, while **1 in 4** men with elevated prostate-specific antigen levels may develop prostate cancer<sup>4</sup>.



## Heart Disease and Diabetes

- Heart disease remains one of the leading causes of death in Hong Kong, with coronary heart disease – the chief cause of heart attack – contributing to nearly **66%** of all heart-disease related deaths<sup>5</sup>.
- Type 2 diabetes is currently affecting around **1 in 10** people in Hong Kong. Meanwhile, with 20% of Hong Kong's secondary students diagnosed as clinically obese<sup>6</sup>, more youths and young adults are at heightened risk for Type 2 diabetes.
- Approximately **50%** of patients suffering from a heart attack, stroke or kidney failure have diabetes as the main cause<sup>7</sup>.



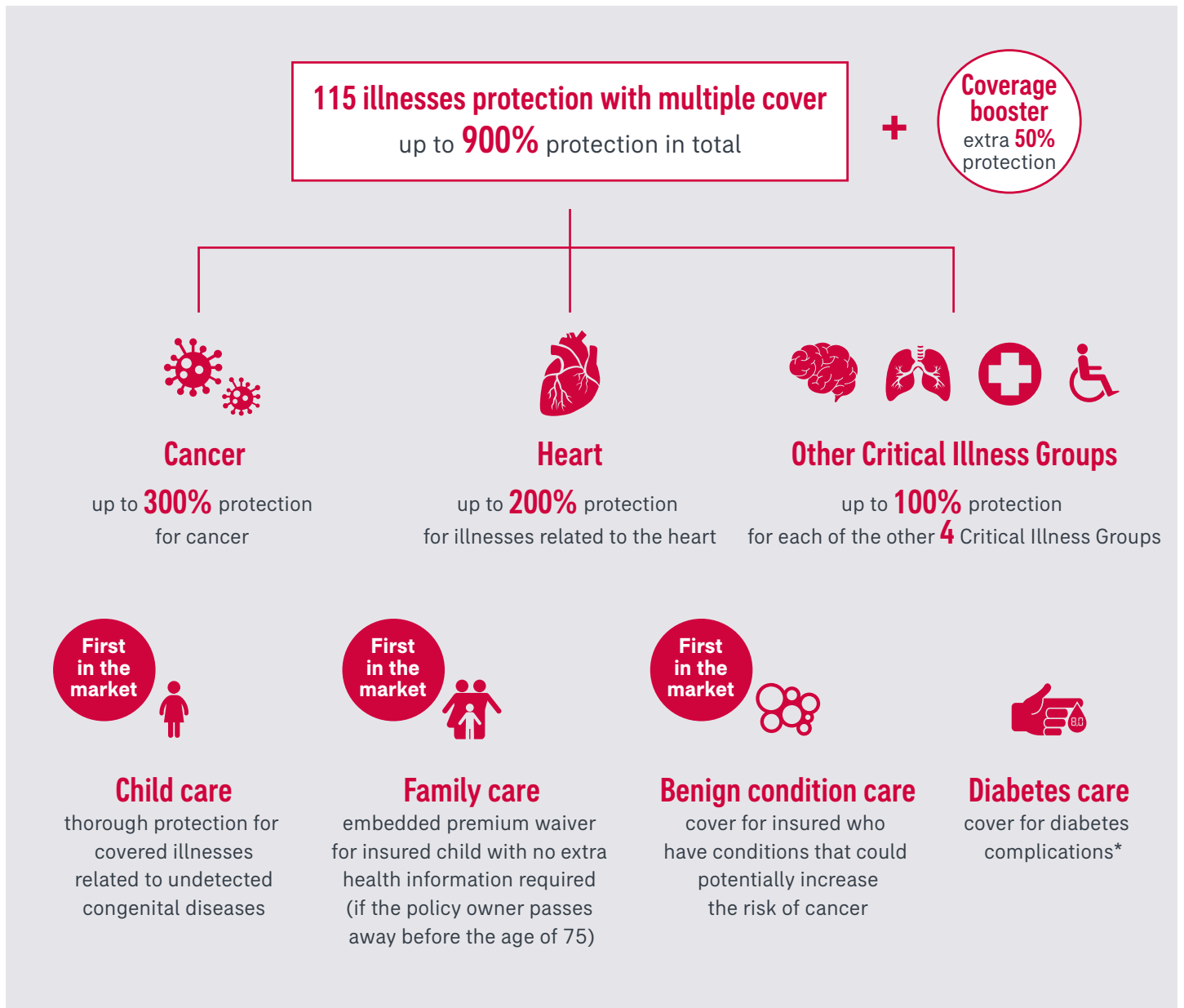
### Sources:

3. Benign Breast Disease Increases Risk, Breastcancer.org website (<http://www.breastcancer.org/research-news/20140307>) (Data collection date: March 2017)
4. Men's Health Line, Men's Health Programme, Hong Kong Department of Health (<http://www.hkmenshealth.com/eng/healthline/procancer.aspx>)
5. Centre for Health Protection, HK Department of Health (<http://www.chp.gov.hk/en/content/9/25/57.html>)
6. Centre for Health Protection, HK Department of Health ([http://www.news.gov.hk/en/categories/health/html/2016/10/20161011\\_121129.shtml](http://www.news.gov.hk/en/categories/health/html/2016/10/20161011_121129.shtml))
7. Asian Diabetes Foundation (<http://www.adf.org.hk/hk/education/diabetes>)

The above information was gathered from external sources on a general basis and is for reference only.

The information is extracted from AIA's Research of Critical Illness Trends and Medical Expenses by GfK Hong Kong, an independent market research company (data collected in June 2017).

## Benefits Highlight



\* Cover for Insulin Dependent Diabetes Mellitus will cease when the insured attains the age of 18.



## All-in-one · Critical illness protection · Life insurance · Savings

**Smart Elite Ultra** is a **participating insurance plan** that provides you with life insurance and multiple illnesses protection in lump sum payment. This plan can be purchased as a basic plan giving you comprehensive cover\* for 58 critical illnesses (including 57 major illnesses and 1 minor illness), 44 early stage critical illnesses (including minimally invasive surgery and treatment and Carcinoma-in-situ and early stage cancer), 13 severe child diseases^ as well as the opportunity to enhance your savings, supporting you through all the different stages of your life.

\* Refer to pages 15 to 18 - Covered Illness Schedule and Covered Illness Benefit Schedule for details.

^ Cover for severe child diseases will cease when the insured attains the age of 18.



## If the insured passes away

If the insured, who is the person protected under the policy, passes away, we will pay the death benefit to the person whom you select in your policy as the beneficiary. The death benefit will include:

- i. Current Sum Assured;
- ii. any non-guaranteed cash amounts distributed at the end of each policy year, called Annual Dividends, which have accumulated with interest (if any) under the policy; and
- iii. a one-off non-guaranteed cash amount (if any), called a Terminal Bonus, provided that the policy has been in force for 5 years or more and that any advance claims payments made in total for benefits under the policy have not reached 100% of the Initial Sum Assured.

In addition, we will pay a compassionate cash benefit equal to 5% of the Initial Sum Assured regardless of whether any claims payments have been made previously.

Current Sum Assured means the sum assured left after deduction of all advance payment(s) made for the benefits for a major illness, minor illness, early stage critical illness, diabetes complication and / or severe child disease from the Initial Sum Assured. The Initial Sum Assured means the protection amount that you have purchased.

We will deduct all outstanding debt under your policy before making any claim payment.



## 115 illnesses protection with multiple cover

Though modern medical advancements have raised the average life expectancy, greater longevity comes with an increased risk of multiple illnesses. And with each subsequent occurrence of critical illness, health deteriorates and the severity of symptoms and complications increases dramatically, which is why we provide the multiple illnesses protection that includes up to 3 times cover for cancer and up to 2 times cover for heart attack, giving you and your family lasting peace of mind.

**Smart Elite Ultra** provides cover for 115 illnesses, which are divided into 6 groups. The maximum benefit of each Critical Illness Group is as follows:

Critical Illness Group	Maximum Benefit (% of Initial Sum Assured)
<b>Group 1</b> – Cancer	300%
<b>Group 2</b> – Illnesses related to the Heart	200%
<b>Group 3</b> – Illnesses related to the Nervous System	100%
<b>Group 4</b> – Illnesses related to Major Organs and Functions	100%
<b>Group 5</b> – Other Major Illnesses	100%
<b>Group 6</b> – Terminal Illness and Loss of Independent Existence	100%*

\* Terminal Illness and Loss of Independent Existence claims are only payable if (a) the insured's condition does not meet the definition of any other covered critical illnesses in Critical Illness Groups 1, 2, 3, 4 and 5, and (b) no claim for major illness has been made before. Once the insured has made the first claim for major illness, the benefit under Critical Illness Group 6 will cease to apply.

If the insured is diagnosed with any of the covered major illness, minor illness, early stage critical illness and / or severe child disease<sup>^</sup>, we will pay:

- i. the benefit amount for the covered illness until the maximum benefit of the corresponding Critical Illness Group is reached (see the Covered Illnesses Benefit Schedule); and
- ii. the corresponding non-guaranteed Terminal Bonus (if any), provided that the policy has been in force for 5 years or more and that any advance claims payments made in total for benefits under the policy have not reached 100% of the Initial Sum Assured.

The claims payment advanced for any covered illness under this policy cannot exceed 100% of the Initial Sum Assured (excluding any Terminal Bonus). However, multiple claims payments for covered illnesses may be made under the policy, subject to maximum limits which are applied according to the Critical Illness Group to which covered illness belong. Any advance claims payment(s) made will reduce the Current Sum Assured of the basic policy. The premium, guaranteed cash value, any future Annual Dividends and any future Terminal Bonus will also be reduced accordingly. Once advance claims payments for covered illnesses reaches 100% of the Initial Sum Assured, Annual Dividends and Terminal Bonus will no longer be credited and declared.

Once the advance claims payments made in total for benefits under the policy reach 100% of the Initial Sum Assured, the insured will remain covered under multiple illnesses protection before the insured reaches the age of 85 when a subsequent illness is diagnosed if:

- i. the insured survives at least 15 days from such diagnosis; and
- ii. the maximum benefit of the relevant Critical Illness Group has not been reached.

Subsequent claims are subject to a waiting period of 1 year between any major illnesses, except that for subsequent claims between cancers, a waiting period of 3 years is required. There is no waiting period for subsequent early stage critical illnesses and subsequent severe child diseases<sup>^</sup>.

Before the insured reaches the age of 85, the benefit for covered illnesses (as shown in the Critical Illnesses Benefit Schedule) will remain in effect until the benefits paid for illnesses in the corresponding group reaches the maximum group limit. After the age of 85, multiple illnesses protection will end and advance claims payments for illnesses suffered across any and all Critical Illness Groups will be capped at 100% of the Initial Sum Assured.

We will deduct all outstanding debt under your policy before making any claim payment.

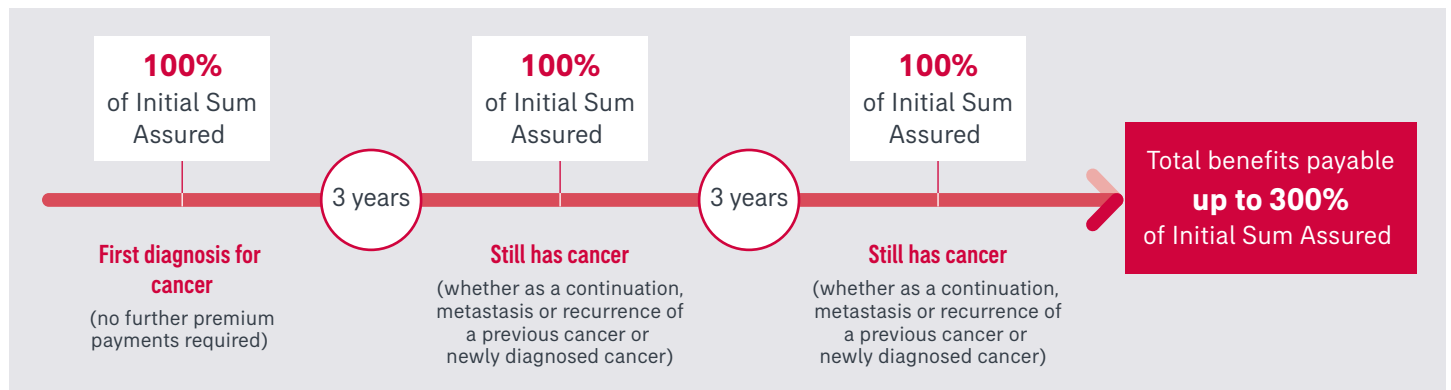
<sup>^</sup> Cover for severe child diseases will cease when the insured attains the age of 18.



## Cancer shield benefit, up to 3 times cover for cancer

First of its kind in the market, AIA's novel cancer shield benefit enhances cancer cover under the plan for continuation, metastasis or recurrence of a previous cancer or newly diagnosed cancers, each for 100% of the Initial Sum Assured. Total benefits payable may equal to a maximum of 300% of the Initial Sum Assured, providing long-term financial support to help ease your burden on your road to recovery.

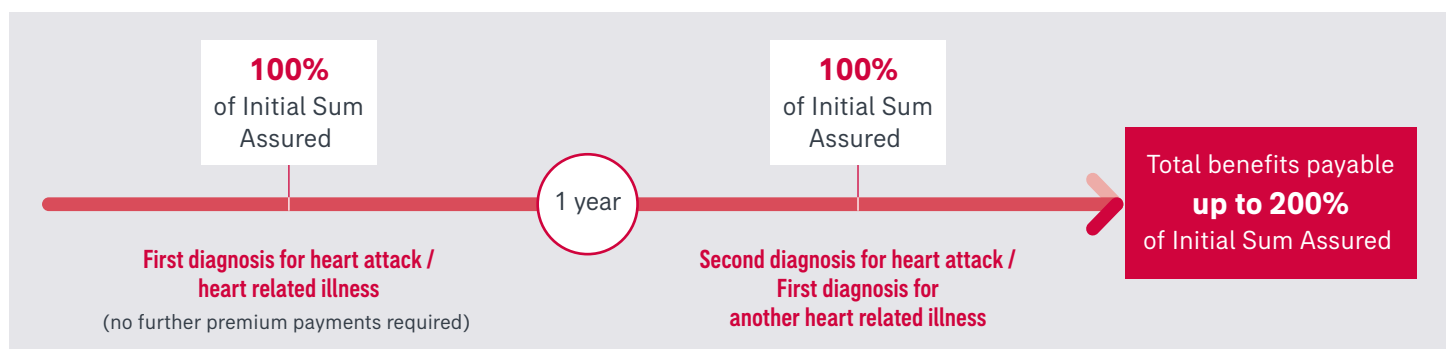
In case the insured reaches the age of 70 or above and makes any subsequent claim for prostate cancer resulting from the continuation of a previous prostate cancer for which a previous claim was made, the benefit will only be payable if the insured has received or is in the process of receiving the full course of cancer-directed surgery, radiotherapy, chemotherapy, targeted therapy or a combination of these treatments (excluding hormonal therapy) which is medically necessary during the intervening period between the diagnosis of the previous and subsequent prostate cancer.



## Up to 2 times cover for heart attack under 200% cover for heart related illnesses

Heart attack cover is also provided under **Smart Elite Ultra**, having 2 times cover for heart attack or 1 time cover for 2

different heart related illnesses, each claim would be 100% of the Initial Sum Assured. Total benefits payable equal to a maximum of 200% of the Initial Sum Assured, providing the support you need to get back on your feet.



First in the market



## Cover for undetected congenital conditions in children

The younger you are when your critical illness protection begins, the lower the premium and the longer the cover period you obtain. That is why parents usually buy insurance policies for their children. However, policies often fail to cover congenital diseases, which may remain undetected for years and could develop into a critical illness. **Smart Elite Ultra** is the first plan in the market to address this gap, providing your children with thorough cover for critical illnesses related to congenital diseases with symptoms which remain undetected at policy issue, and protecting your financial plans from any surprise discovery of a life-changing hereditary trait, for added peace of mind.

First in the market



## Protecting your child's future

It is common for parents to buy extra cover in payor insurance to safeguard the continuity of their children's health protection. To save you the hassle, **Smart Elite Ultra** is the first in the market to provide this cover with no additional purchase and no health information of the payor required. Under this cover, if you pass away before the age of 75 and provided that the policy has been in force for 2 years or more at the time of your death, the insured child will continue to enjoy cover under the policy without having to pay the remaining premiums of the basic plan until the insured child reaches the age of 25. This premium waiver is available for policies issued to insured under age 18, provided that you are aged 18 to 50 at policy issue.

First in the market



## Well prepared for benign conditions

Certain common benign conditions, such as benign breast disorder or elevated prostate-specific antigen (PSA) level, may potentially increase the risk of cancer. In unfortunate cases where benign conditions turn malignant and the malignancies do develop into cancer, one can be left with a glaring gap in protection, with little means to cover medical expenses.

AIA is the first in the market to extend cover to those who have already developed these benign conditions (see the table in the next page). A Benign Extra Benefit equivalent to 20% of the Initial Sum Assured will be offered for any cancer in each organ with covered benign conditions right at policy issue, provided that the insured fulfils our underwriting requirements.

After a year from policy issue, if the benign condition of the organ is proven to be no worse off or to have shown improvement, we will further extend the cover to full cancer protection of up to a maximum of 300% of the Initial Sum Assured under Critical Illness Group 1 (Cancer) subject to the prevailing rules of the company. Even if full cover for cancer of that organ cannot be extended, the Benign Extra Benefit will remain applicable as long as critical illness benefit is still available under the policy. Once such full cancer protection is extended or the 20% of the Initial Sum Assured is paid, the Benign Extra Benefit for that organ will cease.

Provided no claim has been made for Benign Extra Benefit for cancer in an organ with covered benign conditions, we will provide a Benign Extra Benefit of 4% of the Initial Sum Assured for each of up to 2 Carcinomas-in-situ occurring in different organs with covered benign conditions and / or 1 Early Stage Malignancy occurring in each organ with covered benign conditions, and, subject to the prevailing rules of the company, may provide a cover extension to fully cover Carcinoma-in-situ and Early Stage Malignancy in that organ after one year from policy issue. The advance payment(s) of Benign Extra Benefit for Carcinoma-in-situ or Early Stage Malignancy will be deducted from any Benign Extra Benefit (i.e. 20% of the Initial Sum Assured) payable subsequently for cancer in the same organ.

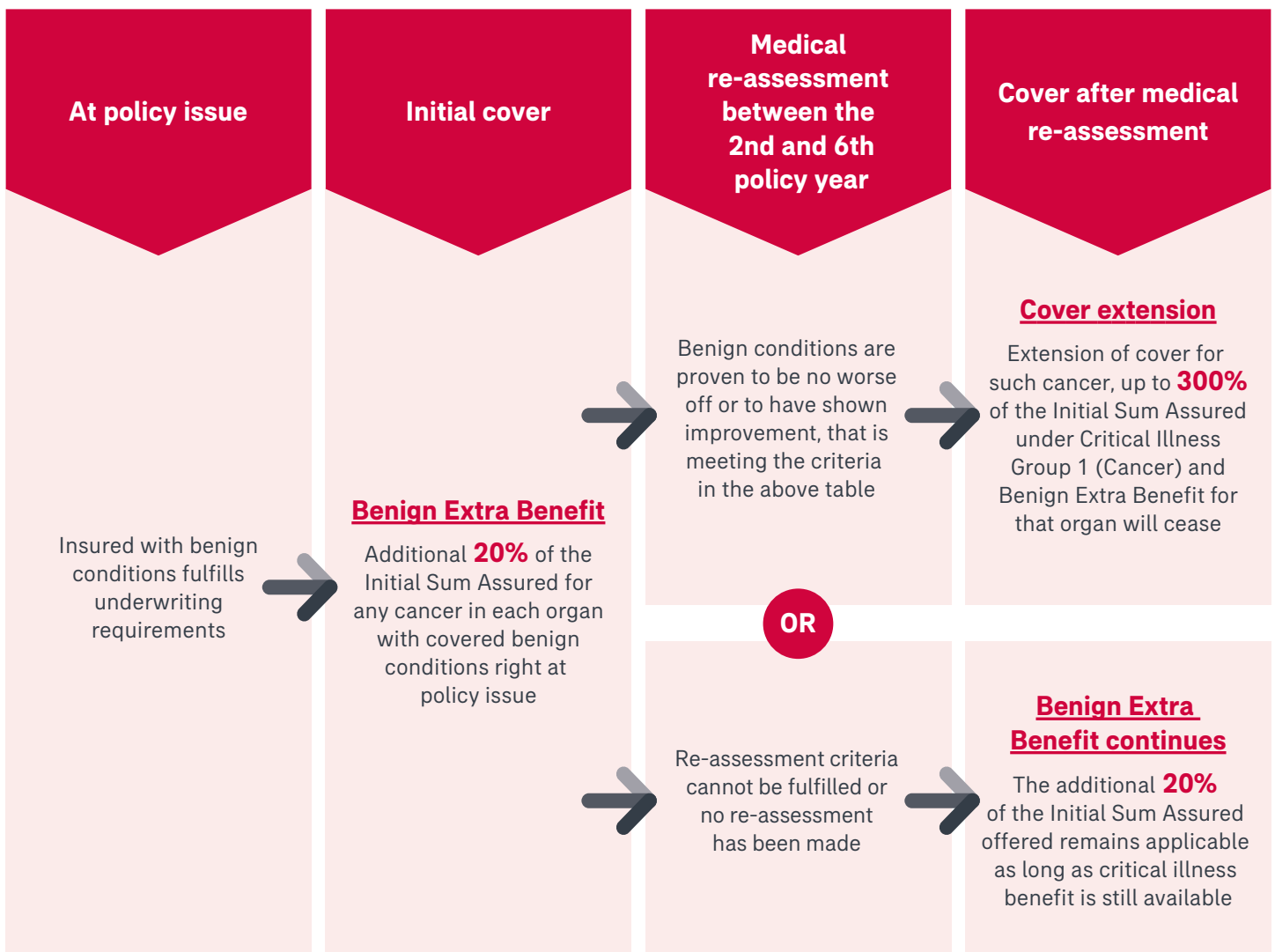
The Benign Extra Benefit is additional to the cover for cancers in other organs, meaning the maximum benefit payable of up to 300% of the Initial Sum Assured for other cancers will remain intact even if the Benign Extra Benefit is paid.





Benign Conditions	Criteria <sup>+</sup> to extend cover to full cancer protection (Subject to medical re-assessment between the 2nd and 6th policy year)
<b>Benign breast disorder</b> (e.g. Hyperplasia of mammary glands, Fibroadenoma, Breast calcification, Breast cysts, Lipoma)	<ul style="list-style-type: none"> <li>• The condition remains stable</li> <li>• No pending investigations and no suspicion of any malignancy</li> <li>• No claims have been made for any covered illnesses</li> </ul>
<b>Uterine fibroid</b>	
<b>Elevated prostate-specific antigen (PSA) level</b> (e.g. Benign prostatic hypertrophy)	<ul style="list-style-type: none"> <li>• PSA level reduces to normal levels for the corresponding age range</li> <li>• No pending investigations and no suspicion of any malignancy</li> <li>• No claims have been made for any covered illnesses</li> </ul>

<sup>+</sup> Subject to the prevailing rules of the company



## Comprehensive\* diabetes protection

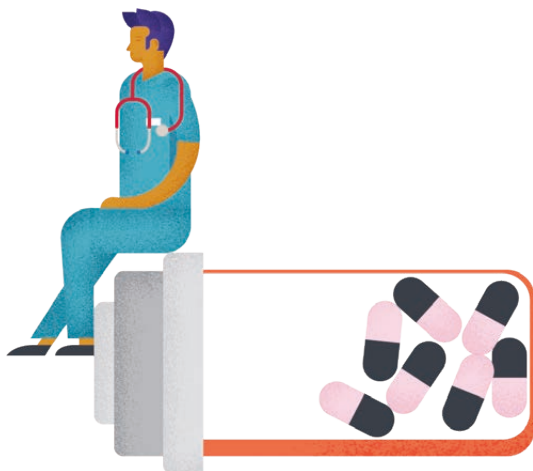
Diabetes is one of the most common lifestyle diseases and can be a precursor to many critical illnesses, including kidney failure, blindness and loss of limbs. **Smart Elite Ultra** provides comprehensive protection for diabetes complications, from the early to late stages of the disease, subject to the maximum benefit of the corresponding Critical Illness Group:

Critical Illness	Benefit
<b>Early stage critical illness as a diabetes complication</b>	
<ul style="list-style-type: none"> <li>• Diabetic Retinopathy<sup>#</sup></li> <li>• Less Severe Kidney Disease</li> <li>• Loss of One Limb</li> <li>• Loss of Sight in One Eye</li> </ul>	40% advance of Initial Sum Assured <sup>▽</sup>
<b>Major Illnesses related to diabetes</b>	
<ul style="list-style-type: none"> <li>• Kidney Failure</li> <li>• Blindness</li> <li>• Loss of One Limb and One Eye</li> <li>• Loss of Two Limbs</li> <li>• Stroke</li> </ul>	100% of Initial Sum Assured
<ul style="list-style-type: none"> <li>• Heart Attack</li> </ul>	up to 2 claims each for 100% of Initial Sum Assured

\* Cover for Insulin Dependent Diabetes Mellitus will cease when the insured attains the age of 18.

<sup>#</sup> Subject to a maximum of HK\$400,000/US\$50,000 per life including the payment made for Diabetic Retinopathy under diabetes complications benefit, critical illness benefit and coverage booster.

<sup>▽</sup> Including a diabetes complication benefit of 20% advance of Initial Sum Assured which will be payable 1 time under each policy.



## Upgraded protection at the start of the policy

**Smart Elite Ultra** comes with a Coverage Booster that offers extra cover at the start of the policy. It is an extra benefit to increase the benefit paid for 58 critical illnesses (including 57 major illnesses and 1 minor illness), 44 early stage critical illnesses, 13 severe child diseases or the death benefit, provided that any of these benefits are paid out during the first 10 or 15 years of the policy, depending on the age of the insured at policy issue (see the Covered Illnesses Benefit Schedule).

Insured's Age at Policy Issue	Effective Period	Benefit (Coverage Booster Amount)
Age 40 or below	First 15 policy years	Additional 50% of the Initial Sum Assured
Age 41 or above	First 10 policy years	Additional 50% of the Initial Sum Assured

Subject to our underwriting decision at policy inception, we may offer you a conversion right for the Coverage Booster. Starting from the last year of your Coverage Booster effective period, or the anniversary of the cover immediately following the 64th birthday of the insured, whichever is earlier, you can convert the remaining unpaid Coverage Booster Amount into a whole life or whole life with critical illness protection insurance plan, subject to additional premium, and no further health information will be required. Upon conversion, the Coverage Booster will be surrendered and the new converted plan will be dated as of the date of such surrender.

## Continuous protection

Once claims for covered illnesses reach 100% of the Initial Sum Assured, the subsequent premiums of the basic policy will be waived. Add-on plans (if any) attached to the basic policy will remain in force and provide cover if their respective premiums continue to be paid.



## Wealth accumulation for lifelong benefits

**Smart Elite Ultra** offers guaranteed cash value and non-guaranteed Annual Dividends. Such dividends (if any) shall be credited to your policy at the end of each policy year to give you additional liquidity, so you can enjoy extra cash flow along with comprehensive cover. You may choose to receive the Annual Dividends in cash or use them to reduce any premium due. Otherwise, these sums shall accumulate in your policy, potentially earning interest.

Once the basic policy has been in force for 5 years, **Smart Elite Ultra** also declares a non-guaranteed Terminal Bonus (if any) to you at least once per year that may grow your wealth. You may receive the Terminal Bonus when:

- i. you surrender the policy;
- ii. the insured passes away; or
- iii. we pay out the benefits for major illness, minor illness, early stage critical illness, diabetes complication and / or severe child disease (the Terminal Bonus will be determined in accordance with the benefits paid out).

Terminal Bonus is a non-cumulative, non-guaranteed bonus, the amount of which is valid until the next declaration. The amount in each declaration may be greater or less than the previous amount based on a number of factors, including but not limited to investment returns and general market volatility.

Payment of the Terminal Bonus is not guaranteed. We determine the amount based on actual experience and it may vary based on the above. In the case of policy surrender, it may be less compared to other situations.

Please note that after the advance claims payments made in total for benefits under the policy reaches 100% of the Initial Sum Assured, the policy will not provide any further Annual Dividends and Terminal Bonus.



## Greater financial flexibility with 3 premium payment terms

With **Smart Elite Ultra**, you can choose from 3 premium payment terms and enjoy life insurance and critical illness protection throughout the lifetime of the insured.

Premium Payment Term	Insured's Age at Policy Issue	Benefit Term for Critical Illness
10 years	15 days to age 65	Lifetime Cover (Excluding 13 Severe Child Diseases, Osteoporosis with Fractures, Loss of Independent Existence and multiple illnesses protection)
18 years	15 days to age 62	Lifetime Cover (Excluding 13 Severe Child Diseases, Osteoporosis with Fractures, Loss of Independent Existence and multiple illnesses protection)
25 years	15 days to age 55	Lifetime Cover (Excluding 13 Severe Child Diseases, Osteoporosis with Fractures, Loss of Independent Existence and multiple illnesses protection)

Different premium payment modes (annually, semi-annually, quarterly and monthly) are available for this plan.

At the time of application, we determine the amount of premium based on the age of the insured under the chosen payment term, and the premium is not expected to increase with age. The premium of the basic policy is not guaranteed, and we reserve our right to review and adjust the premium from time to time (please refer to "Premium Adjustment" under Important Information).

For your convenience, we offer this policy in US dollars and HK dollars.

## Examples

(The following examples are hypothetical and for illustrative purposes only. The actual Annual Dividends and Terminal Bonus are not guaranteed and are declared at AIA's sole discretion.)

Newly married, Andy and Monica are both working professionals with heavy pressure at work, which is why they want to stay ahead of any potential health threats. To fill their protection gap, they each purchase **Smart Elite Ultra**, which offers multiple illnesses protection with a payable benefit of up to 950%<sup>1</sup> of the Initial Sum Assured, supplemented by a unique Benign Extra Benefit that offers protection against cancer arising from benign conditions.



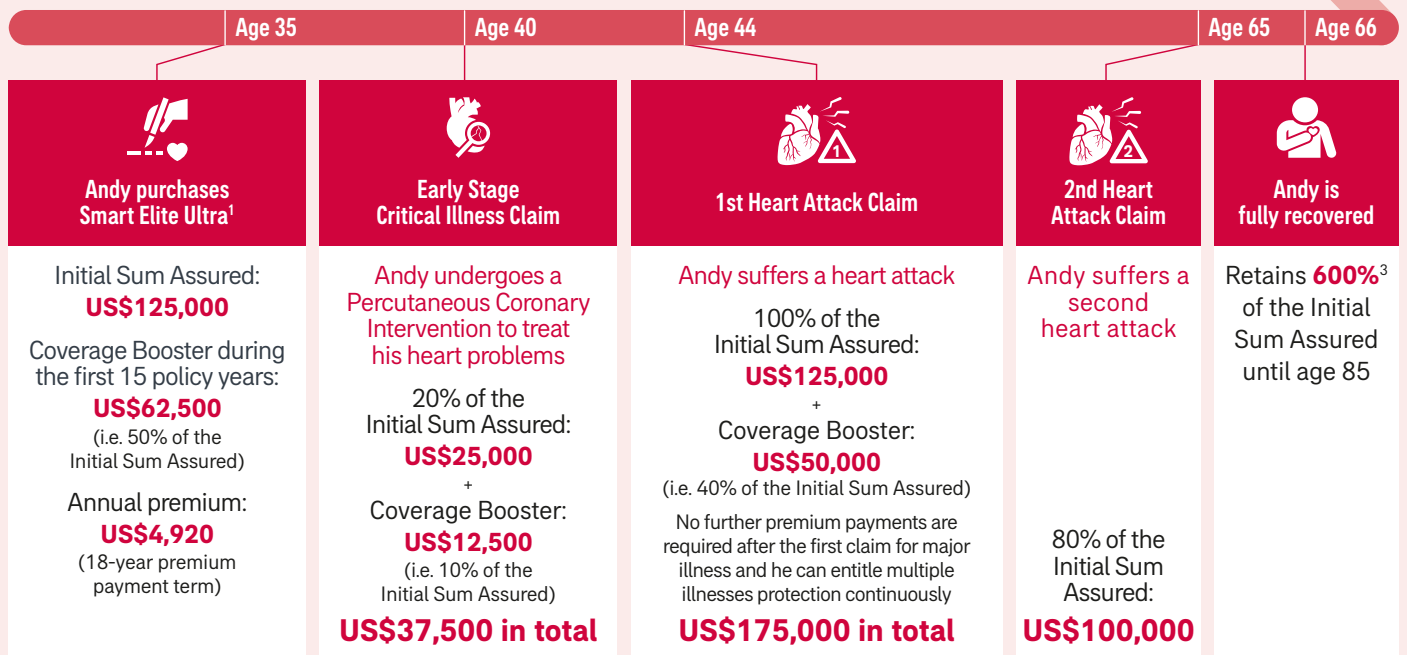
Having reached a senior position in a highly competitive industry, Andy's success has come at the cost of his health. He is worried that irregular working hours and unhealthy diet may increase the risk of heart problems.

### Case of Andy

Policy owner and insured: Andy (age 35, non-smoker)  
Occupation: Investment banker  
Family status: Married

If no claims have been made under the plan, there will be a total surrender value of **US\$167,250**<sup>2</sup> when Andy reaches age 70. (i.e. around 1.8 times the total premium paid)

Insured's Age



**Total benefit payable to Andy: US\$312,500<sup>4</sup>**  
**2.5 times the Initial Sum Assured**

### Note:

- The plan includes multiple illnesses protection (up to 900% of the Initial Sum Assured) and Coverage Booster (50% of the Initial Sum Assured).
  - The total surrender value is a projected value and not guaranteed. The total surrender value includes the guaranteed cash value (US\$77,750), non-guaranteed accumulated Annual Dividends and interest (US\$15,460) and non-guaranteed Terminal Bonus (US\$74,040). The value is based on the current dividend / bonus scales and accumulation interest rate of 3.5% p.a. on Annual Dividends. The current dividend / bonus scales and interest rates are neither indicative of future performance nor guaranteed. Past performance or current performance of our business should not be interpreted as a guide for future performance. The actual Annual Dividends, accumulation interest rates and Terminal Bonus payable throughout the duration of the policy may vary at AIA's sole discretion, which may be less or more favourable than those illustrated. The above example assumes that no cash withdrawal or policy loans are taken throughout the term of the policy and that all premiums are paid in full when due. To receive the amounts illustrated, the policy owner must surrender her policy at the end of respective policy year. This policy will be terminated when the total surrender value has been withdrawn entirely.
  - The Coverage Booster will cease to apply when the aggregate amount of any advance claims payments for the benefits under Coverage Booster reaches 50% of the Initial Sum Assured. The Terminal Illness and Loss of Independent Existence Benefits (100% of the Initial Sum Assured) will cease to apply once a claim for major illness has been made. In the above example: 600% of the Initial Sum Assured = 950% of the Initial Sum Assured – 50% of the Initial Sum Assured for the Coverage Booster – 100% of the Initial Sum Assured for Terminal Illness and Loss of Independent Existence – 200% of the Initial Sum Assured payable for previous claims.
  - The above benefit does not include non-guaranteed Terminal Bonus.
- Please note that after the advance claims payments made in total for benefits under the policy reaches 100% of the Initial Sum Assured, the policy will not provide any further Annual Dividends and Terminal Bonus.

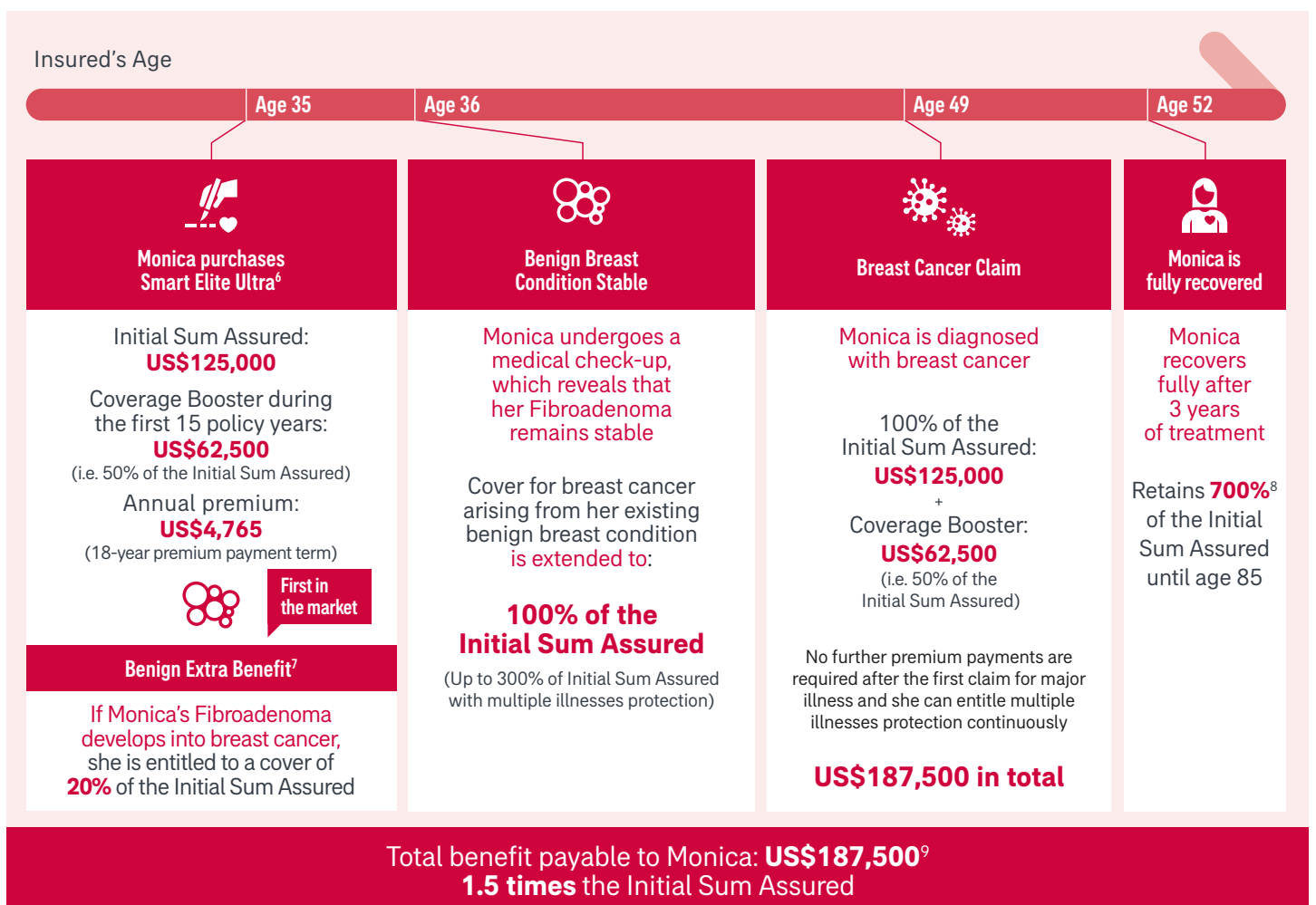
**Case of Monica**

Policy owner and insured: Monica (age 35, non-smoker)  
Occupation: Customer Service Director  
Family status: Married

Monica was diagnosed with a Fibroadenoma, and has been unsuccessful in obtaining cover from other insurers for breast cancer. However, purchasing **Smart Elite Ultra** offers her an opportunity to obtain full cover even if she develops breast cancer later on.



If no claims have been made under the plan, there will be a total surrender value of **US\$164,941<sup>5</sup>** when Monica reaches age 70. (i.e. around 1.9 times the total premium paid)



**Note:**

- The total surrender value is a projected value and not guaranteed. The total surrender value includes the guaranteed cash value (US\$70,500), non-guaranteed accumulated Annual Dividends and interest (US\$14,328) and non-guaranteed Terminal Bonus (US\$80,113). The value is based on the current dividend / bonus scales and accumulation interest rate of 3.5% p.a. on Annual Dividends. The current dividend / bonus scales and interest rates are neither indicative of future performance nor guaranteed. Past performance or current performance of our business should not be interpreted as a guide for future performance. The actual Annual Dividends, accumulation interest rates and Terminal Bonus payable throughout the duration of the policy may vary at AIA's sole discretion, which may be less or more favourable than those illustrated. The above example assumes that no cash withdrawal or policy loans are taken throughout the term of the policy and that all premiums are paid in full when due. To receive the amounts illustrated, the policy owner must surrender her policy at the end of respective policy year. This policy will be terminated when the total surrender value has been withdrawn entirely.
  - The plan includes multiple illnesses protection (up to 900% of the Initial Sum Assured) and Coverage Booster (50% of the Initial Sum Assured).
  - The insured person was diagnosed with a Fibroadenoma upon purchase of the plan and fulfils the underwriting requirements for offering Benign Extra Benefit.
  - The Coverage Booster will cease to apply when the aggregate amount of any advance claims payments for the benefits under Coverage Booster reaches 50% of the Initial Sum Assured. The Terminal Illness and Loss of Independent Existence Benefits (100% of the Initial Sum Assured) will cease to apply once a claim for major illness has been made. In the above example: 700% of the Initial Sum Assured = 950% of the Initial Sum Assured – 50% of the Initial Sum Assured for the Coverage Booster – 100% of the Initial Sum Assured for Terminal Illness and Loss of Independent Existence – 100% of the Initial Sum Assured payable for previous claims.
  - The above benefit does not include non-guaranteed Terminal Bonus.
- Please note that after the advance claims payments made in total for benefits under the policy reaches 100% of the Initial Sum Assured, the policy will not provide any further Annual Dividends and Terminal Bonus.

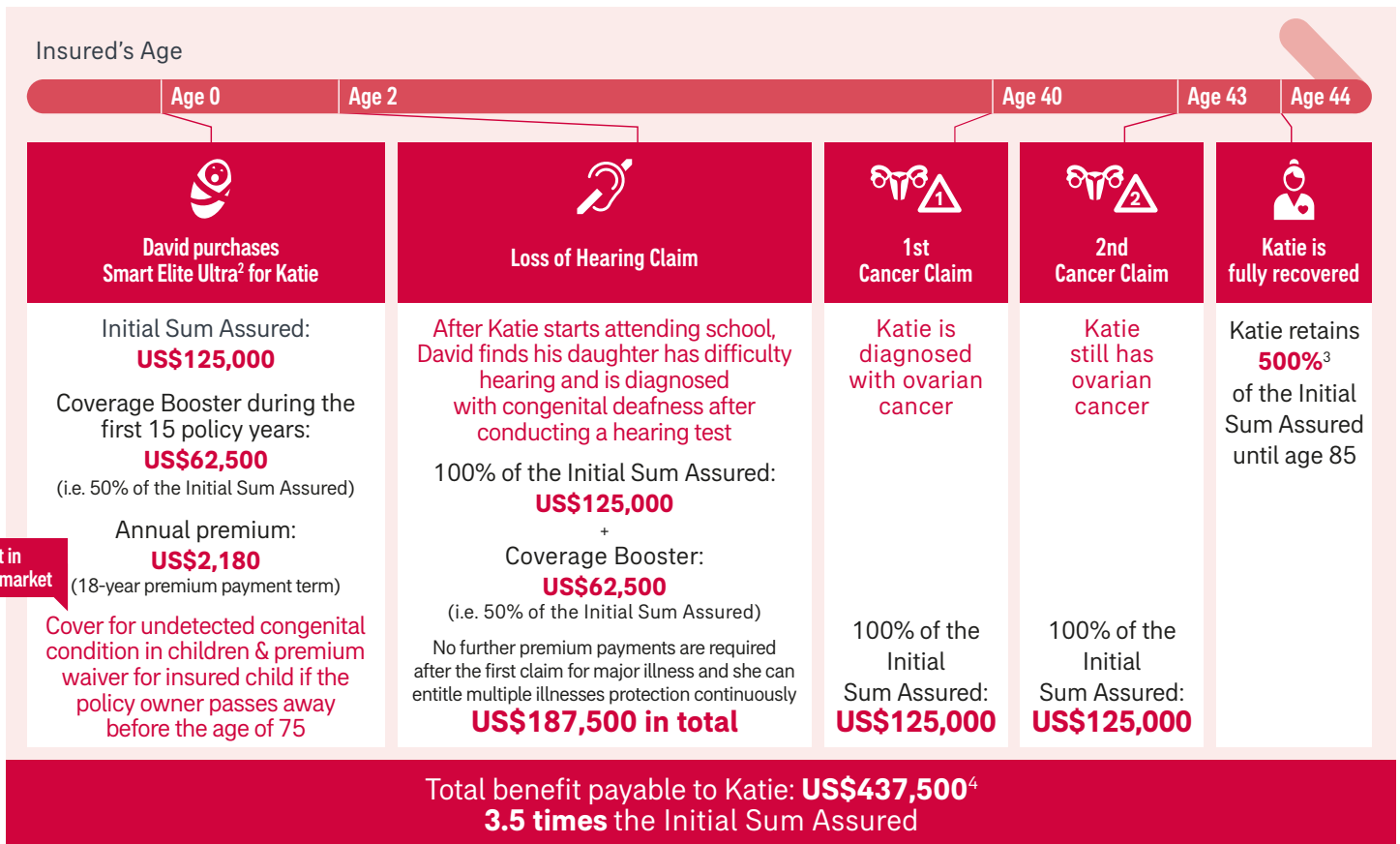
Policy owner: David (age 35)  
Occupation: Accountant  
Family status: Married with one daughter  
Insured: David's daughter, Katie (age 0)



David is concerned about his newborn daughter's future wellbeing and he is worried that undetected congenital condition may lead to critical illness without warnings. Since most critical illness insurance plans in the market exclude congenital conditions from cover, this could potentially leave his daughter unprotected and derail the family's financial plans.

Unlike most critical illness insurance plans in the market, **Smart Elite Ultra** offers David's daughter protection for congenital diseases that remain undetected at the time of application. This is further supplemented by payor benefit with no additional purchase and health information of the payor required, giving David's daughter continued cover for a lifetime of protection even if he unfortunately passes away.

If no claims have been made under the plan, there will be a total surrender value of **US\$490,987<sup>1</sup>** when Katie reaches age 70.  
(i.e. around 12.5 times the total premium paid)



**Note:**

- The total surrender value is a projected value and not guaranteed. The total surrender value includes the guaranteed cash value (US\$75,500), non-guaranteed accumulated Annual Dividends and interest (US\$73,618) and non-guaranteed Terminal Bonus (US\$341,869). The value is based on the current dividend / bonus scales and accumulation interest rate of 3.5% p.a. on Annual Dividends. The current dividend / bonus scales and interest rates are neither indicative of future performance nor guaranteed. Past performance or current performance of our business should not be interpreted as a guide for future performance. The actual Annual Dividends, accumulation interest rates and Terminal Bonus payable throughout the duration of the policy may vary at AIA's sole discretion, which may be less or more favourable than those illustrated. The above example assumes that no cash withdrawal or policy loans are taken throughout the term of the policy and that all premiums are paid in full when due. To receive the amounts illustrated, the policy owner must surrender her policy at the end of respective policy year. This policy will be terminated when the total surrender value has been withdrawn entirely.
  - The plan includes multiple illnesses protection (up to 900% of the Initial Sum Assured) and Coverage Booster (50% of the Initial Sum Assured).
  - The Coverage Booster will cease to apply when the aggregate amount of any advance claims payments for the benefits under Coverage Booster reaches 50% of the Initial Sum Assured. The Terminal Illness and Loss of Independent Existence Benefits (100% of the Initial Sum Assured) will cease to apply once a claim for major illness has been made. In the above example: 500% of the Initial Sum Assured = 950% of the Initial Sum Assured – 50% of the Initial Sum Assured for the Coverage Booster – 100% of the Initial Sum Assured for Terminal Illness and Loss of Independent Existence – 300% of the Initial Sum Assured payable for previous claims.
  - The above benefit does not include non-guaranteed Terminal Bonus.
- Please note that after the advance claims payments made in total for benefits under the policy reaches 100% of the Initial Sum Assured, the policy will not provide any further Annual Dividends and Terminal Bonus.



## Covered Illnesses Schedule

44 Early Stage Critical Illnesses and 13 Severe Child Diseases <sup>^</sup>	58 Critical Illnesses (including 57 major illnesses and 1 minor illness)
<b>Group 1 Cancer</b>	
1 Carcinoma-in-situ	1 Cancer
2 Early Stage Malignancy	
<b>Group 2 Illnesses related to the Heart</b>	
3 Endovascular Treatments of Aortic Disease or Aortic Aneurysm	2 Cardiomyopathy
4 Less Invasive Treatments of Heart Valve Disease	3 Coronary Artery Surgery
5 Less Severe Heart Disease (including cardiac pacemaker or defibrillator insertion)	4 Heart Attack
6 Less Severe Infective Endocarditis	5 Heart Valve Replacement and Repair
7 Minimally Invasive Direct Coronary Artery Bypass	6 Infective Endocarditis
8 Percutaneous Coronary Intervention	7 Other Serious Coronary Artery Disease
9 Pericardectomy	8 Pulmonary Arterial Hypertension (Primary)
10 Kawasaki Disease with Heart Complications <sup>^</sup>	9 Surgery to Aorta
11 Rheumatic Fever with Valvular Impairment <sup>^</sup>	
12 Severe Haemophilia <sup>^</sup>	
<b>Group 3 Illnesses related to the Nervous System</b>	
13 Angioplasty or Endarterectomy for Carotid Arteries	10 Alzheimer's Disease / Irreversible Organic Degenerative Brain Disorders
14 Cerebral Shunt Insertion	11 Apallic Syndrome
15 Early Stage Dementia including Early Stage Alzheimer's Disease	12 Bacterial Meningitis
16 Endovascular Treatment for Cerebral Aneurysm	13 Benign Brain Tumour
17 Less Severe Bacterial Meningitis	14 Cerebral Aneurysm Requiring Surgery <sup>®</sup>
18 Less Severe Coma	15 Coma
19 Less Severe Encephalitis	16 Encephalitis
20 Less Severe Parkinson's Disease	17 Hemiplegia
21 Moderately Severe Brain Damage	18 Major Head Trauma
22 Moderately Severe Paralysis	19 Meningeal Tuberculosis
23 Severe Psychiatric Illness	20 Motor Neurone Disease (including Spinal Muscular Atrophy, Progressive Bulbar Palsy, Amyotrophic Lateral Sclerosis and Primary Lateral Sclerosis)
24 Surgery for Subdural Haematoma	21 Multiple Sclerosis
25 Surgical Removal of Pituitary Tumour	22 Muscular Dystrophy
26 Autism <sup>^</sup>	23 Paralysis
27 Intellectual Impairment due to Sickness or Injury <sup>^</sup>	24 Parkinson's Disease
28 Type I Juvenile Spinal Amyotrophy <sup>^</sup>	25 Poliomyelitis
	26 Progressive Supranuclear Palsy
	27 Severe Myasthenia Gravis
	28 Stroke

<sup>^</sup> Cover for severe child diseases will cease when the insured attains the age of 18.

<sup>®</sup> Cerebral Aneurysm Requiring Surgery is classified as a minor illness.



## Covered Illnesses Schedule (continued)

44 Early Stage Critical Illnesses and 13 Severe Child Diseases <sup>^</sup>	58 Critical Illnesses (including 57 major illnesses and 1 minor illness)
<b>Group 4 Illnesses related to Major Organs and Functions</b>	
29 Biliary Tract Reconstruction Surgery	29 Acute Necrohemorrhagic Pancreatitis
30 Chronic Lung Disease	30 Aplastic Anaemia
31 Hepatitis with Cirrhosis	31 Chronic Liver Disease
32 Less Severe Aplastic Anaemia	32 Chronic Relapsing Pancreatitis
33 Less Severe Kidney Disease	33 End-stage Lung Disease
34 Less Severe Systemic Lupus Erythematosus	34 Fulminant Viral Hepatitis
35 Liver Surgery	35 Kidney Failure
36 Major Organ Transplantation (on waiting list)	36 Major Organ Transplant
37 Surgical Removal of One Lung	37 Medullary Cystic Disease
38 Glomerulonephritis with Nephrotic Syndrome <sup>^</sup>	38 Systemic Lupus Erythematosus (SLE) with Lupus Nephritis
39 Severe Asthma <sup>^</sup>	39 Systemic Scleroderma
40 Wilson's Disease <sup>^</sup>	
<b>Group 5 Other Major Illnesses</b>	
41 Cochlear Implant Surgery	40 AIDS due to Blood Transfusion
42 Diabetic Retinopathy	41 Blindness
43 Endovascular Treatment of Peripheral Arterial Disease	42 Chronic Adrenal Insufficiency (Addison's Disease)
44 Facial Burns due to Accident	43 Creutzfeldt-Jakob Disease
45 Facial Reconstructive Surgery for Injury due to Accident	44 Crohn's Disease
46 Less Severe Burns to Body due to Accident	45 Ebola
47 Less Severe Creutzfeldt-Jakob Disease	46 Elephantiasis
48 Loss of Hearing In One Ear	47 Loss of Hearing
49 Loss of One Limb	48 Loss of One Limb and One Eye
50 Loss of Sight In One Eye	49 Loss of Speech
51 Osteoporosis with Fractures	50 Loss of Two Limbs
52 Severe Central or Mixed Sleep Apnea	51 Major Burns
53 Severe Obstructive Sleep Apnea	52 Necrotising Fasciitis
54 Dengue Haemorrhagic Fever <sup>^</sup>	53 Occupationally Acquired HIV
55 Insulin Dependent Diabetes Mellitus <sup>^</sup>	54 Pheochromocytoma
56 Osteogenesis Imperfecta – Type III <sup>^</sup>	55 Severe Rheumatoid Arthritis
57 Still's Disease <sup>^</sup>	56 Severe Ulcerative Colitis
<b>Group 6 Terminal Illness and Loss of Independent Existence</b>	
	57 Loss of Independent Existence
	58 Terminal Illness

<sup>^</sup> Cover for severe child diseases will cease when the insured attains the age of 18.



### Covered illnesses

You may browse the website to understand covered illnesses for reference purpose:  
<http://www.aia.com.hk/en/our-products/critical-illness-protection/illness.html>

#### Remarks:

- Cover for cancer under major illnesses and the Benign Extra Benefit (if applicable) do not include early thyroid cancer (at TNM Classification T1N0M0 or a lower stage); early prostate cancer (at TNM Classification T1a or T1b or a lower stage); early chronic lymphocytic leukaemia classified as less than RAI Stage III; skin cancer (except malignant melanoma); any cancer where HIV infection is also present; and any pre-malignant or non-invasive cancer or Carcinoma-in-situ.
- Carcinoma-in-situ cover includes Carcinoma-in-situ in any one of the following covered organ groups: (a) breast; (b) uterus or cervix uteri; (c) ovary and / or fallopian tube; (d) vagina or vulva; (e) colon and rectum; (f) penis; (g) testis; (h) lung; (i) liver; (j) stomach and esophagus; (k) urinary tract or bladder; or (l) nasopharynx.
- Early Stage Malignancy shall mean the presence of one of the following early malignant conditions: (a) tumour of the thyroid classified as T1N0M0 according to the TNM classification; (b) tumour of the prostate classified as T1a or T1b according to the TNM classification system; (c) chronic lymphocytic leukaemia classified as RAI Stage I or II; or (d) non-melanoma skin cancer.
- Please refer to the policy contract for the definitions of covered illnesses.

## Covered Illnesses Benefit Schedule

Type of Protection	Covered Illness	Benefit Term	Benefit (Percentage of Initial Sum Assured)	
			Basic Plan	Coverage Booster*
<b>58 Critical Illnesses (including 57 major illnesses and 1 minor illness)</b>				
<b>Major Illness</b>	• 56 Major Illness	Whole life	100%	Additional 50%
	• Loss of Independent Existence	Up to age 65		
<b>Minor Illness</b>	• Cerebral Aneurysm Requiring Surgery	Whole life	50% advance payment	Additional 25% (advance from Coverage Booster Amount)
<b>44 Early Stage Critical Illnesses</b>				
<b>Early Stage Critical Illness</b>	<ul style="list-style-type: none"> <li>• Carcinoma-in-situ</li> <li>• Diabetic Retinopathy</li> <li>• Early Stage Malignancy</li> <li>• Endovascular Treatment of Peripheral Arterial Disease</li> <li>• Minimally Invasive Direct Coronary Artery Bypass</li> <li>• Percutaneous Coronary Intervention</li> <li>• Severe Central or Mixed Sleep Apnea</li> <li>• Severe Obstructive Sleep Apnea</li> <li>• Severe Psychiatric Illness</li> </ul>	Whole life	20% advance payment per illness	Additional 10% (advance from Coverage Booster Amount)
			subject to a maximum of HK\$400,000 / US\$50,000 per life for each illness	
	• Osteoporosis with Fractures	Up to age 70	10% advance payment	Additional 5% (advance from Coverage Booster Amount)
		subject to a maximum of HK\$400,000 / US\$50,000 per life		
	• 34 Early Stage Critical Illnesses (excluding the above)	Whole life	20% advance payment per illness	Additional 10% (advance from Coverage Booster Amount)

\* Up to 50% of Initial Sum Assured within the first 15 policy years for insured aged 40 or below at policy issue, or the first 10 policy years for insured aged 41 or above at policy issue.

## Covered Illnesses Benefit Schedule (continued)

Type of Protection	Covered Illness	Benefit Term	Benefit (Percentage of Initial Sum Assured)	
			Basic Plan	Coverage Booster*
<b>13 Severe Child Diseases</b>				
<b>Severe Child Disease</b>	<ul style="list-style-type: none"> <li>Autism</li> <li>Dengue Haemorrhagic Fever</li> <li>Glomerulonephritis with Nephrotic Syndrome</li> <li>Insulin Dependent Diabetes Mellitus</li> <li>Intellectual Impairment due to Sickness or Injury</li> <li>Kawasaki Disease with Heart Complications</li> <li>Osteogenesis Imperfecta – Type III</li> <li>Rheumatic Fever with Valvular Impairment</li> <li>Severe Asthma</li> <li>Severe Haemophilia</li> <li>Still's Disease</li> <li>Type I Juvenile Spinal Amyotrophy</li> <li>Wilson's Disease</li> </ul>	Below age 18	20% advance payment per illness	Additional 10% (advance from Coverage Booster Amount)
			subject to a maximum of HK\$400,000 / US\$50,000 per life for each illness	
<b>Diabetes Complications Benefit</b>				
<b>Early Stage Critical Illness as a Diabetes Complication</b>	<p>Any one of the following complications which is caused by Diabetes Mellitus (including Insulin Dependent Diabetes Mellitus):</p> <ul style="list-style-type: none"> <li>Diabetic Retinopathy</li> <li>Less Severe Kidney Disease</li> <li>Loss of One Limb</li> <li>Loss of Sight in One Eye</li> </ul>	Whole life	20% advance payment (subject to a maximum of HK\$400,000 / US\$50,000 per life for Diabetic Retinopathy including the payment made for Diabetic Retinopathy under this benefit, critical illness benefit and coverage booster)	Not Applicable

\* Up to 50% of Initial Sum Assured within the first 15 policy years for insured aged 40 or below at policy issue, or the first 10 policy years for insured aged 41 or above at policy issue.

### Remarks:

- Other than cancer and heart-related major illnesses, the benefits paid for a major illness shall not exceed 100% of the Initial Sum Assured and will be reduced by any advance payments for minor illness, early stage critical illnesses (including any payment of diabetes complications benefit) and / or severe child diseases under the same Critical Illness Groups. For cancer, the benefit payable will be the lower of 100% of the Initial Sum Assured and the remaining balance of the benefit amount of Critical Illness Group 1 (Cancer) (i.e. 300%) after deducting any benefit paid or payable for previous cancer(s), Carcinoma-in-situ and Early Stage Malignancy. For heart-related major illnesses, the benefit payable will be the lower of 100% of the Initial Sum Assured and the remaining balance of the benefit amount of Critical Illness Group 2 (Illnesses related to the Heart) (i.e. 200%) after deducting any benefit paid or payable for previous heart-related major illnesses, early stage critical illnesses and / or severe child diseases.
- The benefit will be payable 1 time for each covered illness (except cancer, heart attack and Carcinoma-in-situ). For cancer, the payment will be payable up to 3 times. For heart attack, the payment will be payable up to 2 times. For Carcinoma-in-situ, the payment will be payable up to 2 times for different covered organ groups.
- Any claim payments made under the policy for minor illness, early stage critical illnesses and severe child diseases (including any payment of diabetes complications benefit) within 100% of the Initial Sum Assured will be regarded as advance claim payments. Once the payments made for the benefits have reached 100% of Initial Sum Assured, any subsequent claim payment will be regarded as an additional payment on top of the Initial Sum Assured already paid.
- Under Coverage Booster, the benefits paid for a major illness will be reduced by any advance payments for minor illness, early stage critical illnesses and / or severe child diseases. The advance claims payments made in total for benefits under Coverage Booster cannot exceed the Coverage Booster Amount, which is equivalent to 50% of the Initial Sum Assured. When the aggregate amount of any advance claims payments for the benefits under Coverage Booster reaches 100% of the Coverage Booster Amount, the Coverage Booster will cease to apply.



## Important Information

*This brochure does not contain the full terms and conditions of the policy. It is not, and does not form part of, a contract of insurance and is designed to provide an overview of the key features of this product. The precise terms and conditions of this plan are specified in the policy contract. Please refer to the policy contract for the definitions of capitalised terms, and the exact and complete terms and conditions of cover. In case you want to read policy contract sample before making an application, you can obtain a copy from AIA. This brochure should be read along with the illustrative document (if any) and other relevant marketing materials, which include additional information and important considerations about this product. We would like to remind you to review the relevant product materials provided to you and seek independent professional advice if necessary.*

This brochure is for distribution in Hong Kong only.

### Dividend and Bonus Philosophy

This is a participating insurance plan in which we share a portion of the profits earned on it and related participating insurance plans with the policy owners. It is designed to be held long term. The premiums of a participating insurance plan will be invested in a variety of assets according to our investment strategy. The cost of policy benefits (including guaranteed and non-guaranteed benefits as specified in your plan that may be payable on death, surrender or the occurrence of certain events such as hospitalization or diagnosis of a critical illness, as well as charges we make to support policy guarantees (if applicable)) and expenses will be deducted as appropriate from premiums of the participating insurance plan or from the invested assets. We aim to ensure a fair sharing of profits between policy owners and shareholders, and among different groups of policy owners.

Divisible surplus refers to profits available for distribution back to policy owners as determined by us. The divisible surplus that will be shared with policy owners will be based on the profits earned from your plan and similar plans or similar groups of policies (as determined by us from time to time by considering factors such as benefit features, policy currencies and period of policy issuance). Divisible surplus may be shared with the policy owners in the form of annual dividends and terminal bonuses as specified in your policy.

We review and determine the dividend and bonus amounts payable to policy owners at least once per year. Divisible surplus depends on the investment performance of the assets which we invest in and the amounts of benefits and expenses we need to pay for the plan. It is therefore inherently uncertain. Nevertheless, we aim to deliver relatively stable dividend and bonus payments over time through a smoothing process by spreading out the gains and losses over a period of time. The actual dividends and bonuses declared may be different from those illustrated or projected in any insurance plan information provided (e.g. benefit illustrations) depending on whether the divisible surplus, past experience and/or outlook are different from what we expected. If dividends or bonuses are different from our last communication, this will be reflected in the policy anniversary statement.

A committee has been set up to provide independent advice on the determination of the dividend and bonus amounts to the Board of the Company. The committee is comprised of members from different control functions or departments within the organisation both at the AIA Group level as well as Hong Kong local level, such as office of the Chief Executive of the Company, legal, compliance, finance, investment and risk management. Each member of the committee will endeavour to exercise due care, diligence and skill in the performance of his or her duties as a member. The committee will utilise the knowledge, experience, and perspectives of each individual member to assist the Board in the discharge of its duty to make independent decisions and to manage the risk of conflict of interests, in order to ensure fair treatment between policy owners and shareholders, and among different groups of policy owners. The actual dividends and bonuses, which are recommended by the Appointed Actuary, will be decided upon the deliberation of the committee and finally approved by the Board of Directors of the Company, including one or more Independent Non-Executive Directors, and with written declaration by the Chairman of the Board, an Independent Non-Executive Director and the Appointed Actuary on the management of fair treatment between policy owners and shareholders.

To determine the dividends and bonuses of a participating policy, we consider both past experience and the future outlook of all factors including, but not limited to, the following:

**Investment returns:** include interest earnings, dividends and any changes in the market value of the backing assets, i.e. the assets in which we invest your premiums (after deducting the cost of policy benefits and expenses). Depending on the asset allocation adopted for the insurance plan, investment returns could be affected by fluctuations in interest income (both interest earnings and the outlook for interest rates) and various market risks, including interest rate risk, credit spread and default risk, fluctuations in listed and private equity prices, real estate prices as well as foreign exchange rates if the currency of the backing assets is different from the policy currency, etc.

**Claims:** include claims for death benefits, critical illness benefits and any other insured benefits under the insurance plan.

**Surrenders:** include policy surrenders, partial surrenders and policy lapses; and their corresponding impact on the backing assets.

**Expenses:** include both expenses directly related to the policy (e.g. commission, underwriting, issue and premium collection expenses) and indirect expenses allocated to the insurance plan (e.g. general administrative costs).

Some participating insurance plans allow the policy owners to place their annual dividends, guaranteed and non-guaranteed cash payments, guaranteed and non-guaranteed incomes, guaranteed and non-guaranteed annuity payments with us, earning interest at a non-guaranteed interest rate. To determine such non-guaranteed interest rate, we consider the returns on the pool of assets in which these amounts are invested with reference to the past experience and future outlook. This pool of assets is segregated from other investments of the Company and may include bonds and other fixed income instruments. You have the right to request for historical accumulation interest rates before committing the purchase.

For dividend & bonus philosophy and dividend/bonus history, please visit our website at <https://www.aia.com.hk/en/dividend-philosophy-history.html>



### Investment Philosophy, Objective and Strategy

Our investment philosophy aims to deliver sustainable long-term returns in line with the insurance plan's investment objectives and the Company's business and financial objectives.

Our aforementioned objectives are to achieve the targeted long-term investment results while minimising volatility in investment returns to support the liabilities over time. They also aim to control and diversify risk exposures, maintain adequate liquidity and manage the assets with respect to the liabilities.

Our current long-term target strategy is to allocate assets attributed to this insurance plan as follows:

Asset Class	Target Asset Mix (%)
Bonds and other fixed income instruments	55% - 75%
Growth assets	25% - 45%

The bonds and other fixed income instruments predominantly include government and corporate bonds and are mainly invested in the United States and Asia-Pacific. Growth assets may include listed equity, equity mutual funds, physical real estate, real estate funds, private equity funds and private credit funds, and are mainly invested in the United States, Asia-Pacific and Europe. Growth assets generally have a higher long-term expected return than bonds and fixed income assets but may be more volatile in the short term. The range of target asset mix may be different for different participating insurance plans. Our investment strategy is to actively manage the investment portfolio i.e. adjust the asset mix dynamically over a range that can be wider than the target range in response to the external market conditions and the financial condition of the participating business. For example, there may be a smaller proportion of growth assets when interest rates are low and a larger proportion of growth assets when interest rates are high. When interest rates are low, the proportion of growth assets may be even smaller than the long-term target strategy, so as to allow us to minimise volatility in investment returns and to protect our ability to pay the guaranteed benefits under the insurance plans, whereas the proportion of the growth assets may be even larger than the long-term target strategy when interest rates are high to allow for the possibility that we may share more investment opportunities in growth assets with the policy owners.

Subject to our investment objectives, we may use a material amount of derivatives (such as through pre-investing partly or fully expected future premiums) to manage our investment risk exposure and for matching between assets and liabilities, for example, the effects of changes in interest rates may be moderated while allowing for more flexibility in asset allocation.

Our general currency strategy is to minimise currency mismatches for bonds and other fixed income instruments. For these investments, our current practice is to endeavour to currency-match asset purchases with the currency of the underlying policy (e.g. US Dollar assets will be used to back US Dollar insurance plans and HK Dollar assets will be used to back HK Dollar insurance plans). However, subject to market availability and opportunity, bonds or other fixed income instruments may be invested in a currency other than the currency of the underlying policy and currency swaps may be used to minimise the currency risks. Currently assets are mainly invested in US Dollar. Growth assets may be invested in a currency other than the currency of the underlying policy and the selection of the currency is made according to our investment philosophy, investment objectives and mandate.

We will pool similar participating insurance plans for investment to determine the return and we will then allocate the return to specific participating insurance plans with reference to their target asset mix. Actual investments (e.g. geographical mix, currency mix) would depend on market opportunities at the time of purchase, hence may be different from the target asset mix.

The investment strategy is subject to change depending on the market conditions and economic outlook. Should there be any material changes in the investment strategy, we will inform policy owners of the changes, with underlying reasons and expected impact to the dividends and bonuses.

## Key Product Risks

1. You should pay premium(s) on time and according to the selected premium payment schedule. If you stop paying the premium before completion of the premium payment term, you may elect one of the non-forfeiture options to surrender the policy or convert the policy to a non-participating insurance plan with life protection only (excluding compassionate cash benefit in the policy conversion). Compared with the original plan, such a plan will have less cover or a shorter term.

If no non-forfeiture option has been elected, the premium will be covered by a loan taken out on the policy automatically. When the loan balance exceeds the sum of guaranteed cash value and accumulated Annual Dividends with interest (if any) of the basic plan, the policy will lapse and you will lose the cover. The surrender value of the policy will be used to repay the loan balance, and we will refund any remaining value.

2. The plan may make certain portion of its investment in growth assets. Returns of growth assets are generally more volatile

than bonds and other fixed income instruments, you should note the target asset mix of the product as disclosed in this product brochure, which will affect the bonus and dividend on the product. The savings component of the plan is subject to risks and possible loss. Should you surrender the policy early, you may receive an amount considerably less than the total amount of premiums paid.

3. You may request for the termination of your policy by notifying us in written notice. Also, we will terminate your policy and you / the insured will lose the cover when one of the following happens:

- the insured passes away;
- you do not pay the premium within 31 days of the due date and the policy has no cash value;
- the end of the benefit term if basic policy has been continued as a non-participating insurance plan; or
- the outstanding debt exceeds the guaranteed cash value of the policy. Where the premium is covered by a loan taken out on the policy automatically, the outstanding debt exceeds the sum of guaranteed cash value and accumulated Annual Dividends with interest (if any) of your policy.

4. Multiple illnesses protection will be terminated when one of the following happens:

- when the claims payments made in total for benefits under the Critical Illness Group reach the maximum benefit of the corresponding Critical Illness Group as shown in the table under the section "115 illnesses protection with multiple cover" on page 5; or
- at the anniversary of the cover immediately following the insured's 85th birthday. Afterwards, advance claims payments for illnesses suffered across any and all the Critical Illness Groups will be capped at 100% of the Initial Sum Assured.

5. Benign Extra Benefit of an organ will be terminated when one of the following happens:

- upon successful re-assessment and cover extension to full cancer protection for the respective organ between the 2nd and 6th policy year;
- when 20% of Initial Sum Assured in aggregate is paid for cancer, Carcinomas-in-situ and Early Stage Malignancy occurring in the respective organ with covered benign conditions; or
- when critical illness benefit is ceased under the basic policy, i.e.:
  - before the insured reaches the age of 85: when the claims payments made in total for benefits under all Critical Illness Groups have reached the maximum benefit of each of the Critical Illness Groups;
  - after the insured reaches the age of 85: when the claims payments made in total for benefits under any and all Critical Illness Groups have reached 100% of the Initial Sum Assured; or
  - when the basic plan is converted to a non-participating insurance plan.

6. Coverage Booster will be terminated when one of the following happens:

- when the claims payments made in total for benefits under the Coverage Booster reach the Coverage Booster Amount (50% of Initial Sum Assured);
- at the end of the 15th policy year (for the insured's age 40 or below at policy issue) or 10th policy year (for the insured's age 41 or above at policy issue); or
- when the basic plan is terminated or converted to a non-participating insurance plan.

7. We underwrite the plan and you are subject to our credit risk. If we are unable to satisfy the financial obligations of the policy, you may lose your premium paid and benefits.

Effective from 1 January 2018, all policy owners are required to pay a levy on each premium payment made for both new and in-force Hong Kong policies to the Insurance Authority (IA). For levy details, please visit our website at [www.aia.com.hk/useful-information-ia-en](http://www.aia.com.hk/useful-information-ia-en) or IA's website at [www.ia.org.hk](http://www.ia.org.hk).

8. You are subject to exchange rate risks for plans denominated in currencies other than the local currency. Exchange rates fluctuate from time to time. You may suffer a loss of your benefit values and the subsequent premium payments (if any) may be higher than your initial premium payment as a result of exchange rate fluctuations. You should consider the exchange rate risks and decide whether to take such risks.
9. Your current planned benefit may not be sufficient to meet your future needs since the future cost of living may become higher than they are today due to inflation. Where the actual rate of inflation is higher than expected, you may receive less in real terms even if we meet all of our contractual obligations.

### Key Exclusions

Except for the death benefit and compassionate cash benefit, under this plan, we will not cover any of the following events or conditions that result from any of the following events:

- any illnesses with signs / symptoms or surgeries caused or triggered by conditions, which first occurred before or within 90 days after the policy is issued;
- Fulminant viral hepatitis or cancer of the insured due to AIDS or HIV infection; and
- a self-inflicted injury.

The above list is for reference only. Please refer to the policy contract of this plan for the complete list and details of exclusions.

### Premium Adjustment

In order to provide you with continuous protection, we will review the premium of your plan from time to time within the premium payment term and adjust accordingly at the end of policy year if necessary. During the review, we may consider factors including but not limited to the following:

- claim costs incurred from all policies under this plan and the expected claim outgo in the future which reflects the impact of change in the incidence rate of deaths, covered illnesses and covered surgeries
- historical investment returns and the future outlook of the product's backing asset
- policy surrenders and lapses
- expenses directly related to the policy and indirect expenses allocated to this product

We will give you a written notice of any revision 31 days before the end of policy year.

### Product Limitation

In case the insured reaches the age of 70 or above and makes any subsequent claim for prostate cancer resulting from the continuation of a previous prostate cancer for which a previous claim was made, the benefit will only be payable if the insured has received or is in the process of receiving the full course of cancer-directed surgery, radiotherapy, chemotherapy, targeted therapy or a combination of these treatments (excluding hormonal therapy) which is medically necessary during the intervening period between the diagnosis of the previous and subsequent prostate cancer.

"Medically necessary" means that the medical services, diagnosis and / or treatments are:

- delivered according to standards of good medical practice;
- necessary; and
- cannot be safely delivered in a lower level of medical care.

Experimental, screening, and preventive services or supplies are not considered medically necessary.

### Claim Procedure

If you wish to make a claim, you must send us the appropriate forms and relevant proof. You can get the appropriate claim forms in [www.aia.com.hk](http://www.aia.com.hk), from your financial planner, by calling the AIA Customer Hotline (852) 2232 8888 in Hong Kong, or by visiting any AIA Customer Service Centre. For details related to making a claim, please refer to the policy contract. If you wish to know more about claim related matter, you may visit "File A Claim" section under our company website [www.aia.com.hk](http://www.aia.com.hk).

### Suicide

If the insured commits suicide within one year from the date on which the policy takes effect, our liability will be limited to the refund of premiums paid (without interest) less any outstanding debt.

### Incontestability

Except for fraud or non-payment of premiums, we will not contest the validity of this policy after it has been in force during the lifetime of the insured for a continuous period of two years from the date on which the policy takes effect. This provision does not apply to any add-on plan providing accident, hospitalisation or disability benefits.

### Cancellation Right

You have the right to cancel and obtain a refund of any premiums and any levy paid by giving written notice to us. Such notice must be signed by you and submitted to the Customer Service Centre of AIA International Limited at 12/F, AIA Tower, 183 Electric Road, North Point, Hong Kong within 21 calendar days immediately following either the day of delivery of the policy or the Cooling-off Notice to you or your nominated representative, whichever is the earlier.

Please contact your financial planner or call AIA Customer Hotline for details

Hong Kong  (852) 2232 8888

 [aia.com.hk](http://aia.com.hk)

