

無憂後備管理服務

提升對無行為能力醫療狀況的保障



簡介

若患上嚴重疾病或出現精神問題，受影響的不單是您的健康，還可能給您和您的家人帶來沉重的財務負擔。

滙豐保險推出具前瞻性的附加保障 — **無憂後備管理服務**，讓您事先安排直系親屬在難以預料的情況下，因應您身體或精神狀況而無行為能力時，提取您保單的部分現金價值總和，安渡難關。

當您被診斷為無行為能力時，這項服務如何為您和摯愛提供支援？

您作為我們指定人壽保險計劃之保單持有人，可申請無憂後備管理服務並指明一名直系親屬作為指定人士。此指定人士為父母、配偶（包括同性配偶）、成年子女或兄弟姊妹。如果您因下列任何一種醫療狀況而被註冊醫生診斷為無行為能力的人，該名指定人士可以按您所訂明的指定百分比（10% - 50%），提取保單部分現金價值總和（「無行為能力保障」）：

- | | |
|----------|------------|
| • 腦皮質壞死 | • 嚴重頭部創傷 |
| • 昏迷 | • 精神上無行為能力 |
| • 不能獨立生活 | • 癱瘓 |

主要特點



快速獲取現金價值總和作應急之用

您的指定人士無須經過複雜程序而可以立即提取現金價值總和的指定部分，以應付必要的醫療或其他費用。



靈活自主

您可以為您每份指定人壽保險計劃委任不同的指定人士。您也可以在任何需要時重新委任其他指定人士或調整指定百分比。



提供持續保障

即使我們已支付無行為能力保障，您的指定人壽保險計劃將仍然有效，繼續提供已調整的人壽保障及財富累積。

說明例子

根據「無憂後備管理服務」提取現金價值總和

Paul與Joey結婚後，育有一子。作為家庭經濟支柱的Paul，希望未雨綢繆，在自己萬一遭遇不幸時，能為他們的未來提供經濟保障。他投保了一份包含無憂後備管理服務的分紅保險產品，並指明Joey為無憂後備管理服務下的指定人士，因此若Paul經註冊醫生診斷為無行為能力的人，Joey可提取保單中45%指定百分比的現金價值總和作為無行為能力保障。Paul並於保單第10年完成繳付所有保費。

在保單第15年，Paul因車禍陷入昏迷並需要住院。由於Paul需要被長期照顧，Joey根據無憂後備管理服務申請提取45%的現金價值總和，以解燃眉之急。經滙豐保險批核後，Joey獲支付45%的現金價值總和作為無行為能力保障。該金額被提取後，Paul的保單仍然有效並繼續提供已調整的人壽保障。



如果Paul沒有指明Joey作為無憂後備管理服務的指定人士，情況會如何？

作為保單持有人的Paul目前處於昏迷狀態，無法處理保單相關事宜。Joey可能會面臨不少挑戰，包括如何接管Paul的保單，或尋找適當人士代替Paul處理相關事務。這種情況可能相當複雜且耗時，而Joey也無法保證能順利接手保單，或得到代表人士協助。

申請及了解更多資訊

如您有意申請無憂後備管理服務，請致電客戶服務熱線(853) 2821 6133，亦可諮詢您的理財策劃顧問。我們樂意了解你的需求，並講解無憂後備管理服務如何能夠幫助您。

備註：

1. 無憂後備管理服務只適用於具有保單價值的指定人壽保險計劃。本公司將不時釐定所涵蓋之指定人壽保險計劃及對此擁有酌情權。
2. 本公司對是否接納有關無憂後備管理服務之申請或修改擁有絕對酌情權，並受相關之保單條款所約束。閣下可申請、修改或撤銷無憂後備管理服務，惟此等要求必須於閣下在神智正常的情況下提出。
3. 指定人士必須是您父母、配偶(包括同性配偶)、成年子女和兄弟姊妹的直系親屬家庭成員，並且於委任當日之真實年齡為18歲或以上。
4. 無憂後備管理服務不是用以委任指定人士為保單持有人的受權人或監護人。若指定人士與任何其他人士之間發生爭議，包括但不限於保單持有人的監護人、受權人或受益人之間有爭議，本公司將保留拒絕支付無行為能力保障之權利，直至在該爭議得到解決為止。
5. 指定人士的委任將在下列情況下自動撤銷：(1)本公司接受保單所有權變更；(2)本公司獲悉保單持有人或指定人士身故的通知；(3)本公司獲悉保單持有人已根據澳門法律委任監護人(或在另一司法管轄區有根據類似法律委任監護人)；或(4)本公司接受後續保單轉讓安排。
6. 若保單持有人持有多於一份具有無憂後備管理服務之指定人壽保險計劃，保單持有人可於該等計劃上委任不同的指定人士。
7. 無行為能力保障只會於保單持有人因下列任何一種醫療狀況而被註冊醫生診斷為無行為能力的人時被支付：

腦皮質壞死 – 指大腦皮質全面壞死而腦幹完整無損之狀況。診斷必須經由腦神經科專科註冊醫生證實，並有最少1個月之醫療文件紀錄證明。

昏迷 – 處於不省人事的狀態，對外界刺激或內在需要毫無反應，並屬永久性神經功能受損。昏迷必須持續至少96小時，並需要使用插管和機械性呼吸的方法來維持生命。昏迷必須由腦神經科專科註冊醫生確認。

不能獨立生活 – 在沒有輔助下，不能完成於以下定義部份界定的「日常生活活動」的其中最少3項活動，並已持續最少6個月及導致永久不能完成有關活動。就此定義而言，「永久」一詞是指根據現時醫學知識及技術，已完全沒有復原的希望。不能獨立生活的診斷必須由註冊醫生確定。

嚴重頭部創傷 – 因意外的頭部受傷引致殘餘腦損傷，導致永久性神經功能障礙並引發嚴重的功能障礙。「嚴重功能障礙」是指腦神經科專科註冊醫生評估保單持有人在格拉斯哥昏迷指數或在醫學文獻中普遍接受的類似量表的8分版本中得分為5分或以下。

精神上無行為能力 – 精神上無行為能力的診斷必須由精神科專科註冊醫生確定。

癱瘓 – 由損傷或疾病導致癱瘓、從而引起最少兩肢完全及永久喪失功能，而且無法治癒。癱瘓必須以適當的腦神經學證據證明。專科註冊醫生必須認為癱瘓狀態是永久性的，沒有康復的希望，並且存在3個月以上。

8. 本公司就本保單之無行為能力保障作出賠償之前，本公司必須根據條款及細則收到以書面方式提出無行為能力保障之索償通知及令本公司滿意及可接受的證明。相關證明文件之正本須遞交給本公司。
9. 無憂後備管理服務賠償的百分比須介乎10%至50%及為整數；無能力行為保障的金額等於現金價值總和乘以指定百分比。
10. 無行為能力保障將按照以下次序提取金額：
 - (1) 從保單價值管理收益結餘中提取(如有)；及
 - (2) 若保單價值管理收益結餘不足，則無行為能力保障中的餘額金額將從保證現金價值及特別獎賞(如有)中提取。任何提取保證現金價值及特別獎賞(如有)將自動調減投保額/保單金額的減少，如同已申請部分退保一樣。部分退保將減少您未來的保障，包括但不限於基本計劃(如適用)的保證現金價值、特別獎賞、身故賠償及附加保障(如有)。減少後的保額/保單金額必須符合我們不時設定的保單剩餘保額/保單金額的最低金額。當提取金額達到最低投保額/保單金額時，實際可提取的無行為能力保障金額可能會少於以您現金價值總和的指定百分比計算的金額。
11. 保單持有人須提醒指定人士須在保單持有人被診斷為無行為能力的人後90日內向本公司以書面方式提出無行為能力保障之索償通知及令本公司滿意及可接受的證明。
12. 本公司沒有責任或不會負責核實任何指定人士之委任有效性或合法性，或就任何指定人士之委任有效性或合法性負責。本公司不會亦不應被認為會就任何指定人士的委任承擔任何責任。當本公司支付無行為能力保障後，我們將不會對核實無行為能力保障的支付狀況有任何義務，亦不會對任何錯誤或不正確的支付負責。
13. 如要申請無憂後備管理服務，保單持有人須保證及聲明包括但不限於指定人士具有資格處理此職責。
14. 本公司有權就此申請要求額外資料或文件及／或施加額外條件，包括但不限於以本公司的絕對酌情權釐定的方式以認證指定人士的身份及入境證明(如適用)。
15. 請參閱指定人壽保險計劃及無憂後備管理服務之保單條款以獲取詳情。

定義：

「日常生活活動」之定義如下：

- **沐浴** – 以浸浴或淋浴方式自我清洗(包括能進入及離開浴缸或淋浴間)或以其他方式清洗達到滿意的能力；
- **更衣** – 穿戴、脫下、固定與解開所有衣物及(如適當)任何配帶的矯正器、義肢及其他外科手術器具的能力；
- **行動** – 從床移動到直立的椅子上或輪椅上的能力，反之亦然；
- **如廁** – 能自行如廁或能自我控制肛門及膀胱功能，以保持滿意之個人衛生水平；
- **進食** – 自行進食預先準備妥當之食物的能力。

「指定百分比」指由保單持有人指定的現金價值總和的百分比，該百分比必須為完整數字及於我們不時釐定的可選範圍內。

「指定人士」指就本附加保障下，由保單持有人指定的無行為能力保障之收款人士。

「無行為能力的人」指在精神和／或身體上喪失行為能力的人。

「無行為能力保障」指根據本附加保障的條款及細則應支付予指定人士的保障賠償。

「註冊醫生」指任何根據澳門特區第18/2020號法律或任何修訂條例而正式符合資格及合法註冊的醫生，或在本公司接受的任何其他國家／地區根據當地法律獲授權執業的西醫，而該等醫生並非受保人或保單持有人本人或其直系親屬。

免責聲明：

滙豐人壽保險(國際)有限公司

HSBC Life (International) Limited 滙豐人壽保險(國際)有限公司(「滙豐保險」)是於百慕達註冊成立之有限公司。本公司為滙豐集團旗下從事承保業務的附屬公司之一。

滙豐人壽保險(國際)有限公司澳門分公司

HSBC Life (International) Limited, Macau Branch 滙豐人壽保險(國際)有限公司澳門分公司(「本公司」或「我們」)是根據澳門法律成立之分公司。本公司為滙豐集團旗下從事承保業務的附屬公司之一。

香港特別行政區辦事處

香港九龍深旺道1號滙豐中心1座18樓

滙豐保險澳門分公司辦事處

總辦公室：澳門南灣大馬路619號時代商業中心1字樓

滙豐保險策劃中心：澳門宋玉生廣場393號皇朝廣場地下AC座

本傳單僅載列一般資訊。本傳單不構成任何保險產品之要約。本公司對本單張所刊載資料的準確性承擔全部責任，並確認在作出一切合理查詢後，盡其所知所信，本單張並無遺漏其他事實而足以令其任何陳述具誤導成分。有關產品特點、條款及細則的詳情，請參閱特定產品的相關產品冊子、保單條款及保險計劃建議書。

所有具有無憂後備管理服務的指定人壽保險產品均由本公司所承保，其獲澳門金融管理局授權及受其監管，於澳門特別行政區經營長期保險業務。滙豐保險將負責按人壽保單條款為您提供保險保障以及處理索償申請。

所有具有無憂後備管理服務的指定人壽保險產品屬本公司，並只擬在澳門特別行政區銷售。您繳付的保費將成為本公司資產的一部分。因此，保單持有人將承受本公司的信貸風險。保單持有人對任何該等資產沒有任何權利或擁有權。對於滙豐保險與您之間因銷售過程或處理有關交易而產生的合資格爭議(定義見金融消費糾紛調解計劃的受理範圍)，滙豐保險須與您進行金融消費糾紛調解計劃程序；然而，涉及上述產品之保單條款及細則的任何糾紛，將直接由本公司與您共同解決。



Incapacity Protection Service

Enhancing coverage for incapacitating medical conditions



Introduction

Confronting a serious illness or mental health challenge can be more than a medical journey - it's a financial vulnerability that could overwhelm you and your loved ones.

HSBC Life presents the **Incapacity Protection Service**, a forward-looking supplementary benefit designed to **provide you and your family a predetermined and dignified pathway** to financial support. This service allows you to proactively empower your immediate family member to access your Policy's Aggregate Cash Value if you become physically or mentally incapacitated.

How does this service empower your family to care for you while you are diagnosed as incapacitated?

You as the policyholder of our designated life insurance Plans can enroll in the Incapacity Protection Service and appoint an **immediate family member as the Designated Person** for the service. This person can be your parent, spouse (including same-sex spouse), adult child or sibling. The Designated Person can withdraw a **Designated Percentage (10% - 50%)** of the Aggregate Cash Value predetermined by you ("**Incapacity Benefit**"), in the event you are diagnosed as an Incapacitated Person by a Registered Medical Practitioner, as a result of one of the following medical conditions:

- | | |
|---------------------------------|---------------------|
| • Apallic syndrome | • Major head trauma |
| • Coma | • Mental incapacity |
| • Loss of independent existence | • Paralysis |

Key features



Quick access to Aggregate Cash Value for emergencies

Your Designated Person can promptly access the designated portion of Aggregate Cash Value for necessary medical or other expenses without complications.



Enjoy the flexibility

You can assign a different Designated Person to each of your designated life insurance Plans. You can also reassign another Designated Person, or adjust the Designated Percentage whenever needed.



Maintain continuous coverage

Even though the Incapacity Benefit has been paid, your designated life insurance Plan will remain in effect to provide adjusted life protection and wealth accumulation.

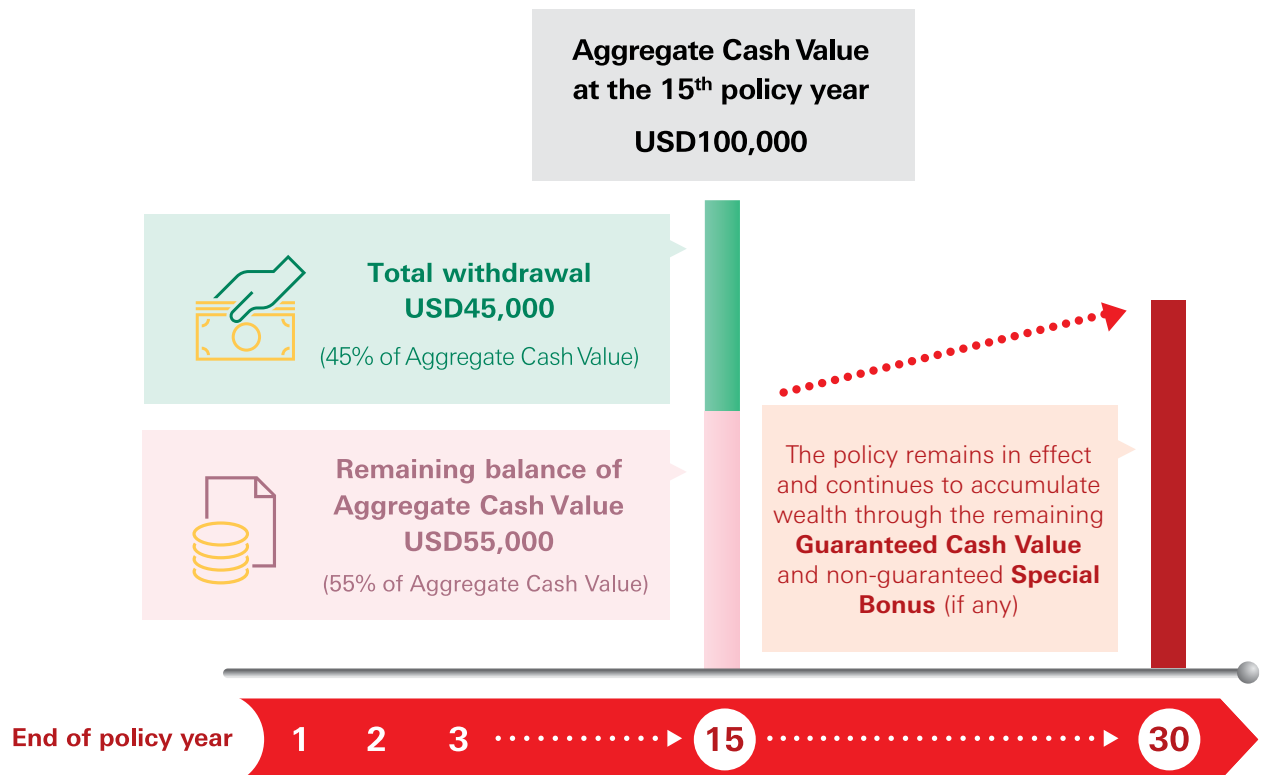


Case study

Aggregate Cash Value withdrawal under the Incapacity Protection Service

Paul and Joey are a married couple with a child. As the family's breadwinner, Paul aims to secure their financial future in case of any unfortunate events. He purchases a participating insurance product and enrolls in the Incapacity Protection Service with Joey appointed as the Designated Person. By such, Joey is empowered to withdraw the Designated Percentage of 45% of the Policy's Aggregate Cash Value as the Incapacity Benefit if Paul is diagnosed as an Incapacitated Person by a Registered Medical Practitioner. The Policy is eventually paid up in the 10th policy year.

In the 15th policy year, Paul falls into a coma and requires hospitalisation due to a car accident. As he needs long-term care, Joey applies to withdraw 45% of the Aggregate Cash Value through the Incapacity Protection Service to ease their financial burden. Upon receiving approval from HSBC Life, 45% of the Aggregate Cash Value is disbursed to Joey as the Incapacity Benefit. The Policy remains in effect with an adjusted life protection after this withdrawal.



What if Paul did not appoint Joey as the Designated Person under the Incapacity Protection Service?

Paul, as the policyholder, is in a coma and unable to handle any policy-related matters. Joey faces challenges in stepping in to manage the Policy or appointing someone to act on Paul's behalf. The situation is complex and time-consuming, with no certainty that Joey will be able to assume responsibility for the Policy or assisted by an appropriate representative.

For enrollment and more information

To enroll in the Incapacity Protection Service, you can reach the Customer Service Hotline at (853) 2821 6133. Alternatively, please contact your Wealth Planning Specialists. We are happy to discuss your specific needs and explain how the Incapacity Protection Service can assist you.

Notes:

1. Incapacity Protection Service is applicable only to the designated life insurance Plans with policy value. The scope of the designated life insurance Plans is determined by the Company from time to time at the Company's discretion.
2. The acceptance of any enrollment of or change of the Incapacity Protection Service is at our sole and absolute discretion, and subject to the relevant policy provisions. You may enroll in, amend or revoke the Incapacity Protection Service, provided that you are mentally sane at the time of making such requests.
3. The Designated Person must be an immediate family member as your parent, spouse (same-sex spouse included), adult child or sibling, and he/she has reached actual age 18 or above at the time of designation.
4. Incapacity Protection Service does not appoint the Designated Person as the policyholder's attorney or guardian. In the event of a dispute between the Designated Person and any other person, including but not limited to the policyholder's guardian, attorney and/or beneficiary(ies), the Company reserves the right to withhold the payment of the Incapacity Benefit until such dispute is resolved.
5. The Designation of the Designated Person will be automatically revoked when (1) the Company's acceptance of the change of policy ownership; (2) the Company has been notified that the policyholder or the Designated Person died; (3) the Company has been notified that there is a guardian appointed for the policyholder under the Laws of the Macau SAR (or if there is a guardian appointed under similar laws in another jurisdiction); or (4) the Company's acceptance of a subsequent arrangement of policy assignment.
6. If the policyholder holds more than one Policy of the designated life insurance Plans with the Incapacity Protection Service, a different Designated Person can be designated under each of the Policies.
7. The Incapacity Benefit is payable only if the policyholder is diagnosed by a Registered Medical Practitioner to be an Incapacitated Person as a result of one of the following medical conditions:

Apallic syndrome – universal necrosis of the brain cortex with the brainstem intact. This diagnosis must be definitely confirmed by a Registered Medical Practitioner who is a neurologist. This condition is required be medically documented for at least 1 month.

Coma – a state of unconsciousness with no reaction to external stimuli or internal needs, which is associated with a permanent neurological deficit. The coma must persist for at least 96 hours and require intubation and mechanical ventilation to sustain life. The coma must be confirmed by a Registered Medical Practitioner who is a neurologist.

Loss of independent existence – inability to perform at least three of the Activities of Daily Living as defined in the Definitions section below without assistance for a continuous period of at least 6 months and leading to a permanent inability to perform the same. For the purpose of this definition, the word "permanent" shall mean beyond the hope of recovery with current medical knowledge and technology. The diagnosis of Loss of Independent Existence must be confirmed by a Registered Medical Practitioner.

Major head trauma – accidental head injuries resulting in residual brain damage to the extent that there is a permanent neurological deficit causing Significant Functional Impairment. "Significant Functional Impairment" means a Registered Medical Practitioner who is a neurologist has assessed the policyholder as scoring 5 or less on the 8 point version of the Glasgow Outcome Scale of Head Injuries or equivalent levels of functional impairment on a similar scale which has been generally accepted in medical literature.

Mental incapacity – the diagnosis of mental incapacity must be confirmed by a Registered Medical Practitioner who is a specialist.

Paralysis – total and irreversible loss of use of two or more limbs through paralysis as a result of injury or disease. The paralysis must be supported by appropriate neurological evidence. A Registered Medical Practitioner who is a specialist must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

8. Before the Company pays the Incapacity Benefit under the Policy, the Company must receive written notice of the claim of the Incapacity Benefit and acceptable proof to our satisfaction, subject to the terms and conditions. The original supporting documents must be submitted to the Company.
9. The percentage of the Incapacity Benefit is ranged from 10% to 50% and in integer; the withdrawal amount equals to the Aggregate Cash Value multiplied by the percentage ("Designated Percentage").
10. The Incapacity Benefit will be withdrawn in the following order:
 - (1) from the Policy Value Management Balance (if any); and
 - (2) if the Policy Value Management Balance is not sufficient, the remaining amount of Incapacity Benefit will be withdrawn from the Guaranteed Cash Value and Special Bonus (if any).

Any withdrawal from the Guaranteed Cash Value and Special Bonus (if any) will automatically trigger reduction of Sum Insured/Policy Amount as if an application for partial surrender has been made. Partial surrender will reduce your future benefits including but not limited to the Guaranteed Cash Value, Special Bonus, Death Benefit and supplementary benefit (if any) of the basic plan (if applicable). The Sum Insured/Policy Amount after the reduction must meet a minimum amount of the remaining Sum Insured/Policy Amount of the Policy, which we set from time to time. When the withdrawal results in reaching of the minimum Sum Insured/Policy Amount, the actual amount of Incapacity Benefit withdrawable may be less than the amount calculated based on the percentage of Designated Percentage of Aggregate Cash Value as designated by you.

11. The policyholder shall remind the Designated Person that he/she shall inform the Company by providing us a written notice of the claim of the Incapacity Benefit and acceptable proof to our satisfaction within 90 days from the date the policyholder is diagnosed as an Incapacitated Person.
12. The Company shall not assume any duty or be responsible to verify, or be responsible for the validity or legality of any appointment of the Designated Person. The Company shall not assume or be regarded to assume any responsibility or liability in relation to any designation of Designated Person. Once the Incapacity Benefit is paid, the Company has no obligation to verify the conditions of payment for the Incapacity Benefit and have no responsibility for any mistaken or incorrect payment.
13. To enroll for the Incapacity Protection Service, the policyholder will be required to, among others, warrant and represent that the Designated Person is eligible to act in such role.

14. The Company shall have the right to request for additional information or documents and/or impose further requirements for this enrollment, including but not limited to documents authenticating the identity and entry proofs (if applicable) of the Designated Person in the manner as determined by the Company at its sole and absolute discretion.

15. Please refer to the policy provisions of the designated life insurance Plans and the Incapacity Protection Service for details.

Definitions:

“Activities of Daily Living” are defined as below:

- **Washing** – the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- **Dressing** – the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- **Transferring** – the ability to move from a bed to an upright chair or wheelchair and vice versa;
- **Toileting** – the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- **Feeding** – the ability to feed oneself once food has been prepared and made available.

“Designated Percentage” means a percentage of the Aggregate Cash Value as specified by the policyholder, which must be a whole number percentage within a range to be determined by us from time to time.

“Designated Person” means the person designated by the policyholder to receive the Incapacity Benefit under this supplementary benefit.

“Incapacitated Person” means a person who is incapable, by reason of physical and/or mental incapacity.

“Incapacity Benefit” means the benefit payable to the Designated Person pursuant to the terms and conditions of this supplementary benefit.

“Registered Medical Practitioner” means any Medical Practitioner duly qualified and legally registered as such under the Law no. 18/2020 of the Macau SAR or any amendment thereto, or otherwise authorised and entitled to practise western medicine in any other country/region as accepted by us in accordance with the laws of that country/region and who is other than the life insured or the policyholder or a member of the life insured’s or the policyholder’s immediate family.

Disclaimer:

HSBC Life (International) Limited

HSBC Life (International) Limited (“HSBC Life”) is incorporated in Bermuda with limited liability, and is one of the HSBC Group’s insurance underwriting subsidiaries.

HSBC Life (International) Limited, Macau Branch

HSBC Life (International) Limited, Macau Branch (“the Company”, “we” or “us”) is a branch incorporated in accordance with Macau laws, and is one of the HSBC Group’s insurance underwriting subsidiaries.

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This leaflet contains general information only. It does not constitute any offer for any insurance product. The Company accepts full responsibility for the accuracy of the information contained in the product brochure and confirms, having made all reasonable enquiries, that to the best of its knowledge and belief there are no other facts the omission of which would make any statement misleading. For details of product feature, terms and conditions, please refer to the relevant product brochures, policy provisions and benefit illustrations of particular product(s).

All the designated life insurance products with Incapacity Protection Service are underwritten by the Company, which is authorised and regulated by the Autoridade Monetária de Macau of the Macau Special Administrative Region (“Macau SAR”) to carry on long-term insurance business in the Macau SAR. HSBC Life will be responsible for providing your insurance coverage and handling claims under your life insurance policy.

All the designated life insurance products with Incapacity Protection Service are the products of the Company and they are intended for sale in the Macau SAR only. Your premiums paid will form part of the Company assets. Any such, policyholders will be subject to the credit risk of the Company. Policyholders do not have rights or ownership over any of those assets. In respect of an eligible dispute (as defined in the admissibility scope in the Mediation Scheme for Financial Consumption Disputes) arising between HSBC Life and you out of the selling process or processing of the related transaction, HSBC Life is required to enter into a Financial Consumption Dispute Mediation process with you; however, any dispute over the contractual terms of the above insurance products should be resolved between the Company and you directly.

