

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。您也可以需要在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

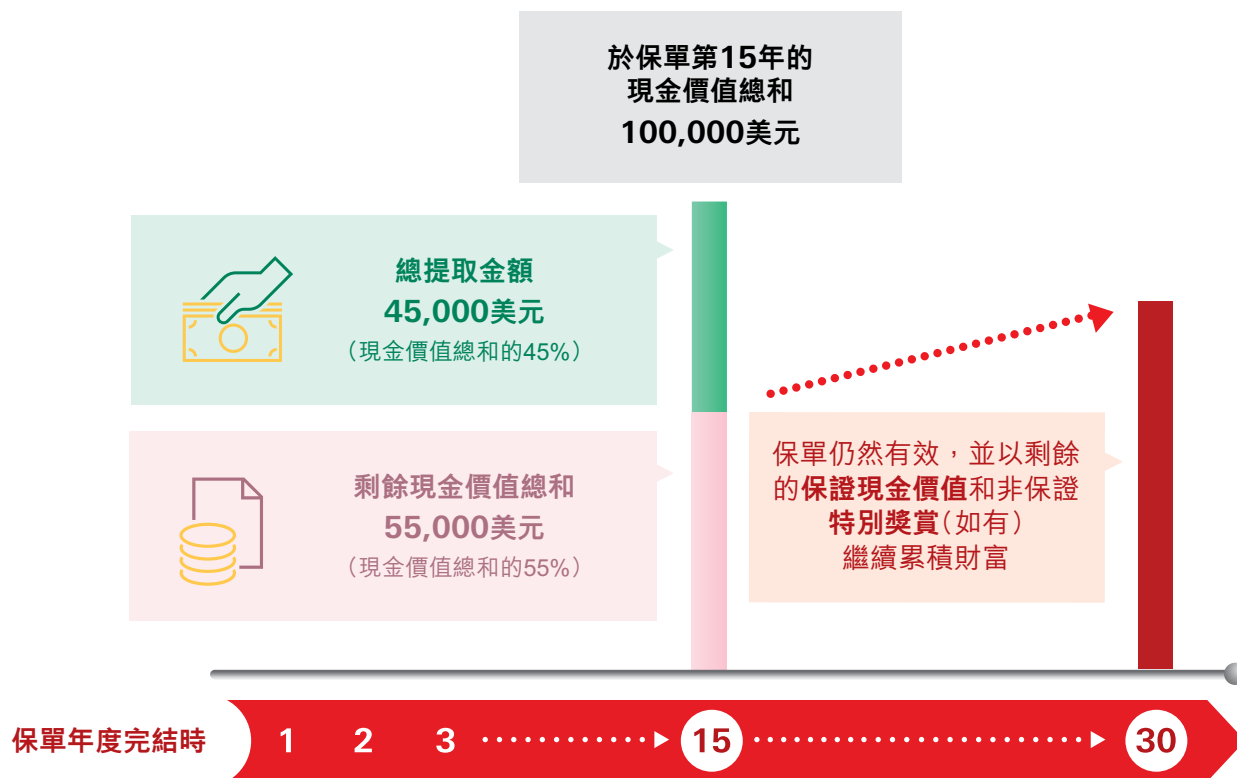
即使我們已支付無行為能力保障，您的指定人壽保險計劃將仍然有效，繼續提供已調整的人壽保障及財富累積。

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，請致電滙豐保險服務熱線2583 8000，亦可諮詢您的客戶經理或持牌保險中介人。我們樂意了解您的需求，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。滙豐人壽保險(國際)有限公司(「滙豐保險」、「本公司」或「我們」)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况下提出。
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構成持久授權書(適用於香港特別行政區)、監護令或受託監管令，亦不是用以委任指定人士為保單持有人的受權人或監護人或受託監管人。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或受託監管人、受權人(包括根據已存在的持久授權書下委任的受權人)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已訂立持久授權書(適用於香港特別行政區)；(3)本公司獲悉保單持有人或指定人士身故的通知；(4)本公司獲悉稱已根據《精神健康條例》(香港法例第136章)保單持有人已根據《精神健康條例》(香港法例第136章)委任監護人或受託監管人(或在另一司法管轄區有根據類似法律委任監護人或受託監管人)；或(5)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」指任何根據香港特別行政區《醫生註冊條例》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：

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。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，其獲香港特別行政區保險業監管局授權及受其監管，於香港特別行政區經營長期保險業務。本公司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而非香港上海滙豐銀行有限公司(「滙豐」)的產品，並只擬在香港特別行政區銷售。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(定義見金融糾紛調解計劃的金融糾紛調解中心職權範圍)，滙豐須與您進行金融糾紛調解計劃程序；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:

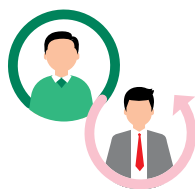
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| <ul style="list-style-type: none">• Apallic syndrome | <ul style="list-style-type: none">• Major head trauma |
| <ul style="list-style-type: none">• Coma | <ul style="list-style-type: none">• Mental incapacity |
| <ul style="list-style-type: none">• Loss of independent existence | <ul style="list-style-type: none">• 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

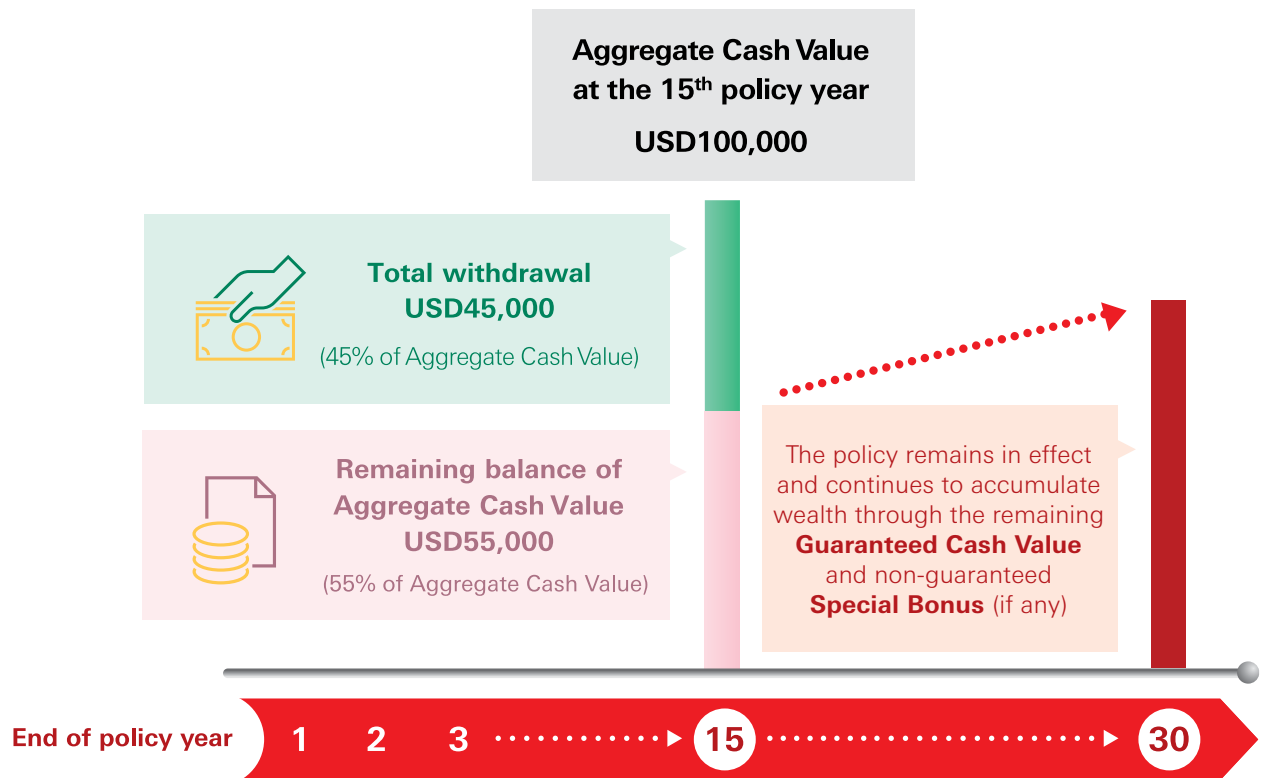
Even though the Incapacity Benefit has been paid, your designated life insurance Plan will remain in effect to provide adjusted life protection and wealth accumulation.

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 HSBC Life Service Hotline at 2583 8000. Alternatively, please contact your relationship manager or a licensed insurance intermediary. 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 HSBC Life (International) Limited ("HSBC Life", "the Company", "our" or "us") 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 constitute an enduring power of attorney ("EPOA") (applicable to the Hong Kong SAR), a guardianship order, or a committee order, and does not appoint the Designated Person as the policyholder's attorney or guardian or committee. In the event of a dispute between the Designated Person and any other person, including but not limited to the policyholder's guardian or committee, 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 is being notified that the policyholder has created an EPOA (applicable to the Hong Kong SAR) covering the Policy; (3) the Company has been notified that the policyholder or the Designated Person died; (4) the Company has been notified that there is a guardian or committee appointed for the policyholder under the Mental Health Ordinance (Cap.136 Laws of the Hong Kong SAR) (or if there is a guardian or committee appointed under similar laws in another jurisdiction); or (5) 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 Medical Registration Ordinance of the Hong Kong 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:

This leaflet contains general information only. It does not constitute any offer for any insurance product. 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 Insurance Authority of the Hong Kong SAR to carry on long-term insurance business in the Hong Kong SAR. The Company 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 but not the Hongkong and Shanghai Banking Corporation Limited (“HSBC”) and they are intended for sale in the Hong Kong 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 Terms of Reference for the Financial Dispute Resolution Centre in relation to the Financial Dispute Resolution Scheme) arising between HSBC and you out of the selling process or processing of the related transaction, HSBC is required to enter into a Financial Dispute Resolution Scheme process with you; however, any dispute over the contractual terms of the above insurance products should be resolved between the Company and you directly.



无忧后备管理服务

提升对无行为能力医疗状况的保障



简介

若患上严重疾病或出现精神问题，受影响的不单是您的健康，还可能给您和您的家人带来沉重的财务负担。

汇丰保险推出具前瞻性的附加保障 — **无忧后备管理服务**，让您事先安排直系亲属在难以预料的情况下，因应您身体或精神状况而无行为能力时，提取您保单的部分现金价值总和，安渡难关。

当您被诊断为无行为能力时，这项服务如何为您和挚爱提供支援？

您作为我们指定人寿保险计划之保单持有人，可申请无忧后备管理服务并指明一名直系亲属作为指定人士。此指定人士为父母、配偶（包括同性配偶）、成年子女或兄弟姐妹。如果您因下列任何一种医疗状况而被注册医生诊断为无行为能力的人，该名指定人士可以按您所订明的指定百分比（10% - 50%），提取保单部分现金价值总和（「无行为能力保障」）：

- | | |
|----------|------------|
| • 脑皮质坏死 | • 严重头部创伤 |
| • 昏迷 | • 精神上无行为能力 |
| • 不能独立生活 | • 瘫痪 |

主要特点



快速获取现金价值总和作应急之用

您的指定人士无须经过复杂程序而可以立即提取现金价值总和的指定部分，以应付必要的医疗或其他费用。



灵活自主

您可以为您每份指定人寿保险计划委任不同的指定人士。您也可以需要在需要时重新委任其他指定人士或调整指定百分比。



提供持续保障

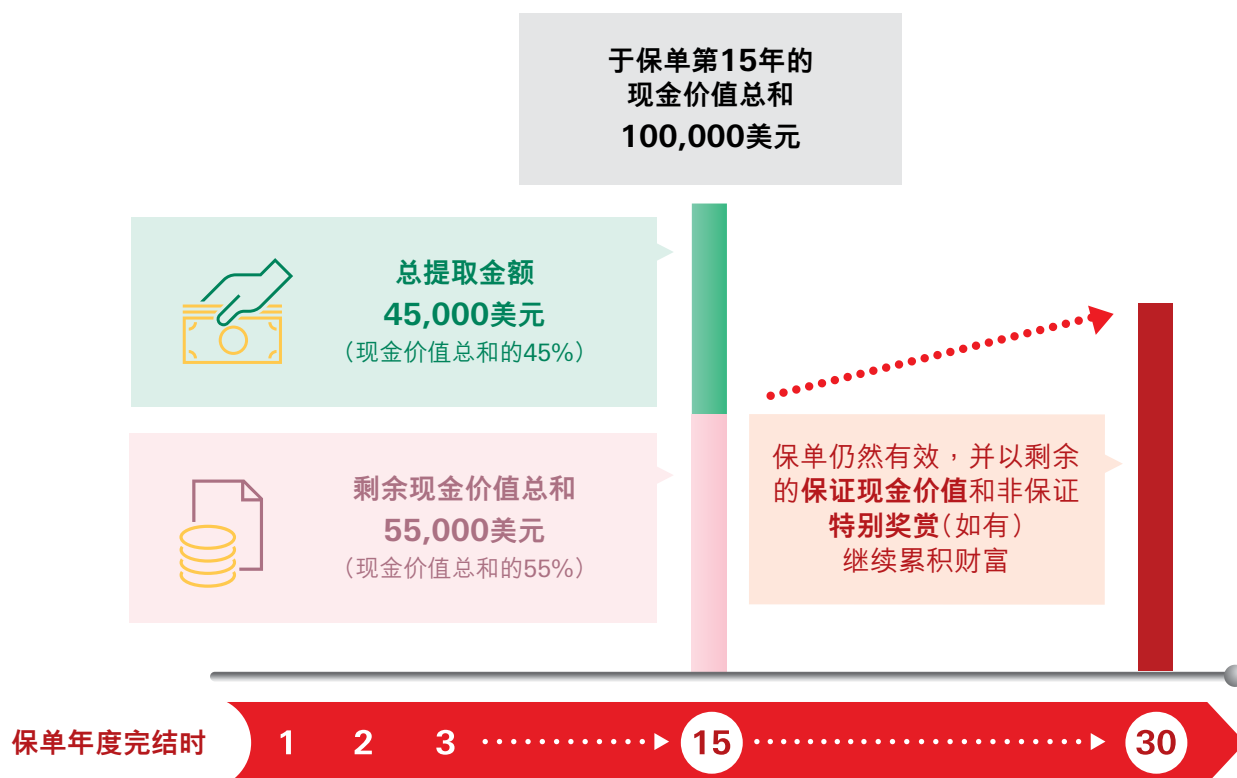
即使我们已支付无行为能力保障，您的指定人寿保险计划将仍然有效，继续提供已调整的人寿保障及财富累积。

说明例子

根据「无忧后备管理服务」提取现金价值总和

Paul与Joey结婚后，育有一子。作为家庭经济支柱的Paul，希望未雨绸缪，在自己万一遭遇不幸时，能为他们的未来提供经济保障。他投保了一份包含无忧后备管理服务的分红保险产品，并指明Joey为无忧后备管理服务下的指定人士，因此若Paul经注册医生诊断为无行为能力的人，Joey可提取保单中 **45% 指定百分比现金价值总和作为无行为能力保障**。Paul并于保单第10年完成缴付所有保费。

在保单第15年，Paul因车祸陷入昏迷并需要住院。由于Paul需要被长期照顾，Joey根据无忧后备管理服务申请提取45%的现金价值总和，以解燃眉之急。经汇丰保险批核后，Joey获支付45%的现金价值总和作为无行为能力保障。该金额被提取后，Paul的保单仍然有效并继续提供已调整的人寿保障。



如果Paul没有指明Joey作为无忧后备管理服务的指定人士，情况会如何？

作为保单持有人的Paul目前处于昏迷状态，无法处理保单相关事宜。Joey可能会面临不少挑战，包括如何接管Paul的保单，或寻找适当人士代替Paul处理相关事务。这种情况可能相当复杂且耗时，而Joey也无法保证能顺利接手保单，或得到代表人士协助。

申请及了解更多资讯

如您有意申请无忧后备管理服务，请致电汇丰保险服务热线2583 8000，亦可咨询您的客户经理或持牌保险中介人。我们乐意了解您的需求，并讲解无忧后备管理服务如何能够帮助您。

备注:

1. 无忧后备管理服务只适用于具有保单价值的指定人寿保险计划。汇丰人寿保险(国际)有限公司(「汇丰保险」、「本公司」或「我们」)将不时厘定所涵盖之指定人寿保险计划及对此拥有酌情权。
2. 本公司对是否接纳有关无忧后备管理服务之申请或修改拥有绝对酌情权，并受相关之保单条款所约束。阁下可申请、修改或撤销无忧后备管理服务，惟此等要求必须于阁下有神智正常的情况下提出。
3. 指定人士必须是您父母、配偶(包括同性配偶)、成年子女和兄弟姊妹的直系亲属家庭成员，并且于委任当日之真实年龄为18岁或以上。
4. 无忧后备管理服务不构成持久授权书(适用于香港特别行政区)、监护令或受托监管令，亦不是用以委任指定人士为保单持有人的受权人或监护人或受托监管人。若指定人士与任何其他之间发生争议，包括但不限于保单持有人的监护人或受托监管人、受权人(包括根据已存在的持久授权书下委任的受权人)或受益人之间有争议，本公司将保留拒绝支付无行为能力保障之权利，直至在该争议得到解决为止。
5. 指定人士的委任将在下列情况下自动撤销：(1)本公司接受保单所有权变更；(2)本公司获悉保单持有人已订立持久授权书(适用于香港特别行政区)；(3)本公司获悉保单持有人或指定人士身故的通知；(4)本公司获悉称已根据《精神健康条例》(香港法例第136章)保单持有人已根据《精神健康条例》(香港法例第136章)委任监护人或受托监管人(或在另一司法管辖区有根据类似法律委任监护人或受托监管人)；或(5)本公司接受后续保单转让安排。
6. 若保单持有人持有多于一份具有无忧后备管理服务之指定人寿保险计划，保单持有人可于该等计划上委任不同的指定人士。
7. 无行为能力保障只会于保单持有人因下列任何一种医疗状况而被注册医生诊断为无行为能力的人时被支付：
脑皮质坏死 – 指大脑皮质全面坏死而脑干完整无损之状况。诊断必须经由脑神经科专科注册医生证实，并有最少1个月之医疗文件纪录证明。
昏迷 – 处于不省人事的状态，对外界刺激或内在需要毫无反应，并属永久性神经功能受损。昏迷必须持续至少96小时，并需要使用插管和机械性呼吸的方法来维持生命。昏迷必须由脑神经科专科注册医生确认。
不能独立生活 – 在没有辅助下，不能完成于以下定义部份界定的「日常生活活动」的其中最少3项活动，并已持续最少6个月及导致永久不能完成有关活动。就此定义而言，「永久」一词是指根据现时医学知识及技术，已完全没有复原的希望。不能独立生活的诊断必须由注册医生确定。
严重头部创伤 – 因意外的头部受伤引致残余脑损伤，导致永久性神经功能障碍并引发严重的功能障碍。「严重功能障碍」是指脑神经科专科注册医生评估保单持有人在格拉斯哥昏迷指数或在医学文献中普遍接受的类似量表的8分版本中得分为5分或以下。
精神上无行为能力 – 精神上无行为能力的诊断必须由精神科专科注册医生确定。
瘫痪 – 由损伤或疾病导致瘫痪、从而引起最少两肢完全及永久丧失功能，而且无法治愈。瘫痪必须以适当的脑神经学证据证明。专科注册医生必须认为瘫痪状态是永久性的，没有康复的希望，并且存在3个月以上。
8. 本公司就本保单之无行为能力保障作出赔偿之前，本公司必须根据条款及细则收到以书面方式提出无行为能力保障之索偿通知及令本公司满意及可接受的证明。相关证明文件之正本须递交给本公司。
9. 无忧后备管理服务赔偿的百分比须介乎10%至50%及为整数；无能力行为保障的金额等于现金价值总和乘以指定百分比。
10. 无行为能力保障将按照以下次序提取金额：
 - (1) 从保单价值管理收益结余中提取(如有)；及
 - (2) 若保单价值管理收益结余不足，则无行为能力保障中的余额金额将从保证现金价值及特别奖赏(如有)中提取。任何提取保证现金价值及特别奖赏(如有)将自动调减投保额/保单金额的减少，如同已申请部分退保一样。部分退保将减少您未来的保障，包括但不限于基本计划(如适用)的保证现金价值、特别奖赏、身故赔偿及附加保障(如有)。减少后的保额/保单金额必须符合我们不时设定的保单剩余保额/保单金额的最低金额。当提取金额达到最低投保额/保单金额时，实际可提取的无行为能力保障金额可能会少于以您现金价值总和的指定百分比计算的金额。
11. 保单持有人须提醒指定人士须在保单持有人被诊断为无行为能力的人后90日内向本公司以书面方式提出无行为能力保障之索偿通知及令本公司满意及可接受的证明。
12. 本公司没有责任或不会负责核实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负责。本公司不会亦不应被认为会就任何指定人士的委任承担任何责任。当本公司支付无行为能力保障后，我们将不会对核实无行为能力保障的支付状况有任何义务，亦不会对任何错误或不对的支付负责。
13. 如要申请无忧后备管理服务，保单持有人须保证及声明包括但不限于指定人士具有资格处理此职责。
14. 本公司有权就此申请要求额外资料或文件及/或施加额外条件，包括但不限于以本公司的绝对酌情权厘定的方式以认证指定人士的身份及入境证明(如适用)。
15. 请参阅指定人寿保险计划及无忧后备管理服务之保单条款以获取详情。

定义：

「日常生活活动」之定义如下：

- **沐浴** – 以浸浴或淋浴方式自我清洗(包括能进入及离开浴缸或淋浴间)或以其他方式清洗达到满意的能力；
- **更衣** – 穿戴、脱下、固定与解开所有衣物及(如适当)任何配带的矫正器、义肢及其他外科手术器具的能力；
- **行动** – 从床移动到直立的椅子上或轮椅上的能力，反之亦然；
- **如厕** – 能自行如厕或能自我控制肛门及膀胱功能，以保持满意之个人卫生水平；
- **进食** – 自行进食预先准备妥当之食物的能力。

「指定百分比」指由保单持有人指定的现金价值总和的百分比，该百分比必须为完整数字及于我们不时厘定的可选范围内。

「指定人士」指就本附加保障下，由保单持有人指定的无行为能力保障之收款人士。

「无行为能力的人」指在精神和/或身体上丧失行为能力的人。

「无行为能力保障」指根据本附加保障的条款及细则应支付予指定人士的保障赔偿。

「注册医生」指任何根据香港特别行政区《医生注册条例》或任何修订条例而正式符合资格及合法注册的医生，或在本公司接受的任何其他国家/地区根据当地法律获授权执业的西医，而该等医生并非受保人或保单持有人本人或其直系亲属。

免责声明：

本传单仅载列一般资讯。本传单不构成任何保险产品之要约。有关产品特点、条款及细则的详情，请参阅特定产品的相关产品册子、保单条款及保险计划建议书。

所有具有无忧后备管理服务的指定人寿保险产品均由本公司所承保，其获香港特别行政区保险业监管局授权及受其监管，于香港特别行政区经营长期保险业务。本公司将负责按人寿保单条款为您提供保险保障以及处理索偿申请。

所有具有无忧后备管理服务的指定人寿保险产品属本公司而非香港上海汇丰银行有限公司(「汇丰」)的产品，并只拟在香港特别行政区销售。您缴付的保费将成为本公司资产的一部分。因此，保单持有人将承受本公司的信贷风险。保单持有人对任何该等资产没有任何权利或拥有权。对于汇丰与您之间因销售过程或处理有关交易而产生的合资格争议(定义见金融纠纷调解计划的金融纠纷调解中心职权范围)，汇丰须与您进行金融纠纷调解计划程序；然而，涉及上述产品之保单条款及细则的任何纠纷，将直接由本公司与您共同解决。

