



## Group Medicare Rider

附加团体医疗保险



## I Product Features

Insured Member Age	18 - 64 years old
Period of Insurance	1 year

## I Benefit



### Daily Allowance\*

Daily Allowance amount based on the Plan selected multiplied with the actual number of days hospitalized will be payable for hospitalization due to  
(i) illness or accidental; or  
(ii) accidental only



### Surgery Benefit\*

Surgery Benefit will be payable based on the Plan selected for surgery performed due to  
(i) illness or accident; or  
(ii) accident only.



### Dengue or Malaria\*

Upon diagnosis, hospitalization or death due to Dengue or Malaria, the respective benefit amounts based on the Plan selected, shall be payable.

## Benefit Table

Plan	Daily Allowance	Maximum Number of Days per Hospitalization	Annual Limit for Hospitalization (Days)	Surgery Benefit (USD)	Hospitalization due to Dengue/ Malaria (USD)	Upon Diagnosis of Dengue / Malaria (Non-Hospitalization) (USD)	Death due to Dengue/Malaria (USD)	Sum Insured (USD)
A	10	20	60	150	200	50	2,000	3,400
B	15	20	60	250	200	50	2,000	3,900
C	25	20	60	500	300	100	3,000	6,300
D	50	30	90	750	500	150	5,000	12,300
E	75	45	120	1,000	750	200	7,500	20,400

# I Key Exclusion

## **DAILY ALLOWANCE AND SURGERY BENEFITS (ALL CAUSES)**

1. The Insured Member is hospitalized or surgery is performed outside of the Kingdom of Cambodia, China, Thailand, Vietnam, Singapore or Malaysia.
2. Pre-existing conditions, which existed before the Effective Date or the date of reinstatement of this Policy, whichever is later. Pre-existing conditions shall mean illnesses that the Insured Member has reasonable knowledge of, unless the conditions are declared to the Company and accepted by the Company.
3. Suicide, attempted suicide, or self-inflicted injury, while sane or insane.
4. The Insured Member being under the influence of alcohol or the taking of any drug, except under the direction of a registered medical practitioner.

## **DAILY ALLOWANCE AND SURGERY BENEFITS (ACCIDENTAL)**

1. Suicide, attempted suicide, or self-inflicted injury, while sane or insane.
2. HIV infection, AIDS, or AIDS related diseases.
3. War (whether declared or not), invasion, act of foreign enemy, civil war, revolution, insurrection, civil commotion, riot, strike, popular rising against the government, and terrorism.
4. While the Insured Member is committing a felony or while the Insured Member is being arrested, under arrest, or escaping the arrest.

## **DENGUE FEVER/MALARIA BENEFIT**

1. The Insured Member is diagnosed with Dengue Fever or Malaria and/or he/she is hospitalized for Dengue Fever or Malaria outside of the Kingdom of Cambodia, China, Thailand, Vietnam, Singapore or Malaysia.
2. The Insured Member did not declare to the Company or intentionally deceived the Company the fact that the Insured Member has already been diagnosed with Dengue Fever/Malaria within 14 (fourteen) days before the creation of his/her coverage and was diagnosed or hospitalized after the effectiveness of his/her coverage.
3. The Insured Member is diagnosed with Dengue Fever/Malaria within the waiting period of his/her coverage.
4. The Insured Member is hospitalized not related to Dengue Fever/Malaria but was due to other medical treatment. This includes but is not limited to cosmetics, any dental care or repair, dental porcelain, dental implants or dental prostheses.

This above list is for reference only. Please refer to the Terms and Conditions for the complete list and details of exclusion.

## I 投保说明

投保年龄	18 - 64 岁
保险期间	1 年

## I 保险利益

### 住院津贴\*



该被保险人(i) 因疾病或意外/ (ii) 仅因意外事故导致住院治疗，本公司给付每日住院津贴，给付数额为实际住院天数乘以每日给付额。

### 手术保险金\*



该被保险人 (i)因疾病或意外/ (ii) 仅因意外事故而导致的手术，本公司将给付对应保险计划的保险金额。

### 登革热/疟疾确诊保险金\*



该被保险人因登革热或疟疾确诊/住院/死亡时，本公司将给付对应保险计划的保险金额。

**\*等待期满后!**

## 保险利益表

计划	每日住院津贴	每次最大住院天数	一年最大住院天数(天)	手术保险金(美元)	登革热/疟疾确诊保险金(美元)	登革热/疟疾住院保险金(美元)	登革热/疟疾死亡保险金(美元)	保险金额(美元)
A	10	20	60	150	200	50	2,000	3,400
B	15	20	60	250	200	50	2,000	3,900
C	25	20	60	500	300	100	3,000	6,300
D	50	30	90	750	500	150	5,000	12,300
E	75	45	120	1,000	750	200	7,500	20,400

## I 重要责任免除

### 每日住院津贴和手术保险金（因疾病或意外）

- 1.被保险人在柬埔寨王国、中国、泰国、越南、新加坡或马来西亚以外的地方住院或接受手术。
- 2.在保单生效日或保单复效日(以较晚者为准)之前，被保险人理应知道自己患有疾病，除非该疾病已向本公司声明并经本公司接受。
- 3.被保险人在神志清醒或精神失常时自杀、企图自杀或自伤。
- 4.被保险人受到酒精或服用任何药物的影响，但遵循注册医生指导的治疗活动除外。

### 每日住院津贴和手术保险金（因意外）

- 1.被保险人在神志清醒或精神失常时自杀、企图自杀或自伤。
- 2.被保险人感染人类免疫缺陷病毒（HIV），及其与获得性免疫缺陷综合症（AIDS）或与AIDS相关的疾病。
- 3.因战争（无论是否宣战），入侵，外国军队行动，内战，革命，暴动，内乱，骚乱，罢工，民众反政府和恐怖主义，导致发生本合同保险事故。
- 4.被保险人正在犯重罪或者正在被逮捕、已经被逮捕或者逃避逮捕时。

### 登革热/疟疾保险金

- 1.被保险人在柬埔寨、中国、泰国、越南、新加坡或马来西亚以外的国家被诊断患有登革热/疟疾和/或他/她因登革热或疟疾住院。
- 2.投保人/被保险人未向本公司告知或故意欺骗本公司被保险人在投保前14天内已被确诊患有登革热/疟疾，并在其保险责任生效后被确诊或住院。
- 3.被保险人在本附加合同等待期内被确诊为登革热/疟疾；
- 4.被保险人住院与登革热/疟疾无关，但接受其他医疗治疗，包括但不限于美容、任何牙科护理或修复、牙瓷、种植牙或假牙；

**\*以上列明的责任免除为简单叙述，详情请阅读本保险条款!**



Note: This brochure is summarized. For complete details on the coverage provided, including benefits, exclusions and termination provisions, please refer to the Terms and Conditions.

注: 本宣传单为简单叙述, 详情请阅读本保险条款, 并以条款的叙述为准。



**CONTACT US**

**联系我们**

 **023-989-218 / 098-989-218**

 **service@gc-life.com.kh**  **www.gc-life.com.kh**



**Building C, St. 169, Sangkat Veal Vong, Khan 7 Makara, Phnom Penh**