

## ACCIDENTAL INJURY MEDICAL INSURANCE GROUP RIDER

### TERMS AND CONDITIONS

#### G.C.Life Product Code: 12

##### 1. Contract Attributes

The terms and conditions for the accidental injury medical insurance group rider (hereinafter referred to as “the Contract”) shall not be a stand-alone contract and the Contract must be attached to “Life Shield” group insurance product, (hereinafter referred to as “Main Product”) as an additional contract. During the effective period of the Contract, if the Main Product is terminated or suspended, the Contract shall be terminated or suspended as well.

##### 2. Composition of Insurance Contract

The Contract is composed of the Contract itself and the related Main Product. Relevant change documents and agreements during the period of insurance are also part of the Contract.

##### 3. Application and Renewal Requirement

Requirements shall remain the same as the Main Product.

##### 4. Creation and Effectiveness of Insurance Contract

Requirements shall remain the same as the Main Product.

##### 5. Period of Insurance

The period of insurance is one year. The applicant may apply for renewal of the policy at the end of the insurance period.

##### 6. Premium

Based on the coverage options and plans under Clause 7 of the terms and conditions of the Contract, the premium shall be determined through consultation between the applicant and the Company and shall be stated in Schedule 1.

##### 7. Coverage and Sum Insured

(1) During the period of insurance of the Contract, if the Insured suffers an accidental injury in the Kingdom of Cambodia, and has been treated in a legal hospital in the Kingdom of Cambodia, the Company shall be obliged to pay the following insurance benefit based on the corresponding items stated in Schedule 2:

- a. If the same Insured suffers multiple accidents in the same policy year, the Company will pay the insurance benefit, but the cumulative insurance benefit shall not exceed the sum insured of the corresponding items stated in Schedule 2.
- b. If the Insured requires inpatient and/or outpatient treatment due to the same accident, the longest period of diagnosis and treatment shall be 180 days. The Company shall not be responsible for medical expenses incurred after the 180 days.
- c. If the accident occurs during the period of insurance, but the Insured is still undergoing medical treatment while the period of insurance has ended, the Company shall still bear the

responsibility for compensation. However, the cumulative number of days for the medical treatment during the period of insurance and after the end of the period of insurance is still limited to 180 days, and the cumulative insurance benefit shall not exceed the sum insured of the corresponding items stated in Schedule 2.

#### Schedule 2: Table of Medical Treatments and its Sum Insured

Currency Unit: US dollar

Item		Payment Percentage	Sum Insured		
			Plan A	Plan B	Plan C
<b>Outpatient</b>	Medical Surgery Expense	90%	300	500	1,000
	Diagnostic Medication	90%			
	Ambulance	90%			
	Laboratory Examination, X-Ray, ECG, Other Medical Aid for Examination	75%			
	Non-Diagnostic Drug Cost	70%			
	Other Medical Expense	70%			
<b>Inpatient</b>	Inpatient Room Fee	100%	2,000	3,000	5,000
	ICU Room Fee	100%			
	Medical Surgery Expense	100%			
	Ambulance	100%			
	Diagnostic Medication (including those used as outpatient within 72 hours before being admitted as inpatient)	100%			
	Laboratory Examination, X-Ray, ECG, Other Medical Aid for Examination (including those used as outpatient within 72 hours before being admitted as inpatient)	90%			
	Non-Diagnostic Drug Cost	85%			
	Other Medical Expense	80%			

#### Note:

Payment Percentage: the actual payment by the Insured of medical expenses for the medical treatment multiplied by the “Payment Percentage” from Schedule 2 equals the actual claimable amount for the item. The actual payment of medical expenses shall be based on the medical bill provided by the Insured and issued by the hospital during the medical treatment.

Sum Insured: refers to the annual claim limit which is the highest amount of money the Company will pay within the period of insurance for each of the Insured whether the inpatient and/or outpatient treatment is caused by one or more accidents.

(2) During the period of insurance of the Contract, if the Insured is determined to be suffering from one of the 10 types of critical conditions stated in Schedule 3 due to an accidental injury within the Kingdom of Cambodia and requires to be transferred to another legal hospital outside the country for medical treatment, and simultaneously meets the following two conditions, the Company shall pay the sum insured through a one-time payment according to the corresponding plan stated in Schedule 4 and this insurance benefit for the Insured will be terminated.

1. Before being transferred to another country's hospital, emergency medical treatment was carried out in a local hospital;
2. Insured is transferred to another country's hospital for emergency rescue or continuous medical treatment, except in the case that the Insured dies during the transferring process.

If the Insured simultaneously suffers from two or more of the 10 critical conditions stated in Schedule 3, the Company will take the highest amount as the sum insured for the hospital transfer based on the critical condition and will not accumulate or combine the insurance benefits.

#### **Schedule 4: Table of Sum Insured for Hospital Transfer Due to Critical Condition**

Currency Unit: US dollar

Plan	Level of Critical Condition	Sum Insured
A	Level 1	3,000
	Level 2	2,000
B	Level 1	6,000
	Level 2	4,000
C	Level 1	10,000
	Level 2	6,500

#### **8. Diagnosis of Critical Condition and Confirmation of Medical Expenses**

The Company accepts diagnostic results issued by the doctors from legal hospitals. However, the diagnostic result has to be correlated with the hospitalization record, medical equipment inspection report, medical laboratory report, and medical treatment and drugs taken for diagnosis and treatment.

#### **9. Exclusion**

- (1) Upon the application, if the applicant fails to fulfill the obligation of truthful disclosure as intentionally concealing the health conditions of the Insured listed below, the Company shall not be obliged to pay the insurance benefits:
  - 1) The Insured has already been diagnosed with one or more chronic illnesses, or acute illness, or mental illness, or the Insured has already been in the process of confirming a suspected illness;
  - 2) The Insured has already been disabled, or has had functional disorder for eyes or ears, or limb movement disorder;
  - 3) The Insured is engaged in high risk occupation that the Company does not underwrite;
  - 4) The Insured's true age does not meet the insurance application requirement upon the creation of the Contract.
- (2) If the Insured suffers from any insured event due to any of the following situations, the Company shall not be obliged to pay the insurance benefits:
  - 1) The Insured is intentionally murdered or harmed by the applicant;
  - 2) The Insured is involved in a fight, or is intoxicated from alcohol, or drugs, or is deliberately self-injured;
  - 3) The Insured is involved in diving, skydiving, climbing, adventure, wrestling competition, extreme stunt show, car racing;
  - 4) The Insured is speeding, drinking and driving over the legal limit, driving without a valid driver license, or driving a vehicle without a valid registration;

- 5) The Insured suffers from any medical accident due to plastic surgery or other surgical operation;
  - 6) Dental, reproductive and related medical treatment;
  - 7) The Insured suffers from any insured event due to war, military clash, riot or armed rebellion, nuclear explosions, nuclear radiation or nuclear contamination.
- (3) Expenses for medical treatment caused by illness.

#### **10. Beneficiary**

The beneficiary under this Contract shall be the Insured. In case the Insured dies, the beneficiary for the insurance benefit under this Contract shall follow the one stated in the Main Product.

#### **11. Changes of the Insured During the Contract**

During the effective period of the Contract, the applicant has the right to add or remove the number of the Insured. If the number of Insured decreases which causes a refund of premium, the Company shall refund the premium of such Insured to the applicant in accordance with Schedule 5.

Any other related requirements shall remain the same as the Main Product.

#### **12. Effective Period for Claiming Insurance Benefit**

The effective period to claim the insurance benefit from the Company shall be one year, from the date on which the beneficiary is aware or should have been aware of the occurrence of the insured event.

#### **13. Notice of Insured Event**

The applicant, the Insured, or the beneficiary, upon becoming aware of any insured event, shall promptly notify the Company and has the obligation to cooperate with the Company to confirm the insured event. Intentional failure to do so, resulting in the inability of the Company to determine the nature or cause of such insured event, the Company shall not be obliged to pay the insurance benefit for any part which cannot be determined.

#### **14. Evidence and Documents Required for Claiming Insurance Benefit**

- (1) An insurance policy or any other proof of the objective existence related to the Main Product contract and this insurance contract;
- (2) Legal and valid identification documents of the claimant. If a representative is appointed to claim the insurance benefit, a power of attorney and identification documents of the representative;
- (3) Other evidence and documents include:
  - a. Certificate of diagnosis stating the critical condition (including diagnosis basis), outpatient medical records and inpatient medical records and other evidence sufficiently proving the fact of the occurrence of insured event and medical treatment issued by the hospital where the Insured is hospitalized, and formal medical treatment vouchers;
  - b. Photographs or video recordings taken by the applicant, the Insured, the beneficiary, or family members of the Insured proving that the Insured is hospitalized and the number of days of hospitalization;
  - c. If the Company is not able to verify the claim after receipt of the aforementioned documents, the Company has the right to request the claimant to provide sufficient evidence or documents to prove the fact of the insured event, time of occurrence, and the fact of hospitalization.

## **15. Termination by the Applicant**

During the period of insurance of the Contract, the applicant may request to terminate the Contract. However, if any benefit payment has been received or if any insured event under the Main Product and this Contract has occurred but the benefit has not been paid, the applicant cannot request to terminate the Contract.

If the termination of the Contract causes a refund of premium, the Company shall refund the premium of such Insured to the applicant in accordance with Schedule 5.

Any other related requirements shall remain the same as the Main Product.

## **16. Clear Explanation and Truthful Disclosure**

At the creation of the Contract, the Company shall clearly explain to the applicant the contents of the Contract. For the exclusion clause under the terms and conditions of the insurance, the Company shall, at the creation of the Contract, provide obvious disclosures to the applicant on the application, insurance contract, or other insurance documents.

At the creation of the Contract, the applicant shall fulfill the obligation of truthful disclosure and shall not intentionally conceal the health condition and age. Otherwise, the Company shall not be obliged to pay any benefit. If the untruthful disclosure leads to a termination of the Contract, the Company shall partially return the premium paid to the applicant in accordance with Schedule 5 of the Contract and the Contract shall be terminated.

## **17. Other**

If there are any unclear sections, please refer to the corresponding terms and conditions of the Main Product for more details.

## **18. Definition**

Inpatient: refers to hospital's proper diagnosis and medical treatment of patients who are admitted to the hospital overnight after the hospitalization application processing. When staying at a temporary waiting or observation area at the hospital, it shall not be considered as inpatient.

Outpatient: refers to hospital's proper diagnosis and medical treatment of patients who are not admitted as an inpatient at the hospital.

Illness: refers to the general term of body dysfunction or organ dysfunction or other abnormalities in the practice of life insurance, which is caused by pathogenic organisms (parasites, bacteria, viruses, etc.) or disorders or defects in the body, except for injuries caused by accidents.

Critical Condition: refers to the 10 type of critical conditions stated in Schedule 3 of the Contract.

Other Definitions: shall remain the same as the Main Product.

## **19. Schedule 1, Schedule 3, and Schedule 5:**

The contents of the following schedules and their notes are important and inseparable contents of the Contract.

**Schedule 3: Table of 10 Types of Critical Conditions and Severity**

Critical Condition and Pathology	No.	Level of Critical Condition	Criteria
<b>Deep Large Area Burns</b> (Skin and deep tissue damage caused by fire or heat burn, chemical burn, electric burn)	1	Level 1	1. Have a history of burns within 24 hours; 2. Clinical diagnosis: The total area of deep second and third degree burns reaches or exceeds 30%, or the area of second degree burns reaches or exceeds 10% 3. Skin graft surgery is required; 4. Must be admitted to the sterile ward and implement the highest level of care.
	2	Level 2	1. Clinical diagnosis: The total area of deep second and third degree burns reaches or exceeds 15%, or third degree burn area equals or is more than 5%; 2. Others same as above.
<b>Grade 3 Brain Trauma</b> (The brain tissue was damaged by hemorrhage or hematoma in the brain after external force. Grade 3 brain trauma is the most critical brain trauma)	3	Level 1	1. Have a history of brain trauma within 48 hours; 2. Clinical diagnosis of Grade 3 brain trauma; 3. Medical instruments prompt intracranial cerebral hemorrhage; 4. Continuous deep coma; 5. Continuous oxygen and / or continuous use of the ventilator; 6. Implement the highest level of care; 7. Need brain surgery or continuous anti-intracranial hypertension treatment.
<b>Cerebral Hemorrhage</b> (Due to vascular sclerosis or congenital vascular abnormalities, when certain factor causes a sudden rise in blood pressure, blood vessels are ruptured, blood flows out of the blood vessel to form a hematoma, oppressing the damaged brain tissue or blood enters the subarachnoid space, cerebral cistern, lateral cleft, brain ventricle and other	4	Level 1	1. Clinical diagnosis of cerebral hemorrhage; 2. Medical equipment prompts cerebral hemorrhage; 3. Symptoms such as persistent deep coma, vomiting and obvious cerebral edema and increased intracranial pressure; 4. Symptoms of craniocerebral nerve dysfunction such as hemiplegia or other limb paralysis, or aphasia; 5. Continuous oxygen use and/or continuous use of the ventilator; 6. Implement the highest level of care; 7. Continuous anti-cranial hypertension treatment or brain surgery.

parts, or blood diffuses into cerebrospinal fluid and causes headaches, neck stiffness, hemiplegia, aphasia, limb paralysis, sensory disturbances, incontinence, coma symptoms and signs)	5	Level 2	<ol style="list-style-type: none"> <li>1. Clinical diagnosis, medical equipment, clinical manifestations suggest a small amount of cerebral hemorrhage, no continuous bleeding or repeated bleeding;</li> <li>2. Symptoms of cerebral edema and increased intracranial pressure such as lethargy or intermittent coma or disturbance of consciousness, but relatively mild (compared with Class 1);</li> <li>3. Others same as above.</li> </ol>
<b>Cerebral Infarction</b> (Refers to cerebral blood circulation disorders, local ischemic necrosis or softening of brain tissue caused by ischemia and hypoxia)	6	Level 1	<ol style="list-style-type: none"> <li>1. Clinical diagnosis of cerebral infarction;</li> <li>2. Medical equipment prompts cerebral infarction;</li> <li>3. Sustained deep coma with cerebral edema and increased intracranial pressure;</li> <li>4. Symptoms of craniocerebral nerve dysfunction such as hemiplegia or other limb paralysis, or aphasia;</li> <li>5. Implement critical care and / or continuous oxygen inhalation;</li> <li>6. Continuous anti-cranial hypertension treatment or brain surgery is required.</li> </ol>
	7	Level 2	<ol style="list-style-type: none"> <li>1. Clinically confirmed cerebral infarction and medical equipment suggest small area cerebral infarction;</li> <li>2. Lethargy or occasional coma, with headache, vomiting and other symptoms of cerebral edema and increased intracranial pressure;</li> <li>3. Others same as above.</li> </ol>
<b>Subarachnoid Hemorrhage</b> (Clinical syndrome caused by blood flowing directly into the subarachnoid space from rupture of blood vessels at the bottom or surface of the brain)	8	Level 1	<ol style="list-style-type: none"> <li>1. Clinical diagnosis of subarachnoid hemorrhage;</li> <li>2. Medical instruments prompt subarachnoid hemorrhage;</li> <li>3. Cerebrospinal fluid examination results suggest bleeding;</li> <li>4. Persistent deep coma, accompanied by vomiting and other characteristics of cerebral edema and increased intracranial pressure;</li> <li>5. Implement the highest critical care and continuous oxygen inhalation;</li> <li>6. Continuous anti-cranial hypertension treatment or brain surgery is required.</li> </ol>
	9	Level 2	<ol style="list-style-type: none"> <li>1. Clinically diagnosed cerebral infarction and medical equipment suggest a small amount of</li> </ol>

			hemorrhage in the subarachnoid space without persistent or repeated bleeding; 2. Consciousness, drowsiness or lethargy or intermittent coma, with brain edema and increased intracranial pressure such as headache and vomiting; 3. Other ibid.
<b>High paraplegia</b> (Paralysis of bilateral lower limbs caused by spinal cord injury above the fifth cervical spine, and sensory disorders, dyspnea, urinary and fecal disorders and autonomic dysfunction below corresponding injury plane)	10	Level 2	1. Have a history of trauma within 48 hours and clinical diagnosis of high paraplegia; 2. Medical equipment reports severe injury to the 5th cervical spine or above; 3. Paralysis of both lower limbs, corresponding to sensory disturbances below the plane, dyspnea, urinary and stool disorders, and autonomic dysfunction 4. Implement critical care.
<b>Hemorrhage</b> (A large amount of bleeding caused by arterial rupture or visceral injury. The acute blood loss reaches 1500-2000ml (30% -40% of the total blood volume))	11	Level 2	1. A history of major trauma or other visceral bleeding within 24 hours; 2. Hemorrhagic shock, cold limbs, pale face, etc.; 3. The heme drops sharply below 6g/dL; 4. Consciousness or lethargy or occasional coma; 5. Implement critical care and oxygen.
<b>Acute Persistent Asthma</b> (Bronchial smooth muscle spasm, bronchial wall inflammatory cell infiltration and airway mucus secretion significantly increased caused by allergies or other factors, leading to airway obstruction and secondary pathological changes caused by the continued condition)	12	Level 2	1. The clinical diagnosis is acute persistent attack of critical asthma; 2. Clinical manifestations include difficulty speaking, drowsiness or blurred consciousness, shallow breathing, paradoxical movements of the chest and abdomen, tricuspid sign, weakening or disappearing of breathing sounds (silent lung), bradycardia, pulse rate greater than 120 beats per minute; 3. The above clinical manifestations persist for more than 12 hours after medical treatment; 4. Continue to inhale oxygen and implement the highest critical care.
<b>Acute Respiratory Failure</b> (Clinical syndrome caused by hypoxia or carbon dioxide retention, which results from ineffective gas	13	Level 2	1. The clinical diagnosis is acute respiratory failure; 2. Dyspnea, shortness of breath, and cyanosis; 3. Symptoms of insanity, mania, coma, convulsions; 4. Intellectual or directed dysfunction;



exchange caused by severe dysfunction of lung ventilation due to various reasons)			5. Arrhythmia; 6. Pulsatile headache; 7. Diagnosis basis: At sea level atmospheric pressure, breathing room air under resting conditions, and excluding anatomic shunt and primary reduction in cardiac output, the partial pressure of arterial oxygen (PaO <sub>2</sub> ) is lower than 8kPa, or Associated with partial pressure of carbon dioxide higher than 6.65 kPa; 8. Continuously inhale oxygen and implement critical care.
<b>Acute Heart Failure</b> (Due to the development of organic heart disease to the decrease of myocardial contractility, the heart cannot exhaust all the returning blood volume, and the stroke volume decreases, which leads to pulmonary vein stagnation and severe arterial system insufficient blood supply)	14	Level 1	1. The clinical diagnosis is Grade 4 heart failure; 2. The physical activity ability is completely lost, and there are heart failure symptoms such as palpitations and dyspnea at the rest, or angina. Any physical activity will make symptoms worse; 3. Accompanied by lower limb edema; 4. Moist rales in the lungs during auscultation; 5. Accompanied by symptoms or signs of heart failure; 6. Cardiogenic shock occurs, blood pressure is too low, and cardiac or pressure medication is needed; 7. Continuously inhale oxygen and implement critical care.

**Schedule 5: Table of the Return of Premium**

Month	1	2	3	4	5	6	7	8	9	10	11	12
Return of Premium Factor	0.5958	0.5417	0.4875	0.4333	0.3792	0.3250	0.2708	0.2167	0.1625	0.1083	0.0542	0

**Note:**

1) The factor stated in this table is the return of premium for each 1 USD premium.

2) The term “Month” stated in the table above represents the number of months passed by the time of the Contract termination due to any reasons during the period of insurance; it shall be counted as 1 month if the month has not passed. For example: the period of insurance for the Contract has passed by 2 months and 13 days, the number of months shall be counted as 3 months.