

Comprehensive Medical Insurance & Protection Scheme for Foreigners Staying in China of Guoren Property & Casualty Insurance Co., Ltd.

To participate in conditions:

International students studying in China, students from Hongkong, Macao and Taiwan, as well as overseas Chinese students in healthy condition, able to participate in study normally from 8 years old to 69 years old, are eligible to this policy.

Insurance Liabilities:

Guoren shall undertake the following insurance liabilities during the valid period of insurance (From the effective date of this insurance till the expire date) :

1. Death insurance:

Guoren shall pay the stipulated amount of insurance compensation if the Insured dies of an accident or disease. Insurance liabilities thus terminate.

2. Accidental disability insurance:

If the Insured suffers from an accident which **results in any disability listed in the *Standards and Codes for Personal Insurance Disability Assessment (JR/T0083-2013) (issued by former China Insurance Regulatory Commission, BJF [2014] No. 6)* within 180 days since the occurrence of the accident**, Guoren shall assess the injury and disability according to the assessment principles stipulated by this Criteria, unless otherwise stipulated, **Guoren shall pay the accidental disability insurance money, whose amount shall be calculated based on the multiplication of the proportion stipulated in this Criteria, which is corresponding to the assessment result, by the sum insured, which is corresponding to insurer's responsibilities.** If medical treatment is still not over **on the 180th day**, disability evaluation shall be made on the basis of the Insured's physical condition on that day and the Insurance of Accidental Disability shall be paid in accordance with the evaluation results.

If with the disability resulted from this accident and the previous disability combined as a more serious disability which could receive accidental disability insurance benefits for more serious items, the insurance shall be paid in accordance with the standard for the more serious disability, **but the insurance of accidental disability which has been paid previously (disabilities listed in the *Standards and Codes for Personal Insurance Disability Assessment (JR/T0083-2013) (issued by former China Insurance Regulatory Commission, BJF [2014] No. 6)* have taken place before purchase of insurance or caused by events under Liability Exemption, shall be deemed as having**

been compensated already) shall be deducted therefrom.

The accumulative payment amount of accidental disability insurance, and death due to any accidental injury or disease shall not exceed the corresponding insured sum of the Insured. If the accumulative amount of payment exceeds the insured sum of the Insured, then the insurance liabilities to the insured thus terminate.

3. Accidental Medical Insurance:

If the Insured, who suffers from the accidental incident, receives medical treatment **within 180 days since the occurrence of the accident**, the Insurer shall be liable for the full amount of the reasonable and necessary expenses actually paid by the Insured for the medical treatment.

For example, the accidents such as scratches or bites by cats and dogs, sprained ankle when walking, accidental cut-wound when cutting vegetables, injured while playing sports.

Reimbursement equation: reasonable expenditure * 100%=reimbursable amount (the total amount of reasonable expenditures shall exclude the self-paid or partly self-paid items and expenses stipulated by the local regulations of the basic medical insurance).

Whether an accident happens to the Insured for once or several times, the Insurer shall pay the "accidental medical insurance" respectively in accordance with the aforesaid provisions, but the accumulative amount of payment shall not exceed the insured sum of the accidental medical insurance of the Insured. When the accumulative amount of payment reaches the insured sum of the accidental medical insurance of the Insured, the said insurance liability for the said Insured shall be terminated.

4. Hospitalization and Medical Insurance:

If diagnosis confirms that the Insured must be hospitalized for treatment because of suffering from the accident or the illness, Guoren shall pay 100% of the "hospitalization and medical insurance" to the insured with regard to the actual and reasonable expenses for medical treatment, including reasonable and necessary fees for nursing (limited to **RMB200 Yuan per day and accumulate up to 60 days**), medical record, heating, air-conditioning, bed, examination, special examination and treatment, operation, medicine, treatment, laboratory test, radiation, etc.

Relevant expenses arising from emergency rescue, under the responsibility of inpatient medical treatment, the Insured shall be paid 100% of the insurance premium for the reasonable and necessary treatment expenses of undergoing emergency rescue in the hospital.

Reimbursement equation: reasonable hospitalization expenditure * 100%=reimbursable amount (the total amount of reasonable expenditures shall exclude the self-paid or partly self-paid items and expenses stipulated by the local regulations of the basic medical insurance).

Whether the Insured is hospitalized for once or several times, the Insurer shall pay the insurance payment in the ruled limitation, when the cumulative amount of sub-item payment reaches its

insurance amount, the insurance liability shall be terminated.

5. Outpatient and Emergency Medical Insurance:

The reasonable and necessary expenses incurred by the Insured for receiving outpatient or emergency medical treatment because of illness, within each insurance period, the daily limit for outpatient is RMB600, (that means, if medical expense exceeding RMB 600 per day, shall be calculated as RMB600; if the medical expense not exceeding RMB600 per day, shall be calculated by the actual amount). Once the medical expenses exceeding the starting line of RMB650, **the remaining amount of the medical expenses exceeding the deductible RMB650 yuan on the basis of the daily limit rules** will be reimbursed at a percentage of 85%, and the accumulative payment shall not exceed the limit of RMB20000. The insurance liability shall be terminated once the accumulative amount of payment reaches the sum insured.

Daily limit: The top claim limit of available medical cost.

Deductible: RMB 650 yuan (A total of RMB650 yuan is deducted accumulatively for one time during an insurance period). Below the starting line, there is no compensation.

The related expenses incurred from general outpatient treatment, emergency treatment, outpatient surgery, hospitalization for observation, and expense or cost of outpatient and emergency treatment before and after hospitalization that arise from the same cause of disease are also deemed as outpatient and emergency treatment.

For example, being treated in the outpatient or emergency for fever, abdominal pain, faint, and upper respiratory tract infection etc.

Reimbursement equation: (the expense of each day within the daily limit RMB600 yuan add up-650 yuan) * **85%=reimbursable amount** (the total amount of reasonable expenditures shall exclude the self-paid or partly self-paid items and expenses stipulated by the local regulations of the basic medical insurance)

Note:

1) Medical organizations which are involved in all the foregoing medical insurance liabilities are limited to the public hospitals established within the border of Mainland China; However, for the insured who are treated in the ward area for foreigners, ward area for VIPs, private room, Class A ward, separate ward room, ward area for special treatment and needs, ward for special treatment and needs, ward for high-ranking officials, or similar ward area of the public hospitals, shall be excluded from the insurance, then all medical expenses incurred by such shall not be covered by the insurer.

2) If any third party has partially or fully paid any above-mentioned medical treatment fees, Guoren shall be liable for the remaining amount of reasonable fees that are within the reimbursable payment scope of the local basic medical insurance. But the limited portion of the fees for the bed, nursing, outpatient and emergency treatment within the daily limitation is also limited; if the third party has a specified proportion for payment of the limited sum, Guoren

shall be liable only for the remaining amount after deducting the already paid amount from the limited sum. If the third party has no specified proportion for payment, then Guoren shall be liable for the remaining amount, but not exceeding the insured sum, after deducting the standard amount of this item from the limited sum which takes the regulations of the local basic medical insurance as the standard.

3) Medical treatment expenses generated by all the foregoing medical insurance liabilities are limited to the items and expenses that can be reimbursed in accordance with the local regulations of basic medical insurance, the self-paid or partly self-paid items and expenses cannot be reimbursed by the insurer.

4) For the insured who apply for the insurance for the first time or the insured who is not renewal of insurance, the first 30 days from the effective date of the insurance is the waiting period (observation period). Where the insured is hospitalized or treated in outpatient during the waiting period and related medical cost occurs, the insurer bears no liability of compensation. Insurance renewal or the treatment for the Insured suffered from an accident is not subject to any waiting period.

Liability Exemption

I. Liability Exemption for Death and Accidental Disability Insurance

Guoren shall be exempted from the insurance liabilities for death and accidental disability caused by any of the following circumstances on the part of the Insured:

1. Deliberate killing or injury conducted by the policy-holder or beneficiary to the Insured;
2. Deliberate self-harm, suicide, intentional crime, resistance to criminal compulsory measures taken according to the law on the part of the Insured;
3. Fighting, drunkenness, sucking or injection of drugs on the part of the Insured;
4. Driving a motor vehicle under the influence, driving a motor vehicle without a legal and valid driving license or driving a motor vehicle without a valid driving license on the part of the Insured;
5. War, military conflict, riot or armed rebellion;
6. Nuclear explosion, nuclear radiation or nuclear pollution;
7. Pregnancy, abortion, delivery and related complication on the part of the Insured;
8. Medical accident occurring to the Insured because of cosmetic surgery or other surgical operations;
9. Taking of medicine (excluding OTC medicine taken according to instructions) without permission of doctor on the part of the Insured;
10. During the period when the Insured suffers from AIDS or is infected with the AIDS virus (HIV-positive);
11. The Insured passes away or becomes disability because of an accident outside mainland

China.

- 12. The Insured engages in high-risk activities such as diving, parachuting, mountain climbing, bungee jumping, paragliding, expedition, wrestling, martial art, stunt performance, horse racing, car racing, etc.**
- 13. Providing false insurance information, or non-oversea students insured as an overseas student.**
- 14. Those accidents that occur during the time when the Insured do their part-time job;**

If the Insured is caused dead in any of the foregoing circumstances, Guoren shall terminate the insurance liability of the Insured.

II. Liability Exemption for Medical Insurance Liability (Accidental Medical Treatment, Outpatient, Emergency and Hospitalization)

Guoren shall be exempted from the insurance liabilities for medical expenses caused by any of the following circumstances on the part of the Insured:

- 1. Deliberate killing or injury conducted by the policy-holder or beneficiary to the Insured;**
- 2. Deliberate self-harm, intentional crime or resistance to criminal compulsory measures taken according to the law on the part of the Insured;**
- 3. Fighting, drunkenness or affected by alcohol, and active taking, sucking or injection of drugs on the part of the Insured;**
- 4. Driving a motor vehicle under the influence, driving a motor vehicle without a legal and valid driving license or driving a motor vehicle without a valid driving license on the part of the Insured;**
- 5. War, military conflict, riot or armed rebellion;**
- 6. Nuclear explosion, nuclear radiation or nuclear pollution;**
- 7. The insured suffers from congenital diseases, hereditary diseases, existing disease (disease or symptoms that already exist prior to the date of insurance and non-continuous within the insurance period);**
- 8. The insured suffers from AIDS or HIV infection, sexually transmitted diseases;**
- 9. Pregnancy, miscarriage or delivery on the part of the Insured, infertility treatment, artificial insemination, prenatal and postnatal check, birth control (including sterilization), abortion and complications caused by above-mentioned causes;**
- 10. Medical accident occurring to the Insured because of cosmetic surgery or other surgical operations;**
- 11. The medical expenses incurred by the Insured for dental care, such as washing teeth,**

dentures, dental implants, false filling, porcelain teeth, etc., as well as expenses incurred in oral restoration, orthodontics, oral health care and beauty; the reasonable medical expenses of the Insurer's dental fillings, tooth nerve treatment, tooth pulling, tooth impaction treatment and periodontal diseases (such as, periodontitis, gingivitis, periapical inflammation, except for teeth cleaning) due to dental caries, dental pulp disease and cracked teeth are within the insurance liability of the Insurer;

12. Expenses of orthopedics, correct procedure, plastic surgery or rehabilitation therapy received by the Insurer;
13. Items such as physical examination and disease screening for the Insured; various medical treatment items for prevention, health care, recuperation, rest and special care: such as various vaccines vaccination, foot reflexology massage therapy, fitness massage and other items;
14. Taking, application or injection of medicine without the permission of doctor on the part of the Insured;
15. Medical expenses incurred outside Mainland China or in private hospitals within Mainland China, and expenses incurred in drug stores and companies of medical apparatus and instruments;
16. Accidents that occur outside Mainland China and the follow-up treatments as a consequent on the part of the Insured;
17. Charge of telephone, transportation, meals, etc. on the part of the Insured;
18. Sports and athletic activities of high risk only professionals participate. (The Insured engages in high-risk activities such as diving, parachuting, paragliding, roller skating, skiing, skating, bungee jumping, rock climbing, wrestling, judo, taekwondo, martial art, karate, fencing, etc.
19. Providing false insurance information, or non-overseas students insured as an overseas student.
20. Experimental treatment and costs incurred for medical experiment purpose.
21. The insurant should turn to medical treatment in strict accordance with the hospital admissions standards. If not, the insurer does not reimburse the cost of hospitalization.
22. Relevant expenses incurred by the Insured during the time when they do their part-time work.

Insurance premium

Insurance Liabilities	Insurance Amount (Yuan) RMB	Age 8—69			
		Insurance	Premium	Insurance	Premium

		(Yuan per half a year per person)	(Yuan per year per person)
Liability for Death + Accidental Disability	100000		
Accidental Medical Treatment	20000		
Hospitalization Medical Treatment	400000		
Medical Treatment for Outpatient and Emergency (With a daily limit of 600 yuan; the medical expenses exceeding 650 yuan can apply for a claim, that excess portion will be reimbursed at a proportion of 85%)	20000	400	800

Note: Matters not mentioned herein shall be executed according to 《国任财产保险股份有限公司附加意外伤害保险（2022版）条款》（C00014232322022062811611号）、《国任财产保险股份有限公司附加意外医疗保险条款》（C00014232522021042044092号）、《国任财产保险股份有限公司住院医疗费用保险（D款）条款》（C00014232512021062817971号）、《国任财产保险股份有限公司附加门急诊医疗费用保险条款》（C00014232522021061799611号）、《国任财产保险股份有限公司附加住院津贴医疗保险条款》（C00014232522021051468622号）、《国任财产保险股份有限公司附加疾病身故及全残保险条款》（C00014232622020102617952号）

If any dispute arises concerning the contents mentioned above, the Chinese interpretation shall prevail.

Claims:

Please be sure to call 4008105119 firstly to make a diagnosis inquiry before you go to see a doctor.

(1) Procedures for insurance claims:

Standard procedures of insurance claims after the occurrence of insurance accident:

STEP 1: Please call directly 4008105119 for medical consultation due to disease or accident. The rescuing doctor will provide consultation, diagnose, and medical guidance and instructions on the insurance claim.

STEP 2: After consulting the doctor and getting outpatient treatment, if the doctor confirms that further hospitalization is required, the insured can apply for advanced payment of medical expense for hospitalization to the rescue company. After communication and confirmation between the rescue company and hospital, it will be decided whether the advanced payment procedures shall be started.

Note: If the insured is directly hospitalized without being inquired, recorded by the doctor

of the rescue company as well as not being treated by the outpatient (including those whose conditions do not meet the requirements of hospitalization but require the outpatient doctor to agree with hospitalization), or without advanced consultation by calling 4008105119, the rescue company will not be responsible for advanced payment of medical expense for hospitalization.

(2) Document to be presented for settlement of claims:

1) Death or accidental disability

- A. Copy of ID of the Insured
- B. Disability certificate when the Insured is disabled (an evaluation report shall be issued by the assigned evaluation body)
- C. Death certificate of the Insured
- D. Certificate of accident in case of an accident (in case of traffic accident, the traffic unit should issue a liability confirmation of traffic accident; in case of falling from the height and drowning, the public security organs or relevant departments shall issue the materials determining whether it is accidental or suicidal; in case of alcohol-induced accident, a quantitative report on the alcohol concentration shall be issued.)
- E. Copies of certificates of the relationship between the Insured and all the beneficiaries, and copies of identification proofs of the beneficiaries

2) Accidental medical treatment

- A. Copies of ID of the Insured
- B. Process and certificate of accident (in case of a traffic accident, the traffic unit should issue a liability confirmation of traffic accident, which is needed.)
- C. Original of receipt, medical record, detailed expenditure sheet and copies of examination report and laboratory test report.

3) Hospitalization

- A. Copies of ID of the Insured
- B. Certificate of the accident in case of an accident (in case of the traffic accident, the traffic unit should issue a liability confirmation of traffic accident)
- C. Original of receipt and detailed expenditure sheet for hospitalization, copy of hospital discharge summary or medical record of hospitalization

4) Medical treatment for outpatient and emergency

- A. Copies of ID of the Insured
- B. Original of receipt
- C. Medical record, detailed expenditure sheet and copies of examination report and laboratory test report of each respective treatment (The date of the medical record and the date of invoice shall be corresponding with each other).

If the fees reach the deductible of RMB650 Yuan, then the original invoice, medical record, detailed expenditure sheet and copy of examination report and laboratory test report of treatment that costs below RMB650 Yuan are also required to be presented.

5) Application for nursing fee

Original Invoices of nursing fee issued by the hospital or by a nursing service company.

Special instructions to items above:

- (1) The Insured's bank account opened in mainland China and accurate information of this account, including account number, name, opening bank information, which can be obtained from a copy of deposit book and bank customer table, it must be attached to the claim settling documents for each request for compensation (For more details, please call 4008105119).
- (2) Where the insured treated in two or more hospitals (including two hospitals) respectively for one insured incident, relevant documents such as diagnosis certificate and medical record from relevant hospitals of each treatment shall be presented.

Materials for claims settlement sent to 北京市西城区金融街 23 号平安大厦 10 层 (邮编 100033)

Addressee: 来华项目组

Please Dial: 4008105119

This program is an insurance product mix

Please log in www.lxbx.net for latest insurance introduction.

This material is for your information, Chinese explanation prevails in case of contradiction arising out of the aforementioned contents.