

"GBA MediAccess"

Outpatient Insurance Plan



"GBA MediAccess" Outpatient Insurance Plan

One-stop Chinese and Western Medical Treatment and Health Management, Creating Value Beyond Health

As economy, manufacture and livelihood ties within the Guangdong-Hong Kong-Macau Greater Bay Area ("GBA") grow closer, the need for medical coverage spanning Hong Kong, Macau and Mainland China becomes significantly important. Chow Tai Fook Life Insurance Company Limited ("CTF Life") proudly presents "GBA MediAccess" Outpatient Insurance Plan ("GBA MediAccess"/"the Plan"), offering one-stop online and offline general practitioner outpatient consultation, traditional Chinese medical practitioner outpatient consultation, dental scaling and health management services. The Plan provides coverage for you and up to two of your family members¹, granting seamless access to extensive and reliable medical services through the robust Medical Network of the GBAH Group. All services can be easily scheduled and managed via the online system, allowing you and your family members¹ to enjoy a hassle-free life no matter you are travelling or residing in Hong Kong, Macau or any of the other 6 Designated GBA Cities².

Main Characteristics



Online and offline outpatient consultation

Face-to-face and online general practitioner outpatient consultation^{3,4,5} with prescribed basic medication for 3 days



Family coverage for three members

One plan, one premium

You and your two Designated Family Members

are all covered



Traditional Chinese outpatient consultation and dental tooth polishing services

Covering traditional Chinese medical practitioner outpatient consultation^{4,6} and annual dental scaling services^{4,7}



Health management value-added services

Proactive health management^{4,8} and chronic disease management programme^{4,9}

Plan Features

Outpatient services

By enrolling in one plan and paying one premium, you and **up to two of your Designated Family Members**¹ can enjoy the following outpatient services:



Online and offline general practitioner outpatient consultation services

The services include **general practitioner face-to-face outpatient consultation with prescribed basic medication for up to 3 days**^{3,4}. Depending on the plan level, the face-to-face outpatient consultation services network covers 6 **Designated GBA Cities including Guangzhou, Shenzhen, Zhuhai, Foshan, Dongguan and Zhongshan, and even Hong Kong and Macau**. General practitioner online consultation^{4,5} is provided by registered medical practitioner of the designated clinics under the Medical Network of the GBAH Group in Mainland China¹⁰ which would also offer **prescribed basic medication for up to 3 days with free delivery**. This allows you to receive convenient and quality medical services without visiting a clinic in person, saving both time and effort.



Unlimited general practitioner online consultation (exclusive to Plan 3)

To provide additional support and care for you and your family members¹, even if the number of general practitioner face-to-face consultation^{3,4} and online consultation^{4,5} you have consumed has **reached the annual limit**, you can still **enjoy unlimited general practitioner online consultation^{4,5} conducted by the designated clinics under the Medical Network and medication delivery services in Mainland China¹⁰ (with medication and delivery fees at your own expense), ensuring you have access to additional comprehensive medical support whenever needed.**



Traditional Chinese medical practitioner outpatient consultation^{4,6} and dental tooth polishing services^{4,7}

In addition to conventional Western medical outpatient services, upon referral by a GOLDTM doctor of the GBAH Group, you and your Designated Family Members¹ can receive traditional Chinese medical treatment services^{4,6} at designated Chinese medical clinics under the Medical Network located in the 6 Designated GBA Cities². The services include consultations, diagnosis, prescribed traditional Chinese medicines for up to 3 days, and related traditional Chinese medical services and treatments. You can opt for a combination of Chinese and Western medical treatments to meet your individual needs more flexibly.

The Plan also offers **annual dental scaling and dental care service^{4,7}** to provide you with a more comprehensive outpatient service experience.

Health management value-added services

As the saying goes, "Prevention is better than cure.". Health management plays a vital role in disease prevention. Therefore, the Plan specifically provides you and your family member(s)¹ with two major value-added services. These are trustworthy, affordable, and accessible one-stop health management services ranging from screening, continuous monitoring to health education, setting a cornerstone for personal and family health.



Proactive health management^{4,8}

Early detection of changes in physical health conditions can effectively reduce potential health risks. This value-added service includes an assessment of proactive health management for the Insured and/or Designated Family Member¹, to be conducted either face-to-face or via online by the GOLD™ doctors from the GBAH Group. The assessment covers evaluation of family medical history, the establishment of annual health target, education of preventive care, recommendation for a healthy lifestyle and health monitoring, etc. You may arrange subsequent follow-up consultations after the initial assessment if needed. By gaining a comprehensive understanding of your own health condition and receiving the timely and appropriate treatment, you can secure long-term health and well-being.



Chronic disease management programme^{4,9}

We understand that chronic diseases can have long-term effects on health and quality of life. These conditions are often closely related to lifestyle. Early prevention, diagnosis and continuous monitoring can help reduce the risk of severe diseases such as diabetes, heart disease and stroke.

By participating in the "chronic disease management programme"^{4,9} offered by the Medical Network in Mainland China, GOLDTM doctors and nurses under the GBAH Group shall offer you and your family members¹ with education of chronic disease prevention, including regular check-up appointments, diabetes screening (if necessary), medication management and lifestyle advice, in a bid to achieve "early prevention, early detection, and early treatment". Moreover, this service is not subject to the maximum number of outpatient consultations per Policy Year.

For details, please contact your financial consultant / call Customer Service Hotline at 2866 8898, or browse the company website at www.ctflife.com.hk.

At-a-Glance Table

Plan level	Plan 1	Plan 2	Plan 3	
Product core nature	Outpatient protection plan			
Product main objective	Provide outpatient services and value-added services by the designated Medical Network			
Policy Category	Basic plan			
Issue age of the Insured	Age 18 to 80			
Issue age of the Designated Family Member ¹	15 days to age 80			
Coverage Period (Insured and Designated Family Member ¹)	Up to age 81			
Premium (provides coverage for the Insured and maximum 2 Designated Family Members')				
Annual premium (HKD) Special Offer	1,888	2,688	3,858	
Area of coverage				
(a) General practitioner face- to-face consultation ^{3,4}			Designated clinics under the Medical Network within 6 Designated GBA Cities², Hong Kong and Macau	
(b) General practitioner online consultation ^{4,5}	Designated clinics under the Medical Network within Mainland China ¹⁰			
(c) Traditional Chinese medical practitioner outpatient consultation ^{4,6}	Designated Chinese medical clinics under the Medical Network within 6 Designated GBA Cities ²			
(d) Dental for tooth polishing ^{4,7}	Designated dental service centres under the Medical Network within 6 Designated GBA Cities ²			

Plan level	Plan 1	Plan 2	Plan 3	
Maximum number(s) of outpat (co-shared by the Insured and r				
 (a) General practitioner faceto-face consultation^{3,4} and (b) General practitioner online consultation^{4,5} 	12 visits	20 visits	30 visits (excluding Hong Kong and Macau) or 25 visits (including Hong Kong and Macau)	
(c) Traditional Chinese medical practitioner outpatient consultation ^{4,6}	2 visits	5 visits	5 visits	
(d) Dental for tooth polishing ^{4,7}	1 visit	1 visit	1 visit	
Aggregate number of outpatient consultations of (a) – (d) per Policy Year	12 visits	20 visits	30 visits (excluding Hong Kong and Macau) or 25 visits (including Hong Kong and Macau)	
Additional general practitioner online consultation with medication delivery services in Mainland China ¹⁰ available upon reaching the maximum number of visits per Policy Year of items (a) and (b) above	Not applicable		Unlimited (Medications and delivery fees at the Insured and/or Designated Family Members ¹ own costs)	
Copayment ¹¹	(to be paid by the Insured or the Designated Family Member ¹ per outpatient consultation) Hong Kong: HKD 20; or Macau: MOP 20; or Mainland China ¹⁰ : CNY 8			
Health management value-add Family Members¹)	led services (applicable to	the Insured and maximu	m 2 Designated	
(a) Proactive health management ^{4,8}	Assessment of proactive health management ^{4,8} to be conducted face-to-face or online, includes evaluation of family medical history, establishment of annual health target, education of preventive care, recommendation for healthy lifestyle and health monitoring, etc. Each assessment shall be considered as receiving 1 outpatient consultation,			
	subject to the maximum number of outpatient consultations per Policy Year.			
	Limited to the Medical Network in Mainland China ¹⁰ only.			
(b) Chronic disease management programme ^{4,9}	Offers the Insured and/or the Designated Family Member¹ with education of chronic disease prevention, including lifestyle advice, diabetes screening (if necessary), medication management and regular check-up appointment, etc.			
	Visits to clinics and/or service centres under Medical Network of the GBAH Group for this chronic disease management programme ^{4,9} shall not be considered as outpatient consultation and shall not be subject to the maximum numbers of outpatient consultation per Policy Year.			
Death Benefit ¹² (Only applicable	to the insured but not the i	Designated Family Memb	er¹)	

Application and Appointment Process¹³

Step 1

Successfully enrolled in the "GBA MediAccess" Outpatient Insurance Plan



Step 2

Policy Owner (as "The Insured") will receive a redemption notice (with QR Code) from the GBAH Group



Step 3

Scan the QR Code via a designated online application for redemption and registration



Step 4

Services such as appointment, online consultation and medical information are available after account activation

The GBAH Group

Scan the QR code to know more about the outstanding services provided by the GBAH Group.



The product information in this document does not contain the full terms of this Plan and the full terms can be found in the Policy Document.

This Plan may be purchased as a standalone plan without bundling with other type(s) of insurance product. You are required to read the relevant product brochure, the Policy Provisions and the illustrations presented by your licensed insurance intermediary of this Plan in order to fully understand the details of the definitions, charges, product features, exclusions, and conditions of payment of claims, etc. plus complete terms and conditions.

Notes:

- 1. Family member / Designated Family Member shall be up to 2 immediate family members (i.e. Policy Owner's legal spouse, child, or parent) designated by the Policy Owner (i.e. the Insured) at application or renewal. Designated Family Member cannot be changed within the same Policy Year.
- 2. It means the 6 cities in Guangdong Province of the People's Republic of China including Guangzhou, Shenzhen, Zhuhai, Foshan, Dongguan and Zhongshan.
- 3. The Insured and/or Designated Family Member can receive face-to-face outpatient consultations conducted by registered medical practitioners of the designated clinics under the Medical Network within Designated GBA Cities, Hong Kong or Macau (subject to the area of coverage according to different plan levels as specified in the At-a-Glance Table), and prescribed basic medication for a duration of up to 3 days.
- 4. If the Insured and/or Designated Family Member receive any medical services, treatments and/or medications provided by the GBAH Group that fall outside the covered service scopes under the Plan during any consultations as described under the outpatient consultations and value-added services, the Insured and/or Designated Family Member shall be responsible for the costs so incurred for such medical services, treatments and/or medications.
- 5. The general practitioner online consultation is only applicable to the Insured and/or Designated Family Member whose attained age is 7 or above on the day of the online consultation. The Insured or Designated Family Member may choose to receive online consultation conducted by registered medical practitioners of the designated clinics under the Medical Network in Mainland China of the GBAH Group and prescribed basic medication for a duration of up to 3 days, including basic medication delivery services, provided that the address of the Insured or Designated Family Member is in the same geographical area as the clinic of the registered general practitioner who provides such online consultation. If the Insured or Designated Family Member is located in a different geographical area from the clinic of the registered medical practitioner during the online consultation, the service of the Plan shall not cover such online consultation nor any outpatient services. The Company shall not be liable for any losses incurred by the Insured or Designated Family Member.
- 6. If the Insured and/or Designated Family Member suffers from a Disability, and following an initial referral confirmed by a GOLD™ doctor of the GBAH Group as Medically Necessary for traditional Chinese medical treatment, the Insured or Designated Family Member shall receive traditional Chinese medical treatment services at designated Chinese medical clinics under the Medical Network within the Designated GBA Cities of the GBAH Group for such Disability. Service shall include consultations, diagnosis, prescribed traditional Chinese medicines for a duration of up to 3 days, and related traditional Chinese medical services and treatments, up to 100 Chinese yuan per outpatient consultation. Medically Necessary means treatments, procedures, supplies or other medical services: (i) which are consistent with generally accepted professional standards of medical profession or recognized medical standards; and (ii) which are required to establish diagnosis or provide treatment for the illness or injury of the Insured or Designated Family Member; and (iii) which cannot be safely delivered in a lower level of medical care to the Insured or Designated Family Member.
- 7. The Insured or Designated Family Member shall receive dental scaling and dental care service at designated dental service centres under the GBAH Group once per Policy Year.
- 8. Upon completion of enrolment for this service under the Plan by the Insured and/or the Designated Family Member, the GBAH Group will proactively reach out the Insured and/or the Designated Family Member. With their consent, an initial assessment of proactive health management to be conducted via face-to-face or online will be arranged by the GOLD™ doctors from the GBAH Group for the Insured and/or Designated Family Member. The first assessment of proactive health management and any subsequent follow-up assessments shall each be considered as 1 outpatient consultation, subject to the maximum number of outpatient consultations per Policy Year.
- 9. The GBAH Group shall offer patients with education of chronic disease prevention. This programme is provided by GOLDTM doctors and nurses of the GBAH Group for the Insured and/or Designated Family Member and which is limited to the Medical Network in Mainland China. Visits to clinics or service centres under Medical Network of the GBAH Group by the Insured and/or Designated Family Member for this Chronic disease management programme shall not be considered as outpatient consultation and shall not be subject to the maximum numbers of outpatient consultation per Policy Year.
- 10. It refers to the People's Republic of China, excluding Hong Kong and Macau.
- 11. It means the amount payable by the Insured or Designated Family Member to the Medical Network upon each outpatient consultation as specified under (Items a d) of outpatient service of the At-a-Glance Table.
- 12. Upon the death of the Insured, whether due to accidental or natural cause, the Company shall pay the Compassionate Death Benefit to the Beneficiary. However, the premium for that Policy Year will not be refunded.
- 13. We reserve the right to adjust the redemption procedures of the Plan from time to time. For the specific process and related functions, please refer to the redemption notice issued by the GBAH Group.

General Exclusions

The outpatient services and value-added services (the "service of the Plan" / the "Service"), provided by the GBAH Group exclude below items, treatments, activities, disabilities and related medical costs:

- 1. Charges in respect of cosmetic surgery or treatment for cosmetic purpose, such as consultation for acne vulgaris, weight problem, hair loss etc., dental treatment or oro-surgical care treatment (except for dental scaling and dental care services as stated in Part (d) in The At-a-Glance Table stated above), correction of vision or eye refraction error, visual assessment or fitting of glasses.
- 2. Treatment for hereditary diseases, congenital diseases, congenital malformations, deformations or chromosomal abnormalities, and their complications (in accordance with the International Statistical Classification of Diseases and Related Health Problems (ICD-10) issued by the World Health Organization).
- 3. Expenses directly or indirectly arising from Human Immunodeficiency Virus (HIV) related disability, including Acquired Immune Deficiency Syndrome (AIDS) and/or any mutation derivations or variations thereof which proceeds from HIV infection (occurring prior to the effective date of this Policy).
- 4. Pregnancy and all matters related to pregnancy, childbirth, abortion, miscarriage treatment arising from infertility, including in-vitro fertilisation or any other artificial method of inducing pregnancy, or charges relating to birth control or sterilization of either sex.
- 5. Treatment directly or indirectly arising from self-inflicted injuries whether sane or insane, psychogeriatric or psychiatric condition, including but not limited to psychoses, neuroses, depression, anxiety, anorexia nervosa, schizophrenia, behavioural disorders etc.;
- 6. Charges for the procurement of use of special braces, appliances, spectacles, hearing aids, wheelchairs, crutches or other equipment.
- 7. Illness or injury directly or indirectly resulting from or consequent upon drug addiction, alcoholism, venereal disease, sexually transmitted diseases, wilful misuse of drugs or alcohol, attempted suicide or participating in an illegal activity.
- 8. Treatment arising from sexual dysfunction, including but not limited to impotence, erectile dysfunction, premature ejaculation regardless of cause.
- 9. Special X-ray examinations, such as intravenous pyelography, intravenous cholangiography, cholangiogram, and special tests including ultrasound examination, echocardiography, endoscopy, X-ray examinations using contrast agents, ultrasound scanning, computed tomography scanning, positron emission tomography scanning, magnetic resonance imaging, and examinations or treatments using radioactive isotopes.
- 10. Long term medication for any disabilities that persists or requires treatment for more than 27 days, including anti-inflammatory medication for rheumatic arthritis and anti-hypertensive medication for hypertension.
- 11. Medical expenses for chronic illness, such as asthma, tumour (benign or malignancy), and chronic hepatitis. Tonics, appetite stimulants, vitamins, hormonal supplement, unless recommended by the medical practitioners under Medical Network of the GBAH Group.
- 12. Charges for medication other than basic medication such as anti-viral drugs, antituberculosis medication and expensive medications.
- 13. Treatment or services not undertaken by the medical practitioners under Medical Network of the GBAH Group.
- 14. Any Chinese medical treatments for the purpose of relieving, including but not limited to tui na or massage.
- 15. Medication on request such as prophylactic drug supply for visiting a malaria area and/or standby medication.

Important Notice

1. Cooling-off Right

If you wish to exercise your cooling-off right, you can cancel the Policy and obtain a refund of premium and levy paid by giving a written notice to us. However, no refund of premium and levy paid will be made by the Company if any service(s) provided by the GBAH Group under the Policy has been used during the cooling-off period. This right of cancellation shall not apply at renewal. Such notice must be signed by you and submitted to our office at 7/F, NEO, 123 Hoi Bun Road, Kwun Tong, Kowloon within 21 calendar days immediately following the day of delivery of the Policy or the Cooling-off Notice to you or your nominated representative (whichever is the earlier). The Cooling-off Notice should inform you of the availability of the Policy and expiry date of the cooling-off period. We will terminate the Policy with full refund of paid premium (if applicable) after completion of relevant procedures. In such event, the Policy shall be deemed to have been void from the Policy Effective Date and the Company shall not be liable to pay any benefit.

2. Premium

All premiums up to the Premium End Date are payable to us on or before the due date at such of our offices in Hong Kong as prescribed by us from time to time and in a manner which is acceptable to the Company. We will permit the frequency of premium payment to be changed on or before any premium due date by filing with us a written request provided that such change meets the minimum premium requirements and the requirement of acceptable payment methods as determined by us from time to time.

3. Key Product Risks

i. Policy Termination

The coverage of the Insured under the Policy shall be automatically terminated upon the earliest occurrence of the following circumstances:

- · any premium under the Policy remains in default at the end of the Premium End Date; or
- · your request to terminate the Policy is accepted by us; or
- · the Plan End Date; or
- the death of the Insured.

Termination of policy shall not affect your claims arising before the date of termination.

ii. Termination of the Medical Services

This service of the Plan shall terminate automatically upon:

- · the termination of the Plan; or
- the termination of the Service by either the GBAH Group or the Company. In such case, a written notice will be sent to you 30 calendar days before the date of termination. The Insured and /or Designated Family Member can still use this service of the Plan on or before such date of termination.

iii. Renewal, Premium and Product Adjustment

In order to provide you with continuous protection, we will review the premium and product coverage of the Plan from time to time. We may consider factors including but not limited to the claim costs incurred from all policies under the Plan and the expected claim outgo in the future (reflects medical trends, medical cost inflation and the change in the product features revision). While the Policy is in force, the Policy may be renewed without further evidence of insurability of the Insured on each policy anniversary up to and excluding the plan end date by payment of the premium at the prevailing premium rate determined by us at the time of renewal. The Policy must be in force and constrained by the Termination Provisions at the time of the renewal.

We reserve the right to revise the benefits and/or any restrictions/limitations and/or the premium of the Policy by giving at least 30 calendar days' notice in writing to you before any policy anniversary. The revised premium, benefits and/or restrictions/limitations will take effect automatically on the next policy anniversary unless you notify us in a written request to cancel the Policy within 30 calendar days after such revision takes effect. In the case where a payment of the revised premium is made to us before we receive your notice of cancellation, we shall refund to you such premium without interest.

We also reserve the right for non-renewal of the Policy by giving at least 30 calendar days' notice in writing to you before any policy anniversary. Non-renewal of the Policy shall not affect your claims arising under the Policy before the date of termination.

iv. Changes of the Plan

In the event of any adjustment in the level (whether upgrade or downgrade) of the Plan, the Policy Owner shall make an application for such change within one month before the policy anniversary and such change shall only take effect on the policy anniversary.

v. Change of the Policy Owner or Designated Family Member

The Policy Owner cannot be changed after the Policy takes effect. For Designated Family Member, you shall submit an application for addition or change within one month before the policy anniversary, subject to the approval in accordance with the Company's administrative regulations for the time being.

4. Medical underwriting and Waiting Period

There is no medical underwriting or waiting period required for this Plan.

5. Claim

While the Policy is in force and on receipt of due proof of death for any claim hereunder satisfactory to the Company, we shall provide the Compassionate Death Benefit in accordance with the provisions of the Policy to the Beneficiary.

6. Data Authorization

For the purpose of applying for activation of the Service, the Insured and Designated Family Member (and/or their representatives) has/have to provide the GBAH Group with all the following information:

- · Full name of the Insured and Designated Family Member (and/or their representatives) and the Policy number;
- the address, e-mail address and the telephone number by which the GBAH Group can reach the Insured and Designated Family Member (and/or their representatives); and
- authorization declaration signed or confirmed by the Insured and Designated Family Member (and/or their representatives) to confirm using the Service and authorize the GBAH Group to collect medical records from the attending physician on behalf of the GBAH Group.

Liabilities and declarations

- 1. The Company shall not be, and shall not be deemed to be, responsible for any loss or damage arising from or in connection with the services provided by the GBAH Group (whether in any form, whatsoever and howsoever, directly or indirectly). The GBAH Group does not have the authority to make any representations on behalf of the Company.
- 2. The Insured and/or Designated Family Member (and/or their representatives) shall have the final decision whether or not to accept consultations from and to pursue any related treatments based on the recommendations provided by medical practitioners under Medical Network of the GBAH Group. The Insured and/or Designated Family Member (and/or their representatives) shall fully understand any associated risk(s) relating to any treatment as mentioned during the consultations and recommendations provided by medical practitioners under Medical Network of the GBAH Group. The Insured and/or Designated Family Member (and/or their representatives) shall be responsible for his/her/your own decision.
- 3. The Company has not vetted any of the third-party service providers and the Company does not endorse nor recommend any of the third-party service providers. The Company is not responsible or liable for any opinion, advice or statement made by the GBAH Group or any other third-party service providers. The Insured and/or Designated Family Member (and/or their representatives) should take his/her/your own advice and/or make inquiries with the GBAH Group and/or the third-party service providers and the Insured and/or Designated Family Member (and/or their representatives) shall conduct independent verification prior to adopting any recommendations.
- 4. For the avoidance of doubt, the Company shall not be responsible and will not be liable for the acts, omissions, defaults, negligence or insolvency of, or the breach of any applicable law or regulations by (i) the GBAH Group or (ii) any third party appointed by, referred by, engaged by or representing the GBAH Group, including but not limited to the third-party service providers hereinabove mentioned, and such parties shall not be considered as the agents or subcontractors of the Company whatsoever and none of which has any authority to make any representation for and on behalf of the Company. In no event, regardless of cause, shall the Company be liable for any indirect, special, incidental, punitive or consequential damages of any kind, whether arising under breach of contract, tort (including negligence), strict liability or otherwise, and whether based on the Plan Service Document or otherwise, even if advised of the possibility of such damages, whatsoever arising out of, or in connection with the Outpatient Services and/or Value-Added Services as specified under this Plan to the fullest extent permitted by law.
- 5. The Company and the GBAH Group, along with any other third-party service providers, operate as separate and independent entities. The Company has no authority and shall not obtain any information regarding the content of Outpatient Services and/or Value-Added Services as specified under this Plan received by the Insured and/or Designated Family Member from the GBAH Group or any medical records. The use of any services under this Plan by the Insured and/or Designated Family Member does not imply that the Company is aware of their health status or medical history. In the event that the Insured and/or Designated Family Member needs to report his/her/your health status and/or medical history to the Company, he/she/you must accurately disclose all information, including any consultations and records received under this Plan.

This document is intended to be distributed in Hong Kong only and shall not be construed as an offer to sell or a solicitation to buy or provision of any of our products outside Hong Kong. Chow Tai Fook Life Insurance Company Limited hereby declares that it has no intention to offer to sell, to solicit to buy or to provide any of its products in any jurisdiction other than Hong Kong in which such offer to sell or solicitation to buy or provision of any product of Chow Tai Fook Life Insurance Company Limited is illegal under the laws of that jurisdiction.

A person who is not a party to the Policy (including but not limited to the Insured Person and the Beneficiary) has no right to enforce any terms of the Policy. The Contracts (Rights of Third Parties) Ordinance does not apply to the Policy or any document issued pursuant to the Policy.



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