

附錄 2 詞語的定義

Appendix 2 Definition of Terms

供款數額

就退休計劃業務而言，指僱員及僱主向計劃基金提供的款額。

須付的佣金

就保險公司的任何財政年度而言，指在該年度內已記錄為就保險合約的取得、修訂或續保而須付予中介人或分出者的款額，不論該款額是否已在該年度內支付。

可收取的佣金

就保險公司的任何財政年度而言，指在該年度內已記錄為就分出的再保險而須由中介人或再保險公司付予保險公司的款額，不論該款額是否已在該年度內為保險公司所收取。

滿期保費

指按財政年度開始和終結時的未滿期保費而調整的淨保費。

已償付申索毛額

就一般保險業務而言，指在扣除從再保險公司及其他方面收回的款項前，保險公司支付以供全部或部分了結以下項目的款額：

- a) 申索，包括計入超過一個財政年度的業務所涉及的申索；及
- b) 保險公司招致（不論是透過其職員的僱用或由於其他原因）的開支（例如法律、醫療、測量或工程方面的費用），並直接是為了結個別申索所引致，不論該等個別申索是否為上述所提及者。

毛保費

就保險公司的任何財政年度而言，指：

- a) 已扣除保單中指明的折扣，或已扣除因風險的終止或減少風險而作出的退款，但尚未扣除保險公司分出的再保險保費及其須付的佣金的保費；及
- b) 包括保險公司根據所接受的再保險合約而可收取的保費。

香港一般保險業務

指：

- a) 任何屬一般保險業務的直接業務或臨時再保險業務，而所涉及的風險是在香港承保的，換言之：
 - (i) 保單是在香港發出的；

Amount of contributions

in relation to retirement schemes business, means the amounts contributed by the employees and employers to the scheme funds.

Commissions payable

in relation to a financial year of an insurer, means the amounts, whether or not paid during that year, which are recorded during that year as due to intermediaries and cedants in respect of the inception, amendment or renewal of contracts of insurance.

Commissions receivable

in relation to a financial year of an insurer, means the amounts, whether or not received by the insurer during that year, which are recorded during that year as due to the insurer from intermediaries and reinsurers in respect of reinsurance ceded.

Earned premiums

means the net premiums adjusted by the unearned premiums at the beginning and end of the financial year.

Gross claims paid

in relation to general insurance business, means the amount that is paid by an insurer in full or partial settlement of:

- a) claims, including claims relating to business accounted for over a longer period than a financial year; and
- b) expenses (such as, for example, legal, medical, surveying or engineering costs) which are incurred by the insurer, whether through the employment of its own staff or otherwise, and are directly attributable to the settlement of individual claims, whether or not the individual claims in question are those mentioned above, before deduction of recoveries from reinsurers and other parties.

Gross premiums

in relation to a financial year of an insurer:

- a) means premiums after deduction of discounts specified in policies or refunds of premiums made in respect of any termination or reduction of risks but before deduction of premiums for reinsurance ceded and of commissions payable by the insurer; and
- b) includes premiums receivable by the insurer under reinsurance contracts accepted by the insurer.

Hong Kong general insurance business

means:

- a) any direct business or facultative reinsurance business, being general insurance business, in relation to which the risk is underwritten in Hong Kong, that is to say:
 - (i) the policy is issued in Hong Kong;

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- (ii) 投保表格、投保申請表格或任何其他同類性質的表格是在香港擬備或簽署的；
- (iii) 投保表格、投保申請表格或任何其他同類性質的表格是在香港呈交或收取的；
- (iv) 投保表格、投保申請表格或任何其他同類性質的表格是在香港獲接受的；或
- (v) 風險是在香港獲接受的；或
- b) 任何屬一般保險業務的協約再保險業務，而所涉及的風險是在香港承保的，換言之：

- (i) 協約是在香港簽署的；
- (ii) 協約是在香港獲接受的；或
- (iii) 協約談判是在香港完成的，但不包括以下協約再保險業務：該業務承保的全部風險中，不足25%的風險（根據該協約的可收取毛保費計算）是在香港產生的。

在下列情況下，有關風險須當作在香港產生：

- a) 如屬意外及健康或金錢損失的保險業務，屬個人的保單持有人是在香港居住的，或保單持有人是《公司條例》(第622章)第2(1)條所界定的公司；
- b) 如屬飛機、船舶及貨運的保險業務，風險是在香港承保的；及
- c) 如屬所有其他保險業務，風險是位於香港的。

香港長期保險業務

指：

- a) 任何屬長期業務的直接業務或臨時再保險業務，而所涉及的風險是在香港承保的，換言之：
 - (i) 保單是在香港發出的；
 - (ii) 投保表格、投保申請表格或任何其他同類性質的表格是在香港簽署的；
 - (iii) 投保表格、投保申請表格或任何其他同類性質的表格是在香港呈交或收取的；
 - (iv) 投保表格、投保申請表格或任何其他同類性質的表格是在香港獲接受的；或
 - (v) 風險是在香港獲接受的；或
- b) 任何屬長期業務的協約再保險業務，而所涉及的風險是在香港承保的，換言之：
 - (i) 協約是在香港簽署的；
 - (ii) 協約是在香港獲接受的；或

(ii) the proposal form, application form or any other form of a similar nature is prepared or signed in Hong Kong;

(iii) the proposal form, application form or any other form of a similar nature is submitted or received in Hong Kong;

(iv) the proposal form, application form or any other form of a similar nature is accepted in Hong Kong; or

(v) the risk is accepted in Hong Kong; or

b) any treaty reinsurance business, being general insurance business, in relation to which the risk is underwritten in Hong Kong, that is to say:

(i) the treaty is signed;

(ii) the treaty is accepted; or

(iii) the treaty negotiation is concluded,

in Hong Kong, other than treaty reinsurance business in respect of which less than 25% of the total risk (calculated in terms of the gross premiums receivable under the treaty) arises in Hong Kong.

A risk is deemed to arise in Hong Kong:

a) in the case of Accident & Health or Pecuniary Loss insurance business, if the policy holder being an individual is resident in Hong Kong or the policy holder is a company as defined by section 2(1) of the Companies Ordinance (Cap. 622);

b) in the case of Aircraft, Ships and Goods In Transit insurance business, if the risk is underwritten in Hong Kong; and

c) in all other cases of insurance business, if the risk is located in Hong Kong.

Hong Kong long term insurance business

means:

a) any direct business or facultative reinsurance business, being long term business, in relation to which the risk is underwritten in Hong Kong, that is to say:

(i) the policy is issued in Hong Kong;

(ii) the proposal form, application form or any other form of a similar nature is signed in Hong Kong;

(iii) the proposal form, application form or any other form of a similar nature is submitted or received in Hong Kong;

(iv) the proposal form, application form or any other form of a similar nature is accepted in Hong Kong; or

(v) the risk is accepted in Hong Kong; or

b) any treaty reinsurance business, being long term business, in relation to which the risk is underwritten in Hong Kong, that is to say:

(i) the treaty is signed in Hong Kong;

(ii) the treaty is accepted in Hong Kong; or

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(iii) 協約談判是在香港完成的，但不包括符合以下說明的協約再保險業務：業務承保的全部風險中，不足25%的風險(根據有關協約的可收取毛保費計算)是在香港產生的。

在以下情況下，有關風險須當作在香港產生：

- a) 屬個人的保單持有人是在香港居住的；或
- b) 保單持有人是《公司條例》(第622章)第2(1)條所界定的公司。

失效

指沒有不能作廢價值的保單的終止。

勞合社

指一個以倫敦為基地，由個人及法團承保人組成的保險組織。社員對所承保的保險自行負責。

管理開支

指保險公司在行政或業務方面所招致的開支，但不包括須付佣金的開支。如屬一般保險業務，亦不包括列入已償付申索、未決申索、了結申索的開支及了結未決申索的開支以內的開支。

已償付申索淨額

指扣除從再保險公司及其他方面收回的款項後的已償付申索額。

淨負債

就保險公司的任何財政年度而言，指保險公司截至該財政年度終結時未計分出再保險的保單儲備金。

淨保費

就保險公司的任何財政年度而言，指從毛保費中扣除分出再保險保費後的淨額。

新造業務

就保險公司的任何財政年度而言，指在該財政年度內新承保的保單。

非單位負債

指為支付超逾單位負債的申索、開支及單位負債未有計及的任何預期費用而預留的儲備金。

保單保費

就保險公司的任何財政年度而言，指：

- a) 如屬整付保費保單，保單持有人在該財政年度內所支付的保費；或
- b) 如屬定期繳付保費保單，保單持有人在保單估值日期所結算的整年保費或在該財政年度內所支付的彈性保費。

(iii) the treaty negotiation is concluded in Hong Kong,

but does not include any treaty reinsurance business in respect of which less than 25% of the total risk (calculated in terms of the gross premiums receivable under the treaty) arises in Hong Kong.

A risk is deemed to arise in Hong Kong, if:

- a) the policy holder being an individual is resident in Hong Kong; or
- b) the policy holder is a company as defined by section 2(1) of the Companies Ordinance (Cap. 622).

Lapses

means terminations of insurance policies that do not have non-forfeiture values.

Lloyd's

means a London based insurance society consisting of individual and corporate underwriters underwriting insurance for their own accounts.

Management expenses

means expenses incurred in the administration of an insurer or its business which are not commissions payable and, in the case of general insurance business, are not included in claims paid, claims outstanding, expenses for settling claims and expenses for settling claims outstanding.

Net claims paid

means the gross claims paid after deduction of recoveries from reinsurers and other parties.

Net liability

in relation to a financial year of an insurer, means the policy reserve set aside by the insurer before reinsurance as at the end of the financial year.

Net premiums

in relation to a financial year of an insurer, means the net amount after deducting any premiums for reinsurance ceded from the gross premiums.

New business

in relation to a financial year of an insurer, means policies newly written during the financial year.

Non-unit liability

means the reserve set aside to cover claims in excess of unit liability, expenses, and any expected outgo not covered by the unit liability.

Office premiums

in relation to a financial year of an insurer, means:

- a) for policies with single mode of payment, the premiums paid by the policy holders during the financial year; or
- b) for policies with regular mode of payment, the annualized premiums of the policies as at the valuation date or the flexible premium paid by the policy holders during the financial year.

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保單年度

指由保單生效至其一周年的期間，或保單的兩個周年之間的期間。

專業再保險公司

就本保險業務統計數字之用途而言，指根據《保險公司條例》只獲授權經營再保險業務的保險公司。

定期繳付保費

指保單持有人就某份保險保單定期繳付的款項。

整付保費

指保單持有人就某份保險保單一次過繳付的款項。

法定業務

指承保以下條例描述的法律責任的保險業務：

- a) 《汽車保險（第三者風險）條例》（第272章）第6條；
- b) 《商船（本地船隻）條例》（第548章）第23D條及根據該條例第89條訂立的任何規例；或
- c) 《僱員補償條例》（第282章）第40條。

保額

指保險合約所訂出現申索事件時應付的款項。

退保

指有不能作廢價值的保單的終止。

未滿期保費

指保險公司在其財政年度終結時從以下保費中撥出的款額：根據在該年度終結前訂立的合約，該保險公司在該財政年度終結後所須承擔的風險所涉及的保費。

未過期風險準備金

指保險公司在其財政年度終結時，除未滿期保費外，另外撥出被認為是必需的款額，以支付保險公司根據在該財政年度終結前訂立的保險合約而須在該財政年度終結之後承擔的風險所引起的申索費用及了結申索的開支。

單位負債

指為保單持有人所持單位的價值而預留的儲備金。

可分紅業務

指除合約所定利益外，保單持有人有權享有在保險公司的可分配盈餘中分得利潤的保險業務。

不分紅業務

指保單持有人無權享有在保險公司的可分配盈餘中分得利潤的保險業務。

Policy year

means the period between the commencement of the policy and its first anniversary, or between two anniversaries of the policy.

Pure reinsurer

in relation to its use in these statistics, means an insurer authorized under the Insurance Companies Ordinance to carry on reinsurance business only.

Regular premiums

means a policy holder's payments for an insurance policy at regular intervals.

Single premium

means a policy holder's one-off payment for an insurance policy.

Statutory business

means the business of insurance against liability described in:

- a) section 6 of the Motor Vehicles Insurance (Third Party Risks) Ordinance (Cap. 272);
- b) section 23D of the Merchant Shipping (Local Vessels) Ordinance (Cap. 548) and any regulation made under section 89 of that Ordinance; or
- c) section 40 of the Employees' Compensation Ordinance (Cap. 282).

Sum assured

means the amount payable upon the happening of a claim event as defined in an insurance contract.

Surrenders

means terminations of insurance policies that have non-forfeiture values.

Unearned premiums

means the amount set aside by an insurer at the end of its financial year out of premiums in respect of risks to be borne by the insurer after the end of the financial year under contracts of insurance entered into before the end of that year.

Unexpired risks provision

means the amount set aside by an insurer at the end of its financial year, in addition to any unearned premiums, which is considered necessary to meet the claims and expenses for settling claims arising from risks to be borne by the insurer after the end of the financial year under contracts of insurance entered into before the end of that year.

Unit liability

means the reserve set aside for the value of the units held for policy holders.

With-profits business

means the business in which policy holders are entitled to participate in the distributable surplus of the insurer in addition to their contractual benefits.

Without-profits business

means the business in which policy holders do not participate in the distributable surplus of the insurer.