LLQP / LLQP 考试手册

2026 年 11 月核对 · 事实只取官方页 · 题目与讲解为本站原创

考试是什么样

项目	现行口径	核对
考试形式 / Format	四选一单选、选一个最佳答案，涂答题卡；每个模块 75 分钟 / Multiple choice, one best answer of four, marked on an answer sheet; 75 minutes per module.	2026–11–15
题量与计分 / Questions and scoring	人寿、意外与疾病、分离基金与年金各 35 题按 30 分计；伦理（普通法）25 题按 20 分计；每模块含 5 道不计分 pilot / Life, Accident & Sickness, and Segregated Funds & Annuities: 35 questions each, scored out of 30. Ethics (common law): 25 questions, scored out of 20. Each module includes 5 unscored pilot questions.	2026–11–15
及格线 / Pass mark	每个模块 60% / 60% in each module.	2026–11–15
考场参考资料 / Reference material	只许用 CISRO 发布的 LLQP exam reference material 电子版：Metro Vancouver 与 Prince George 考场发平板，其他考点用电脑；课程资料与笔记都不许带 / Only the CISRO LLQP exam reference material, in electronic form: a tablet in Metro Vancouver and Prince George, a computer elsewhere. No course material or notes.	2026–11–15
考试费 / Fees	每模块 $80；Metro Vancouver 同日四模块套餐 $210；单模块重考 $80；在 Cranbrook、Kelowna、Victoria 考另付考点约 $80 + GST（Prince George 由 Council 直接排考） / $80 per module; $210 for all four modules on one day in Metro Vancouver; $80 to rewrite one module; about $80 + GST extra to the test centre in Cranbrook, Kelowna and Victoria.	2026–11–15
报考资格审核 / Eligibility review	先在 portal 提交 LLQP Eligibility Verification，官网费用页写审核最长 3 个工作日（考生指南 SEPT2025 版写 1 个工作日，以官网为准） / Submit an LLQP Eligibility Verification in the portal first. The fees page says review takes up to 3 business days (the SEPT2025 examinee guide still says 1).	2026–11–15
12 个月窗口 / 12–month window	第一个模块通过起 12 个月内必须拿到牌照，超出窗口的模块要重考；课程完成认证也只有一年有效 / You must hold a licence within 12 months of your first passed module; modules outside the window must be rewritten. Course completion certification is valid for one year.	2026–11–15
重考等待 / Rewrites	考生页与考生指南：前 3 次不及格不设等待，第 4 次不及格后等 1 年并须重修课程。Council 网站上另一份 2025–01 版考试管理政策 PDF 仍写每次间隔 24 小时，两份官方文件不一致，以考生页为准并在报名前再核 / No wait after the first three failed attempts; after the fourth, wait one year and retake the course. A January 2025 Council policy PDF still says 24 hours between attempts; the two official documents disagree.	2026–11–15
出分时间 / Results	Metro Vancouver 考后 3 个工作日、其他考点 5 个工作日，16:30 PT 公布 / By 4:30 p.m. PT, three business days after the exam in Metro Vancouver and five elsewhere.	2026–11–15
考纲权重 / Curriculum	CISRO 考纲给每个模块的能力项权重：评估需求 35%、分析产品 30%、落实推荐 25%、保障期内服务 10%（伦理：合同法律层面 60%、代理人规则 40%）；模块之间没有权重，四个模块	2026–11–15

weights	各自及格 / CISRO weights within each module: assessing needs 35%, analysing products 30%, implementing the recommendation 25%, in-force service 10% (Ethics: legal aspects 60%, agent rules 40%). Modules have no weights against each other; each must be passed on its own.

分数在哪

LLQP 不是一张卷，是四场独立的模块考，每场 75 分钟、各自 60% 及格，模块之间没有权重。下面的条是本站合卷模考里各模块的题量；真正决定分数分布的是每个模块内部的 CISRO 能力项权重——评估客户需求占 35%，比任何一种产品都重，所以每个模块里「客户画像 / 需求分析」那一章都是 P1。 / The LLQP is four separate module exams, 75 minutes each, each passed at 60%; modules carry no weight against each other. Inside each module, CISRO's weights decide where the marks are: assessing the client's needs is 35%, more than any single product, so the client-profile and needs-analysis chapter is P1 in every module.

章	主题	板块	优先级	模考
01	为什么需要寿险 / Why Life Insurance Is Needed: Risk of Death, Financial Impacts, and Four Risk Management Strategies	人寿保险 / Life Insurance	P2 稳住 / Hold steady	3
02	定期寿险 / Term Life Insurance	人寿保险 / Life Insurance	P1 必拿分 / Must score	2
03	终身寿险与 T-100 / Whole Life and Term-100: Dividends, Cash Value, and Non-Forfeiture Benefits	人寿保险 / Life Insurance	P1 必拿分 / Must score	2
04	万能寿险 / Universal Life Insurance: Unbundled Elements, YRT vs. LCOI, Exemption Test, and Common Missteps	人寿保险 / Life Insurance	P1 必拿分 / Must score	2
05	附加条款 / Riders and Supplementary Benefits	人寿保险 / Life Insurance	P2 稳住 / Hold steady	1
06	团体寿险 / Group Life Insurance	人寿保险 / Life Insurance	P3 过一遍 / Skim	1
07	寿险与税 / Taxation of Life Insurance and Tax Planning Strategies	人寿保险 / Life Insurance	P2 稳住 / Hold steady	2
08	企业寿险 / Business Life Insurance: Key Person, Buy-Sell Agreements, and Corporate-Owned Policies	人寿保险 / Life Insurance	P2 稳住 / Hold steady	1
09	投保与核保 / Application and Underwriting	人寿保险 / Life Insurance	P1 必拿分 / Must score	3
10	评估寿险需求 / Assessing the Client's Situation: Determining Life Insurance Needs (Income Replacement vs. Capital Needs Approach)	人寿保险 / Life Insurance	P1 必拿分 / Must score	6
11	提出寿险推荐 / Recommending an Insurance Policy	人寿保险 / Life Insurance	P1 必拿分 / Must score	4

12	寿险保障期内服务 / Ongoing Policy Service	人寿保险 / Life Insurance	P2 稳住 / Hold steady	3
13	A&S 保护什么 / What Accident and Sickness Insurance Protects: Financial Goals and Four Risk Categories for Individuals, Families, and Businesses	意外与疾病 / Accident & Sickness	P2 稳住 / Hold steady	4
14	伤残收入险 / Disability Insurance (DI): Income Replacement, Coordination of Group, Individual, and Government Benefits	意外与疾病 / Accident & Sickness	P1 必拿分 / Must score	3
15	重疾与长期护理 / Critical Illness & Long-Term Care Insurance	意外与疾病 / Accident & Sickness	P1 必拿分 / Must score	3
16	医疗牙科与旅行险 / Extended Health, Dental, and Travel Insurance	意外与疾病 / Accident & Sickness	P2 稳住 / Hold steady	2
17	企业伤残险 / Business Disability Insurance: BOE, Key Person Disability, and Disability Buyout	意外与疾病 / Accident & Sickness	P3 过一遍 / Skim	1
18	A&S 客户画像 / Client Profile: Income, Assets, Existing Coverage, and Gap Analysis	意外与疾病 / Accident & Sickness	P1 必拿分 / Must score	7
19	A&S 推荐、合同与服务 / A&S Recommendation, Contract and Service: Statutory Conditions, Claims and Renewability	意外与疾病 / Accident & Sickness	P1 必拿分 / Must score	9
20	团体福利计划 / Group Benefit Plans: Eligibility, Rating, Co-ordination of Benefits, and ASO	意外与疾病 / Accident & Sickness	P3 过一遍 / Skim	1
21	投资与储蓄基础 / Investment and Savings Basics: Compounding, Registered Accounts, and the FHSA Missing from the Exam Manual	分离基金与年金 / Segregated Funds & Annuities	P2 稳住 / Hold steady	3
22	分离基金 / Segregated Funds: Guarantees, Protection, and How They Really Differ from Mutual Funds	分离基金与年金 / Segregated Funds & Annuities	P1 必拿分 / Must score	5
23	年金 / Annuities: Turning a Lump Sum into Lifetime Income, Annuity Classifications, and Prescribed Taxation	分离基金与年金 / Segregated Funds & Annuities	P1 必拿分 / Must score	3
24	投资者画像与适当性 / Investor Profile: KYC, Risk Tolerance, Risk Capacity, and Suitability, and Why It Carries 35% of This Module	分离基金与年金 / Segregated Funds & Annuities	P1 必拿分 / Must score	7
25	分离基金与年金的推荐 / Segregated Fund and Annuity Recommendation: From Profile to Product, Application, and Reason-Why Letter	分离基金与年金 / Segregated Funds & Annuities	P1 必拿分 / Must score	7
26	分离基金与年金合同 / Segregated Fund (IVIC) and Annuity Contracts: Clause-by-Clause Guarantees and Administration	分离基金与年金 / Segregated Funds & Annuities	P2 稳住 / Hold steady	4
27	团体退休计划 / Group Retirement and Investment Plans: DB vs. DC Responsibilities and Post-CPP Enhancement Planning	分离基金与年金 / Segregated Funds & Annuities	P3 过一遍 / Skim	1

28	寿险的法律框架 / Legal Framework Governing Life Insurance: Which Law BC Actually Uses	伦理与职业实践 / Ethics & Professional Practice	P1 必拿分 / Must score	4
29	保单条款与合同成立 / Insurance Policy Provisions	伦理与职业实践 / Ethics & Professional Practice	P1 必拿分 / Must score	4
30	理赔与给付 / Claims and Payment of Proceeds	伦理与职业实践 / Ethics & Professional Practice	P1 必拿分 / Must score	4
31	保护客户的机构 / Bodies That Protect the Client	伦理与职业实践 / Ethics & Professional Practice	P2 稳住 / Hold steady	3
32	代理人的义务 / Main Responsibilities of Life Insurance Agents	伦理与职业实践 / Ethics & Professional Practice	P1 必拿分 / Must score	5

整场考试一张导图



怎么用这本手册

1. 先做网站上的 32 题诊断，找出红色的章。
2. 读每章讲解前，先看本章那几道「带着读的考题」，自己先答一句，读完再核对。
3. 每章正反两页（双面打印正好一张）：正面是怎么考、陷阱、导图；反面是要点表和自测提问，遮住右两列自测。
4. 做题册里本章的题，错题做背面的变式题。
5. 考前一晚只看冲刺单。

第 1 章 · 为什么需要寿险 / Why Life Insurance Is Needed: Risk of Death, Financial Impacts, and Four Risk Management Strategies

人寿保险 / Life Insurance | P2 稳住 / Hold steady | Why Life Insurance · 模考 3 题

带着这几道题读：单亲或有全职顾家配偶的家庭身故，除了工资中断还会漏算哪项缺口？ / In a family with a single parent or a stay-at-home spouse, what major shortfall besides interrupted salary is commonly overlooked upon death?；面对死亡风险，健康生活方式、动用存款和买寿险分别对应四招中的哪一招？ / When addressing the risk of death, which of the four strategies do a healthy lifestyle, using personal savings, and buying life insurance correspond to?；加拿大没有遗产税，为什么持有升值资产或企业股份的人身故时仍面临大额税单？ / Canada has no estate tax, so why do individuals holding appreciated assets or corporate shares still face substantial tax bills at death?；退休后房贷还清、子女独立，是不是就彻底没有死亡财务风险了？ / Once retired with the mortgage paid off and children self-supporting, is a person completely free of financial impacts of death?

怎么考

- 多维冲击识别题：题干给出一个家庭或企业主的完整背景（如单亲、房贷、未注册升值资产、年幼子女），要求识别身故同时触发哪几类财务冲击，重点考是否漏掉非收入方的照护者损失（loss of caregiver）或视同处置（deemed disposition）税负。 / Multi-dimensional impact identification questions: The question stem provides the comprehensive background of a family or business owner (such as a single parent, mortgage, non-registered appreciated assets, young children) and requires identifying which categories of financial impacts of death are triggered simultaneously, testing whether the candidate overlooks the loss of caregiver for a non-earning party or deemed disposition tax liabilities.
- 风险管理四招匹配题：题干描述客户采取的某项行动（如戒烟、用现有存款预留丧葬费、购买保单）或询问针对死亡风险某招是否可行，考避免（risk avoidance）、减少（risk reduction）、自留（risk retention）与转移（risk transfer）的精确区分与组合使用。 / Four risk management strategies matching questions: The question stem describes an action taken by a client (such as quitting smoking, setting aside existing savings for funeral expenses, or purchasing an insurance policy) or asks whether a specific strategy is feasible for the risk of death, testing the precise distinction and combined application of risk avoidance, risk reduction, risk retention, and risk transfer.
- 视同处置与税务认知题：以客户声称“加拿大没有遗产税所以身故不用交税”或企业主传承合格小型企业股份为背景，测试视同处置（deemed disposition）机制、配偶递延例外以及终身资本利得豁免（LCGE）只能部分抵消而非全免。 / Deemed disposition and tax awareness questions: Using scenarios where a client claims that because Canada has no estate tax, no tax is owed at death, or where a business owner transfers qualified small business corporation shares, testing the deemed disposition mechanism, the spousal rollover exception, and the rule that the Lifetime Capital Gains Exemption (LCGE) only

高频陷阱（看到信号就警觉）

范畴遗漏（只算工资漏算照护） / Category omission (counting lost salary while overlooking lost caregiving)：题干出现全职在家照顾幼童/失能亲属的配偶，或独自抚养未成年子女的单亲家长。 / The question stem features a stay-at-home spouse caring for young children or disabled relatives, or a single parent raising minor children alone.

概念混淆（无遗产税等于无身故税） / Concept confusion (equating no estate tax with no taxes at death)：题干中客户持有升值度假屋、未注册投资组合、企业股权或大额 RRSP/RRIF，且继承人是成年子女而非配偶。 / The question stem features a client holding an appreciated vacation cottage, non-registered investment portfolio, corporate shares, or large RRSP/RRIF balances, with adult children rather than a spouse named as heirs.

机制混淆（把不可规避当成不能降低或不能自留） / Mechanics confusion (treating unavoidability as inability to reduce or retain risk)：题干出现改善生活习惯、增加安全措施，或客户拥有充裕流动资产足以覆盖小额最终开支。 / The question stem mentions improving lifestyle habits, adding workplace safety measures, or a client possessing ample liquid assets to cover small final expenses.

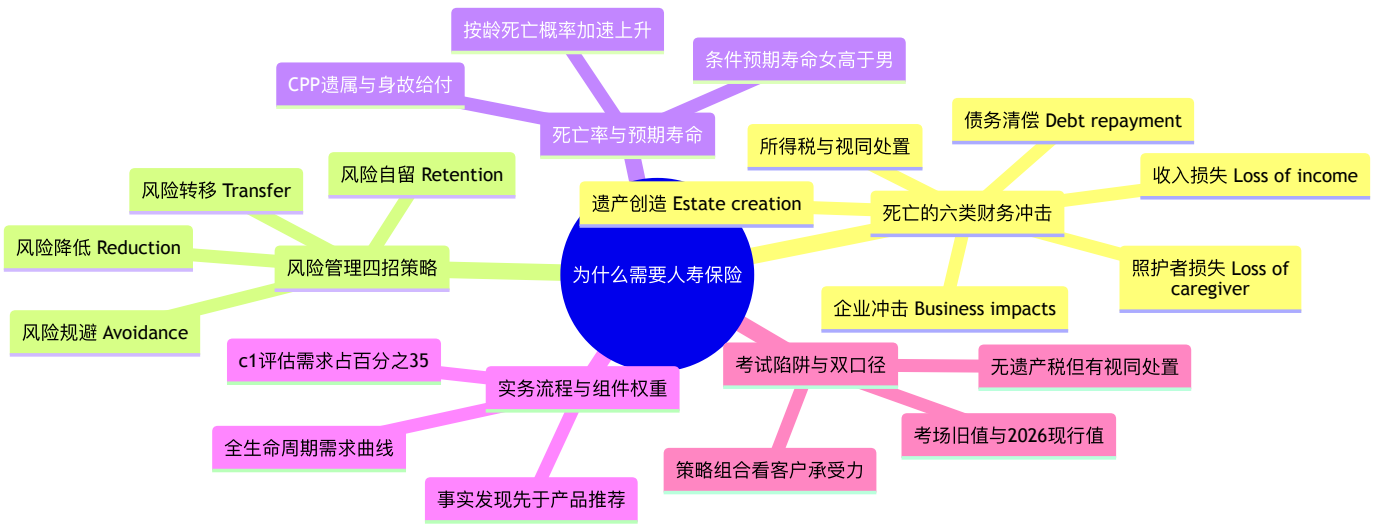
双口径盲套（把政府给付或豁免额当成自动全额免除） / Dual-benchmark blind application (assuming government benefits or exemptions automatically eliminate all liability)：题干提到“预计政府给付足够覆盖全部最终费用”或“因为有 LCGE 所以企业股份传承无需准备税款现金”。 / The question stem mentions expecting government benefits to fully cover all final expenses or assuming corporate shares can be transferred with zero cash for taxes because of the LCGE.

partially offsets capital gains rather than fully eliminating tax.

- 双口径与数据机制题：围绕生命表中的死亡概率（probability of death）与预期寿命（life expectancy）关系、CPP 遗属给付（CPP survivor's pension）与一次性身故给付（CPP death benefit）的考试口径及核定规则出题，考条件期望概念及不盲目套用最高额。 / Dual-benchmark and numerical mechanics questions: Centering on the relationship between probability of death and life expectancy in mortality tables, as well as the exam standard and assessment rules for the CPP survivor's pension and lump-sum CPP death benefit, testing the concept of conditional expectation and avoiding blind application of maximum amounts.
- 实务流程与生命周期配对题：描述客户所处的人生阶段（单身、组建家庭、事业上升、临近退休）或代理人的展业步骤，考先做需求分析（needs analysis）再谈产品、以及不同阶段主导财务冲击的变化。 / Practice process and life cycle matching questions: Describing a client's life stage (single, starting a family, career progression, approaching retirement) or an agent's practice workflow, testing that needs analysis must precede product recommendations, as well as how primary financial impacts change across life stages.

> **性质与流程倒置（把寿险当投资或跳过需求分析直接推产品） / Reversal of nature and process (treating life insurance as an investment or pitching products before needs analysis)**：题干问人寿保险的核心功能是什么，或问代理人确认客户需要转移死亡风险后的紧接下一步行动。 / The question stem asks for the core function of life insurance, or asks for the agent's immediate next step after confirming that the client needs to transfer the risk of death.

导图



第 1 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
死亡的六类财务冲击 / Six financial impacts of death	financial impacts of death	身故财务冲击分为收入损失、照护者损失、债务清偿、所得税、遗产创造、企业冲击六类，需求分析须逐条核对并加总而非单选。 / Financial impacts of death fall into six categories: loss of income, loss of caregiver, debt repayment, income tax, estate creation, and business impacts. Needs analysis must examine and sum each category rather than choosing only one.
照护者损失的独立量化 / Independent quantification of loss of caregiver	loss of caregiver	无工资收入的家庭照护者或独自育儿的单亲家长身故时，遗属须付费雇人替代其育儿或照护劳务，必须作为独立财务缺口计入需求分析。 / When a family caregiver with no earned income or a single parent raising children dies, survivors must pay out of pocket to hire replacement childcare or caregiving services, which must be quantified as an independent financial shortfall in needs analysis.
风险管理四招在死亡风险上的适用性 / Applicability of four risk management strategies to the risk of death	risk management strategies	死亡风险不可规避（avoidance 不适用），健康安全措施只能降低（reduction）而不能消除，严重度超出承受能力的部分须通过人寿保险转移（transfer），可承受部分可自留（retention）。 / The risk of death cannot be avoided (avoidance is inapplicable); health and safety measures reduce but cannot eliminate it; severe losses exceeding personal capacity must be transferred through life insurance, while affordable minor portions can be retained.
死亡概率与预期寿命的区别 / Difference between probability of death and life expectancy	probability of death and life expectancy	死亡概率是某年龄一年内身故的百分比且随年龄非线性加速上升，预期寿命是活到某年龄后的条件平均剩余年数（65岁女性高于男性：考试口径 22.2 年 vs 19.5 年，2023现行数据 22.3 年 vs 19.7 年）。 / Probability of death is the percentage chance of dying within one year at a specific age and increases non-linearly with age. Life expectancy is the conditional average remaining years after reaching a specific age (at age 65, female exceeds male: exam standard 22.2 years vs 19.5 years; 2023 Statistics Canada data 22.3 years vs 19.7 years).
CPP 身故与遗属给付双口径 / Dual benchmarks for CPP death benefit and survivor pension	CPP death benefit and survivor's pension	CPP 一次性身故给付基本额为 $2,500（2025年起符合附加条件最高 $5,000），遗属月给付上限在考试口径 2022 年为 $674.79（65岁以下）/$752.15（65岁及以上）、2026 现行最高额为 $803.54/$904.59，需求分析须按实际资格核定而非盲套最高值。 / The basic lump-sum CPP death benefit is $2,500 (up to $5,000 under qualifying conditions from 2025 onward). The maximum monthly survivor pension under the 2022 exam standard is $674.79 (under 65) / $752.15 (65 and over), whereas the 2026 maximum is $803.54 / $904.59. Needs analysis must assess actual eligibility rather than blindly applying maximum amounts.
视同处置与终身资本利得豁免 / Deemed disposition and Lifetime Capital Gains Exemption	deemed disposition and LCGE	加拿大无联邦或省级遗产税，但身故触发资本财产按公允市值视同处置计税；合格小型企业股份及合格农渔业财产可用 LCGE（考试口径 2022 年 $913,630，2026 上限 $1,275,000）抵消部分利得，超出部分仍须在遗产分配前缴税。 / Canada has no federal or provincial estate tax, but death triggers a deemed disposition of capital property at fair market value for income tax purposes. Qualified small business corporation shares and qualified farm or fishing property may use the LCGE (2022 exam standard $913,630; 2026 ceiling $1,275,000) to offset part of the gain, with the remainder taxed before estate distribution.
CISRO 组件权重与实务面谈顺序 / CISRO competency component weighting and practice workflow sequence	CISRO competency component and needs analysis	c1“评估客户需求与处境”占 Life 模块最大权重 35%（核心计算在 ch10），代理人确认风险需转移后必须先做事实发现面谈与需求分析量化缺口，不得直接跳去推荐产品。 / Component c1 'assesses the client's needs and situation' holds the largest weight in the Life module at 35% (core calculations in ch10). After confirming that risk must be transferred, the agent must first conduct a fact-finding interview and needs analysis to quantify the shortfall before recommending products.
家庭全生命周期的寿险需求演变 / Evolution of life insurance needs across family life stages	life insurance needs across life stages	单身无家属阶段冲击最小，组建家庭与背负房贷期收入与照护缺口达峰值，事业上升与企业主阶段凸显遗产创造与企业冲击，退休后收入损失退场但遗产创造与股权视同处置税负仍在。 / The single stage with no dependents has minimal financial impact; the family formation and mortgage repayment stage sees income and caregiving gaps peak; career progression and business ownership highlight estate creation and business impacts; in retirement, lost earned income fades, but estate creation and share deemed disposition taxes persist.

1972年税制改革与保险核心定位 / 1972 tax reform and core positioning of life insurance	estate creation and risk transfer	1972年加拿大废止联邦遗产税改行视同处置资本利得税制，使保险金“遗产创造”成为补足身故税单与债务缺口的核心工具，人寿保险的本质始终是风险转移而非投资。 / The 1972 Canadian tax reform eliminated the federal estate tax and established capital gains taxation via deemed disposition at death, establishing life insurance estate creation as the primary mechanism to fund terminal tax and debt liabilities. The essence of life insurance remains risk transfer, not investment.

自测提问（康奈尔左栏）

1. 为什么评估身故风险不能只看“少了一份工资”？六类财务冲击分别是哪六项？ / Why must the evaluation of the risk of death look beyond just a lost salary, and what are the six categories of financial impacts of death?
2. 风险管理四招（规避、降低、自留、转移）放进死亡风险场景，哪一招完全不适用、哪三招如何配合？ / When applying the four risk management strategies (avoidance, reduction, retention, transfer) to the risk of death, which strategy is completely inapplicable, and how do the other three work together?
3. 为什么越老死亡概率越高，但65岁预期寿命加上65却大于出生时预期寿命？考场与现行数据差多少？ / Why does the probability of death increase with age, yet life expectancy at age 65 plus 65 exceeds life expectancy at birth, and how do the exam standard and current figures differ?
4. 客户说“加拿大没有遗产税，所以身故不用交税”，如何用1972年税改后的视同处置和LCGE规则反驳？ / When a client says Canada has no estate tax so no tax is owed at death, how do you refute this using the post-1972 deemed disposition rules and the LCGE?
5. Life模块权重最高的c1（35%）怎么分布？确认客户需要转移死亡风险后，代理人的下一步标准动作是什么？ / How is the highest-weighted Life module component c1 (35 percent) distributed, and what is the agent's standard next step after confirming that a client needs to transfer the risk of death?

总结：用三句话总结：身故触发哪六类财务冲击、为什么人寿保险的本质是风险转移而非投资、以及从识别风险到进入第10章需求分析计算的衔接逻辑。 / Summarize in three sentences: which six financial impacts are triggered by death, why the core essence of life insurance is risk transfer rather than investment, and the connecting workflow from identifying risks to conducting needs analysis calculations in Chapter 10.

第 2 章 · 定期寿险 / Term Life Insurance

人寿保险 / Life Insurance　P1 必拿分 / Must score　Term Life · 模考 2 题

带着这几道题读：持有三年的可转换定期险转成终身险后，两年不可抗辩期和自杀除外期会重新起算吗？ / If a convertible term policy held for three years is converted to permanent insurance, do the two-year incontestability and suicide exclusion clocks restart?；原龄转换的后续保费比现龄转换低，为什么综合比较时未必更省钱？ / Given that ongoing premiums under original-age conversion are lower than under attained-age conversion, why is it not necessarily cheaper overall?；客户体检查出异常准备进一步检查时，手里的可转换定期险应该等确诊后再处理吗？ / When medical tests reveal abnormalities requiring further investigation, should a client wait for a diagnosis before exercising conversion on a term policy?；夫妻曾共保联合首身故定期险，离婚后非投保人一方能直接把受益人改成新伴侣吗？ / If spouses shared a joint first-to-die term policy, can the non-policyholder spouse directly change the beneficiary to a new partner after divorce?

怎么考

- 合同权利辨析题：给出被保险人健康恶化或保单即将到期的情境，测试能否区分续保权（renewability，到期免核保继续买定期险）与转换权（convertibility，在约定年龄上限前免核保换成永久险）这两项各自独立的合同权利。 / Contractual rights distinction questions: Presenting scenarios where the life insured's health deteriorates or the policy is nearing expiry, testing whether candidates can distinguish between renewability (continuing term coverage at expiry without proof of insurability) and convertibility (exchanging for permanent coverage before a specified maximum age without proof of insurability) as two completely separate contractual rights.
- 转换法律后果题：给出持有多年的可转换定期险在行使转换权后的理赔或撤单争议，测试转换属于原合同权利延续而非退旧买新——免交可保性证明（proof of insurability），且不可抗辩期（incontestability period）与自杀除外条款（suicide exclusion clause）的两年时钟沿用原定期险签发日。 / Legal consequences of conversion questions: Presenting claim or policy cancellation disputes after exercising conversion on a convertible term policy held for several years, testing that conversion represents the continuation of existing contractual rights rather than cancelling and reissuing—requiring no proof of insurability, and with the two-year clocks for the incontestability period and suicide exclusion clause running continuously from the original term policy issue date.
- 转换与续保定价比较题：对比现龄转换（attained-age conversion）与原龄转换（original-age conversion），或对比保证费率续保（renewable with guaranteed rates）与重新核保续保（re-entry term），测试是否理解原龄转换需补缴保费差额及可能利息、重新核保续保对投保人属于单向保护。 / Conversion and renewal pricing comparison questions: Comparing attained-age conversion with original-age conversion, or comparing renewability with guaranteed rates with re-entry term, testing whether candidates understand that original-age conversion requires paying the difference in premiums plus possible interest, and

高频陷阱（看到信号就警觉）

混淆续保权与转换权 / Confusing renewability with convertibility：题干出现 at expiry / continue temporary coverage 指向续保权（renewability）；出现 permanent coverage / whole life / Term 100 before a maximum age 指向转换权（convertibility）。 / The question stem mentions 'at expiry' or 'continue temporary coverage' pointing to renewability; mentions 'permanent coverage', 'whole life', or 'Term 100 before a maximum age' pointing to convertibility.

误认转换会重置两年时钟 / Assuming conversion resets the two-year clocks：题干给出原定期险已持有满三年或五年、或还在两年窗口内，询问转换后保险公司能否以转换时未告知体检异常拒赔，或询问自杀除外期从何时起算。 / The question stem notes that the original term policy has been in force for three or five years, or remains within the two-year window, and asks whether the insurer can deny a claim for undisclosed medical abnormalities at conversion, or when the suicide exclusion period starts.

盲信原龄转换必然更划算 / Blindly assuming original-age conversion is always more cost-effective：题干比较 attained-age conversion 与 original-age / retroactive conversion，选项出现 always results in lower total outlay 或 requires no lump-sum adjustment。 / The question stem compares attained-age conversion with original-age or retroactive conversion, and options include 'always results in lower total outlay' or 'requires no lump-sum adjustment'.

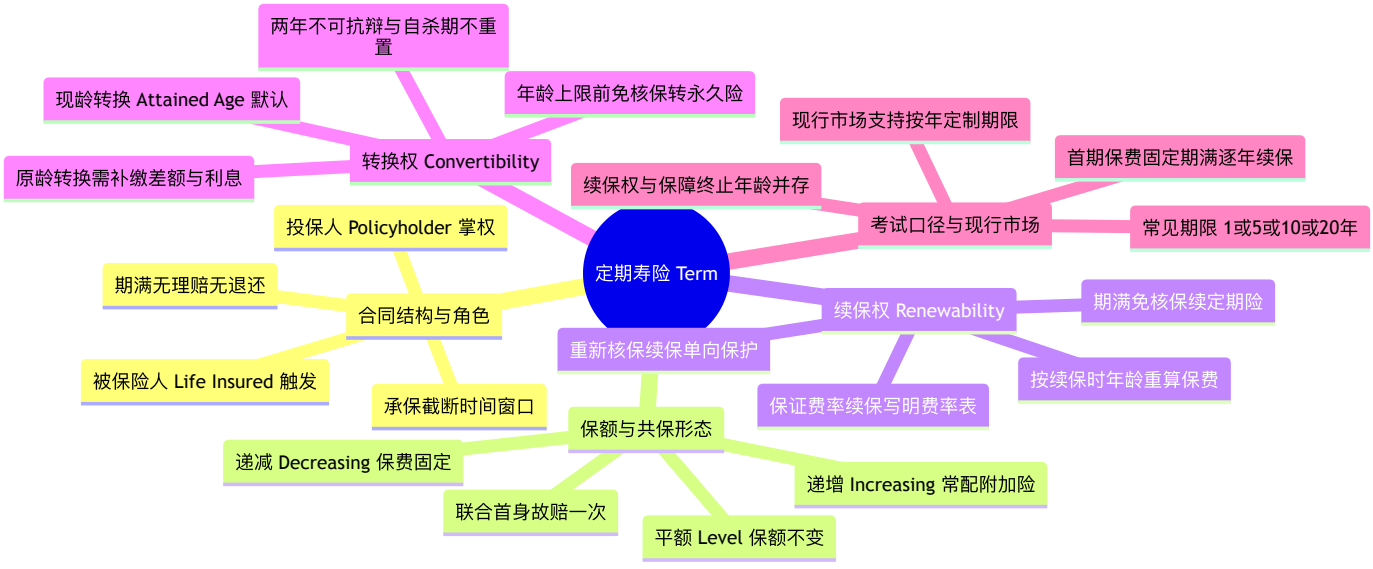
误认递减定期险保费随保额递减 / Assuming decreasing term premiums decrease alongside coverage：题干出现 decreasing term policy covering a mortgage 或对比 lender mortgage insurance 与 individual term policy，询问保费走势、受益人归属或保单控制权。 / The question stem features a decreasing term policy covering a mortgage or compares lender mortgage insurance with an individual term policy, asking about premium trends, beneficiary rights, or policy ownership.

that re-entry term provides one-way protection for the policyholder.

- 保额形态与负债周期匹配题：结合剩余按揭年限、子女抚养期或共同借款人场景，测试平额（level）、递减（decreasing）、递增（increasing）定期险及联合首身故（joint first-to-die）的保额、保费特征，以及贷款人按揭寿险与个人定期险在受益人和可携带性上的差异。 / Coverage structure and debt liability matching questions: Combining remaining mortgage terms, child dependency periods, or co-borrower scenarios, testing the coverage and premium characteristics of level, decreasing, and increasing term insurance, as well as joint first-to-die coverage, along with the differences between lender mortgage insurance and individual term policies regarding beneficiaries and portability.
- 保单权利归属与双口径边界题：测试离婚或家庭变动下联合首身故保单的变更权归属（取决于投保人 policyholder 身份及不可撤销受益人、质押或法院命令限制），以及考试口径固定期限档位（1/5/10/20 年）与现行按年定制、合同具体转换截止年龄的区分。 / Policy rights ownership and dual-benchmark boundary questions: Testing policy change rights ownership for joint first-to-die policies upon divorce or family changes (determined by policyholder status and subject to irrevocable beneficiary, collateral assignment, or court order restrictions), as well as distinguishing between exam-standard fixed terms (1, 5, 10, 20 years) and modern annually customized terms, along with specific contractual maximum conversion ages.

混淆被保险人身份与投保人控制权 / Confusing life insured status with policyholder control：题干出现 joint first-to-die policy 与 divorce / separation / changing the beneficiary，且指出保单最初由其中一方单独作为 policyholder 投保。 / The question stem features a joint first-to-die policy alongside divorce, separation, or changing the beneficiary, and indicates the policy was originally taken out by one party alone as policyholder.

导图



第 2 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
定期寿险的核心给付条件 / Core payout condition of term life insurance	Term life insurance / Death benefit	仅在约定期限（term）内被保险人（life insured）身故时支付身故给付（death benefit），期满未发生理赔则合同终止且无任何现金价值（cash value）退还。 / A death benefit is paid only if the life insured dies within the specified term; if the term expires without a claim, the contract terminates with no refund or cash value whatsoever.
投保人与被保险人的权利分离 / Separation of rights between policyholder and life insured	Policyholder vs. Life insured	投保人（policyholder）与被保险人（life insured）未必是同一人，行使保单变更、解约或转让权取决于投保人身份，且须受不可撤销受益人、质押及法院命令限制。 / The policyholder and the life insured are not necessarily the same person; exercising rights to alter, surrender, or assign the policy belongs exclusively to the policyholder, subject to restrictions from irrevocable beneficiaries, collateral assignments, or court orders.
联合首身故定期险的赔付机制 / Payout mechanics of joint first-to-die term insurance	Joint first-to-die	联合首身故（joint first-to-die）保单以两人生命共保同一份保额，任一人先身故即赔付一次，因保险公司只承担赔一次的风险故保费低于两张独立个人单。 / A joint first-to-die policy covers two lives under a single coverage amount and pays out once upon the first death of either insured; because the insurer only assumes the risk of a single payout, the premium is lower than purchasing two separate individual policies.
续保权与转换权的独立性 / Independence of renewability and convertibility	Renewability vs. Convertibility	续保权（renewability）是期满免核保按新年龄费率继续买定期险，转换权（convertibility）是在约定年龄上限前免核保换成永久险，两者是各自独立的合同权利。 / Renewability allows continuing term insurance upon expiry without proof of insurability at attained-age rates, whereas convertibility allows exchanging for permanent insurance before a contractual maximum age without proof of insurability; they are completely independent contractual rights.
转换权对两年时钟的延续效力 / Continuation of two-year statutory clocks upon conversion	Incontestability period & Suicide exclusion clause	行使转换权免交可保性证明（proof of insurability），且不可抗辩期（incontestability period）与自杀除外条款（suicide exclusion clause）的两年期限沿用原定期险签发日计算，不因转换而清零重算。 / Exercising convertibility requires no proof of insurability, and the two-year statutory clocks for the incontestability period and suicide exclusion clause continue running from the original term policy issue date rather than resetting upon conversion.
保证费率续保与重新核保续保 / Renewable with guaranteed rates versus re-entry term	Renewable with guaranteed rates & Re-entry term	保证费率续保在签发时已锁定续保费率表，而重新核保续保（re-entry term）允许期满健康达标者享受更低费率，即使核保未过或拒绝核保仍可按保证费率表续保。 / Policies renewable with guaranteed rates lock in a contractual renewal schedule at issue, whereas re-entry term allows policyholders in good health at expiry to qualify for lower preferred rates, while retaining the right to renew at guaranteed rates if they fail or decline underwriting.
现龄转换与原龄转换的定价差异 / Pricing differences between attained-age and original-age conversion	Attained-age conversion vs. Original-age conversion	现龄转换按转换当时的年龄计算永久险保费且为市场默认设计；原龄转换（original-age / retroactive conversion）按投保定期险时的年龄计费，但前期保费较高且转换时须一次性补缴保费差额或现金价值差额及可能利息。 / Attained-age conversion prices permanent insurance using the age at conversion and represents the standard market design; original-age or retroactive conversion prices permanent coverage at the original issue age, but charges higher initial term premiums and requires a lump-sum payment of back premium or cash value differences plus possible interest upon conversion.
三种保额形态与贷款人按揭险区别 / Three coverage structures and distinctions from lender mortgage insurance	Level / Decreasing / Increasing term	递减定期险（decreasing term）保额随时间下降但保费通常全程不变；个人定期险由投保人自定受益人且可携带，而贷款机构的按揭寿险赔款固定付给贷款人且不可携带。 / In decreasing term insurance, coverage decreases over time while premiums typically remain level throughout; individual term insurance allows policyholders to designate beneficiaries and remains fully portable, whereas lender mortgage insurance pays directly to the lender and is non-portable.
期限档位与转换年龄上限的双口径规则 / Dual-benchmark rules for term lengths and maximum conversion ages	Standard term lengths & Maximum conversion age	考试口径列举 1/5/10/20 年或至 60 岁等行业惯例档位并按题干给定年龄计算转换上限，而现行市场已有按年定制（如 17 年）及各保司特定转换截止年龄（如 69 岁生日后 6 个月内、70 岁或 71 岁生日前）。 / Exam conventions reference traditional industry bands such as 1, 5, 10, or 20 years or to age 60 and calculate conversion limits strictly from figures given in the scenario, whereas modern market practice offers annual custom terms (such as 17 years) and carrier-specific conversion cutoffs (such as within 6 months of age 69, or before age 70 or 71).

自测提问（康奈尔左栏）

1. 为什么说续保权（renewability）和转换权（convertibility）是两项完全独立的合同权利？ / Why are renewability and convertibility two completely separate contractual rights?
2. 行使转换权时，不可抗辩期与自杀除外条款的「两年时钟」如何计算？ / When exercising convertibility, how are the two-year clocks calculated for the incontestability period and suicide exclusion clause?
3. 原龄转换（original-age conversion）转换后保费更低，为什么未必比现龄转换更划算？ / Original-age conversion yields lower ongoing premiums after conversion, so why is it not necessarily more cost-effective than attained-age conversion?
4. 递减定期险（decreasing term）的保额逐年下降，它的保费在合同期内怎么变化？ / The death benefit of decreasing term insurance decreases annually, so how does its premium change over the contract term?
5. 离婚后处理联合首身故（joint first-to-die）保单，为什么不能直接推定双方都有变更权？ / When handling a joint first-to-die policy after a divorce, why cannot both parties be presumed to hold policy change rights?

总结：用三句话总结定期寿险的「两大免核保开关（续保与转换）」「两条转换铁律（免核保＋两年时钟沿用原签发日）」以及「三笔原龄转换成本账」。 / In three sentences, summarize the two guaranteed insurability switches of term life insurance (renewability and convertibility), the two fundamental rules of conversion (no proof of insurability and two-year clocks continuing from original issue date), and the three cost components of original-age conversion.

第 3 章 · 终身寿险与 T–100 / Whole Life and Term–100: Dividends, Cash Value, and Non–Forfeiture Benefits

人寿保险 / Life Insurance　P1 必拿分 / Must score　Whole Life & T–100 · 模考 2 题

带着这几道题读：客户健康恶化但想增加终身保额，选哪种红利去向可以免核保？ / If a client's health deteriorates but they want to increase lifetime coverage, which dividend option allows them to do so without medical underwriting?；投保人不想再交保费但想保住原保额，该选哪种不丧失利益选项？ / If a policyholder wants to stop paying premiums permanently while keeping the full original face amount, which non–forfeiture option should they choose?；为什么保费抵消演示不能当成合同保证？分红率下降会怎样？ / Why can a premium offset illustration never be treated as a contractual guarantee, and what happens when the dividend scale falls?；只需要在身故时给慈善机构留一笔确定金额且不需提现，选什么最划算？ / If a client solely wants to leave a fixed amount to charity upon death and needs no living cash access, which product is most cost–effective?

怎么考

- 分红机制与红利选项辨析题：给出客户健康恶化但想增加终身保额、或误以为分红是合同承诺的固定回报的情景，考查参与分红（participating, par）的董事会自由裁量属性及购买增额已缴清保险（paid–up additions, PUA）免核保的核心优势。 / Dividend mechanics and dividend option distinction questions: Presenting scenarios where a client's health deteriorates but they wish to increase lifetime coverage, or mistakenly believe dividends are contractually promised fixed returns, testing the board discretion nature of participating (par) policies and the core advantage of purchasing paid–up additions (PUA) without medical underwriting.
- 现金退保价值与保单贷款计算题：给出保单现金退保价值（cash surrender value, CSV）、最高贷款比例（考试口径常见例为 90%）及未偿还贷款本息，考查受让人或受益人在退保或被保险人身故时实际能拿到的净额。 / Cash surrender value and policy loan calculation questions: Providing a policy's cash surrender value (CSV), the maximum loan percentage (the standard exam benchmark commonly cites 90%), and outstanding loan principal and interest, testing the net amount an assignee or beneficiary actually receives upon surrender or the death of the life insured.
- 停缴保费与不丧失利益四选一情景题：描述投保人停止缴费后的不同诉求（如不想再缴费但想终身保留小额保障，或想在有限期内保住原始保额），考查现金退保、自动垫缴保费（automatic premium loan, APL）、减额已缴清保险（reduced paid–up insurance）与展期定期保险（extended term insurance）的精准匹配。 / Premium cessation and four non–forfeiture option scenario questions: Describing different policyholder objectives after stopping premium payments (such as wanting to permanently stop paying while maintaining a reduced lifetime benefit, or wanting to keep the full original face amount for a limited period), testing the precise matching among cash surrender, automatic premium loan (APL), reduced paid–up insurance, and extended term insurance.

高频陷阱（看到信号就警觉）

混淆合同参与权与分红金额 / Confusing contractual participation rights with dividend amounts：题干或选项出现 guaranteed dividend、fixed annual return 或将分红率等同于累积生息账户存款利率的表述。 / The question stem or options include terms like guaranteed dividend, fixed annual return, or equate the dividend scale interest rate with a deposit rate on an accumulate–at–interest account.

减额缴清与展期定期张冠李戴 / Mixing up reduced paid–up insurance and extended term insurance：题干强调客户停缴后希望 maintain the original face amount（选展期定期）还是 maintain permanent lifetime coverage（选减额已缴清）。 / The question stem emphasizes whether the client stopping premiums wishes to maintain the original face amount (extended term) or maintain permanent lifetime coverage (reduced paid–up).

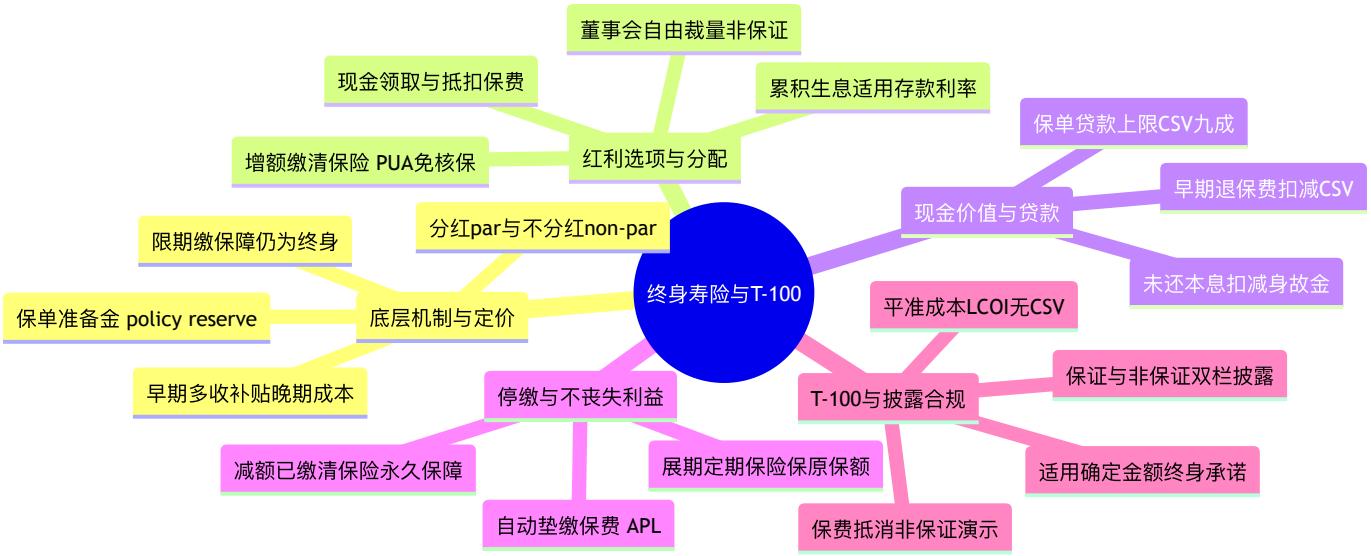
把 PUA 当成需核保的附加险 / Treating paid–up additions as an underwritten rider：题干提到被保险人健康恶化（health has deteriorated）但仍想利用保单红利增加永久保额。 / The question stem mentions that the life insured's health has deteriorated, yet they still wish to use policy dividends to increase permanent coverage.

T–100 失效套用终身寿险缓冲 / Applying whole life lapse buffers to Term–100：题干明确保单为 Term–100（T–100）且投保人超过宽限期未缴保费，询问能否用保单价值垫缴或转为缴清保单。 / The question stem identifies the policy as Term–100 (T–100) and states the policyholder missed the premium beyond the grace period, asking if policy value can advance the premium or convert to paid–up coverage.

- T-100 与终身寿险的产品定位对比题：给出遗产税覆盖、确定金额慈善捐赠或需要生前应急提现的客户案例，考查 T-100（Term-100）平准保险成本（level cost of insurance, LCOI）、通常无现金退保价值及失效后无不丧失利益缓冲的特征。 / Product positioning comparison questions between Term-100 and whole life insurance: Presenting client cases involving estate tax coverage, fixed-amount charitable donations, or emergency living cash access needs, testing Term-100 (T-100) features including level cost of insurance (LCOI), the typical absence of cash surrender value, and the lack of non-forfeiture benefit buffers upon lapse.
- 保费抵消（premium offset）与双栏披露合规题：还原利率下行导致预计停缴年限顺延的纠纷场景，考查消失保费（vanishing premium）的非保证本质以及保单演示件（illustration）与年度对账单并列展示保证栏与非保证栏的合规要求。 / Premium offset and dual-column disclosure compliance questions: Reconstructing dispute scenarios where falling interest rates push back projected premium-stop years, testing the non-guaranteed nature of vanishing premiums and the compliance requirement that policy illustrations and annual statements display guaranteed and non-guaranteed columns side by side.

> **保费抵消演示当成合同承诺 / Treating premium offset illustrations as contractual promises**：题干出现 premium offset 或 vanishing premium，且提及宏观利率与分红率下调后保司要求继续缴费。 / The question stem mentions premium offset or vanishing premium, noting that following declines in market interest rates and dividend scales, the insurer requires ongoing premium payments.

导图



第 3 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
保单准备金与平准保费机制 / Policy reserves and level premium mechanics	policy reserve	终身寿险通过早期多收保费建立保单准备金并连本带息滚存，用于补贴老年飙升的死亡成本，从而维持终身保费固定不变。 / Whole life insurance builds a policy reserve by collecting more premium than needed in early years, compounding with interest to subsidize surging mortality costs in old age, thereby keeping lifetime premiums level and fixed.
分红保单的权利与裁量边界 / Rights and discretionary boundaries of participating policies	participating (par) policy	参与盈余分配是写进合同的权利，但每年是否分红及分多少完全由保险公司董事会自行裁定，并不保证；同等保障下不分红（non-par）保费通常更低。 / Participating in surplus distributions is a contractual right, but whether a dividend is declared and its amount are at the sole discretion of the insurer's board of directors and are not guaranteed; for the same coverage, non-participating premiums are typically lower.
限期缴终身寿险的期限拆解 / Structure of limited payment whole life insurance	limited payment whole life	限期缴（如 10 年缴或 20 年缴）仅缩短缴费期以消除长寿缴费风险，保障期仍然是终身，代价是单期保费显著高于终身缴。 / Limited-payment policies (such as 10-pay or 20-pay) shorten the premium-paying period to eliminate the risk of outliving one's ability to pay, while coverage remains for life, at the cost of significantly higher periodic premiums than life-pay policies.
增额已缴清保险（PUA）机制 / Paid-up additions (PUA) mechanics	paid-up additions (PUA)	将当年宣布的红利作为趸缴保费购买无需核保的小额已缴清永久险，永久增加总保额和未来现金价值，考试口径称超过 90% 的分红保单采用此选项。 / Using declared annual dividends as single premiums to purchase small amounts of paid-up permanent insurance without medical underwriting permanently increases both the total death benefit and future cash values; the exam benchmark states that over 90% of participating policies select this option.
分红率与累积生息利率的区别 / Distinction between dividend scale interest rate and accumulate-at-interest deposit rate	dividend scale interest rate	分红率只是精算师计算红利表的内部假设参数，红利宣布后若选择留存累积生息（accumulate at interest），适用的是保司另定的存款利率，通常显著低于分红率。 / The dividend scale interest rate is merely an internal actuarial assumption used to calculate dividend scales; if declared dividends are left to accumulate at interest, a separate deposit rate set by the insurer applies, which is typically significantly lower than the dividend scale rate.
现金退保价值与保单贷款上限 / Cash surrender value and policy loan limits	cash surrender value (CSV) & policy loan	早期由于退保费用（surrender charge）扣减，CSV 常显示为 $0；CSV 累积后可申请保单贷款（考试口径常见上限为 CSV 的 90%），未还本息会同时从退保金和身故给付中扣除。 / Early cash surrender value (CSV) often reflects $0 due to surrender charges; once accumulated, policyholders can borrow against it (the exam benchmark commonly cites 90% of CSV as the maximum loan limit), and unpaid principal plus interest are deducted from both surrender proceeds and death benefits.
不丧失利益四选项的适用区分 / Distinguishing the four non-forfeiture benefit options	non-forfeiture benefits	有足够 CSV 时，APL 自动垫缴保费防失效；退保直接领走 CSV；减额已缴清用 CSV 买保额缩水的终身险；展期定期用 CSV 按原保额买一段有限期限的定期险。 / When sufficient CSV exists, an APL automatically advances premiums to prevent policy lapse; surrendering pays out the net CSV directly; reduced paid-up insurance uses CSV to buy reduced lifetime coverage; extended term insurance uses CSV to buy term coverage for the full original face amount for a limited duration.
T-100 寿险的定价与失效后果 / Term-100 pricing and lapse consequences	Term-100 (T-100)	按平准保险成本定价、保费缴至 100 岁封顶并覆盖终身，但通常不建立 CSV 和不丧失利益，超过宽限期未缴费即失效，适合不需要现金价值弹性的确定金额终身承诺。 / Priced using a level cost of insurance with premiums capped at age 100 for lifetime coverage, Term-100 typically builds no CSV or non-forfeiture benefits, lapsing outright if premiums remain unpaid past the grace period; it suits fixed-amount permanent commitments needing no cash-value flexibility.
保费抵消风险与双栏披露规则 / Premium offset risks and dual-column disclosure rules	premium offset / vanishing premium	保费抵消依赖非保证的分红假设，分红率下行会导致停缴年限顺延；监管要求保单演示件（illustration）与年度对账单必须并列展示保证栏与非保证栏。 / Premium offset relies on non-guaranteed dividend assumptions, meaning declining dividend scales will postpone the projected premium-stop year; regulators require policy illustrations and annual statements to present guaranteed and non-guaranteed columns side by side.

非年缴保费频率系数的产品差异 / Modal factors across payment frequencies and product types	modal factor	定期险与终身寿险采用月缴等非年缴方式时适用缴费频率系数（考试口径示例月缴年化总额高于年缴约 6%），而万能寿险（UL）通常没有该系数。 / Term and whole life policies apply a modal factor for non–annual payments (the exam benchmark notes annualized monthly premiums total roughly 6% more than annual premiums), whereas universal life (UL) typically has no modal factor.

自测提问（康奈尔左栏）

1. 终身寿险为什么在年轻时要多收保费？保单准备金和现金退保价值是什么关系？ / Why does whole life insurance collect higher premiums at younger ages, and what is the relationship between policy reserves and cash surrender value?
2. 参与分红（par）保单的合同权利和董事会自由裁量权分别指什么？分红率等于客户存款回报率吗？ / What do contractual participation rights and board discretion mean in a participating policy, and does the dividend scale interest rate equal a client deposit return?
3. 红利的四种核心去向是什么？为什么健康变差的人最适合选购买增额已缴清保险（PUA）？ / What are the four core dividend options, and why is purchasing paid–up additions (PUA) best suited for a client whose health has deteriorated?
4. 停缴保费后，自动垫缴（APL）、减额已缴清和展期定期保险各自解决什么核心诉求？ / When premium payments stop, what core objectives do automatic premium loans (APL), reduced paid–up insurance, and extended term insurance address?
5. T–100 与终身寿险在现金价值、保费水平和失效后果上有什么本质差异？适用什么场景？ / What fundamental differences exist between Term–100 and whole life regarding cash value, premium levels, and lapse consequences, and what scenarios fit each?

总结：请用三句话总结终身寿险通过早期准备金衍生出的现金价值、分红与不丧失利益机制，并对比 T–100 放弃现金价值换取低保费终身保障的定位边界。 / In three sentences, summarize how whole life insurance derives cash values, dividends, and non–forfeiture options from early policy reserves, and contrast this with Term–100 sacrificing cash value to provide low–cost permanent coverage.

第 4 章 · 万能寿险 / Universal Life Insurance: Unbundled Elements, YRT vs. LCOI, Exemption Test, and Common Missteps

人寿保险 / Life Insurance　P1 必拿分 / Must score　Universal Life · 模考 2 题

带着这几道题读：哪些行为组合最容易让万能寿险账户价值耗尽而失效？ / Which combination of client actions is most likely to deplete a universal life account value and cause a policy lapse?；2016年及以前签发的旧保单申请变更前为什么要先查代次？ / Why must the policy generation be verified before applying for changes on a grandfathered policy issued on or before December 31, 2016?；打算终身持有且预算固定的客户，选YRT还是LCOI更安全？ / For a client intending lifetime holding with a fixed budget, is YRT or LCOI the safer choice?；想动用保单现金价值又不触发当期税务处置，该选哪种借款路径？ / Which borrowing route accesses policy cash value without triggering an immediate tax disposition?；万能寿险改成按月缴费，全年累计保费会不会因为按期系数变贵？ / If universal life premiums are switched to monthly payments, does the annualized total premium increase due to a modal factor?

怎么考

- 三要素拆分与良性循环推导题：给出保费缴入、账户价值变化与死亡给付方式，考察保费税（premium tax）、保险成本（COI）、净风险保额（NAAR）与累积账户（accumulating fund）之间的扣费先后顺序及因果链条。 / Unbundled three elements and virtuous circle deduction questions: Presenting premium deposits, account value fluctuations, and death benefit options, testing the sequential deduction order and causal chain among premium tax, cost of insurance (COI), net amount at risk (NAAR), and the accumulating fund.
- YRT 与 LCOI 成本曲线匹配题：给出客户的持有期限（如短中期 10–15 年或终身持有）、预算及现金价值积累诉求，测试该选择逐年更新定期成本（YRT）还是平准保险成本（LCOI），以及长期只缴最低保费配合 YRT 导致保单枯竭的机制。 / YRT versus LCOI cost curve matching questions: Providing a client's holding horizon (such as short-to-medium term of 10 to 15 years or lifetime holding), budget, and cash value accumulation goals, testing whether to recommend yearly renewable term (YRT) or level cost of insurance (LCOI), as well as the mechanics of policy depletion caused by long-term minimum funding under YRT.
- 平额与平额加账户价值对比题：通过对比受益人最终所得与每月扣费高低，考察净风险保额（NAAR）在不同身故给付方式下是否随账户价值增长而缩减，识别「良性循环」在何种给付方式下生效。 / Level versus level plus account value comparison questions: Comparing the beneficiary's net payout with monthly deduction amounts, testing whether the net amount at risk (NAAR) decreases as account value grows under different death benefit options, and identifying under which option the virtuous circle takes effect.
- 免税测试与存量保单变更风险题：设置客户超额缴费或持 2016 年及以前签发的旧保单申请增额、转换、更换被保险人的场景，考察最高缴费上限（maximum funded）、免税测试（exemption test）后果及 2017 年 1 月 1 日代次（G1/G2/G3）降级风险。 / Exemption test and existing

高频陷阱（看到信号就警觉）

期缴溢价假定陷阱 / Modal factor premium surcharge assumption trap：题干讨论万能寿险（UL）的月缴、季缴或半年缴与年缴保费总额差异，或要求计算期缴附加费。 / The question stem discusses the difference in annualized total premiums between monthly, quarterly, or semi-annual payments and annual payments in universal life (UL), or asks to calculate a modal surcharge.

YRT前期低价幻觉 / Illusion of low initial YRT pricing：题干同时出现「打算持有至终身/高龄」「选择 YRT 成本结构」以及「长期按最低缴费（minimally funded）支付」。 / The question stem simultaneously mentions intending to hold the policy for life or into old age, selecting a YRT cost structure, and paying only minimum funding over the long term.

NAAR与给付方式倒置 / Inverting NAAR and death benefit options：题干指定死亡给付方式为「平额加账户价值（level death benefit plus account value）」，并询问账户增值对当期 COI 扣费或 NAAR 的影响。 / The question stem specifies the death benefit option as level death benefit plus account value and asks about the impact of account growth on current COI charges or NAAR.

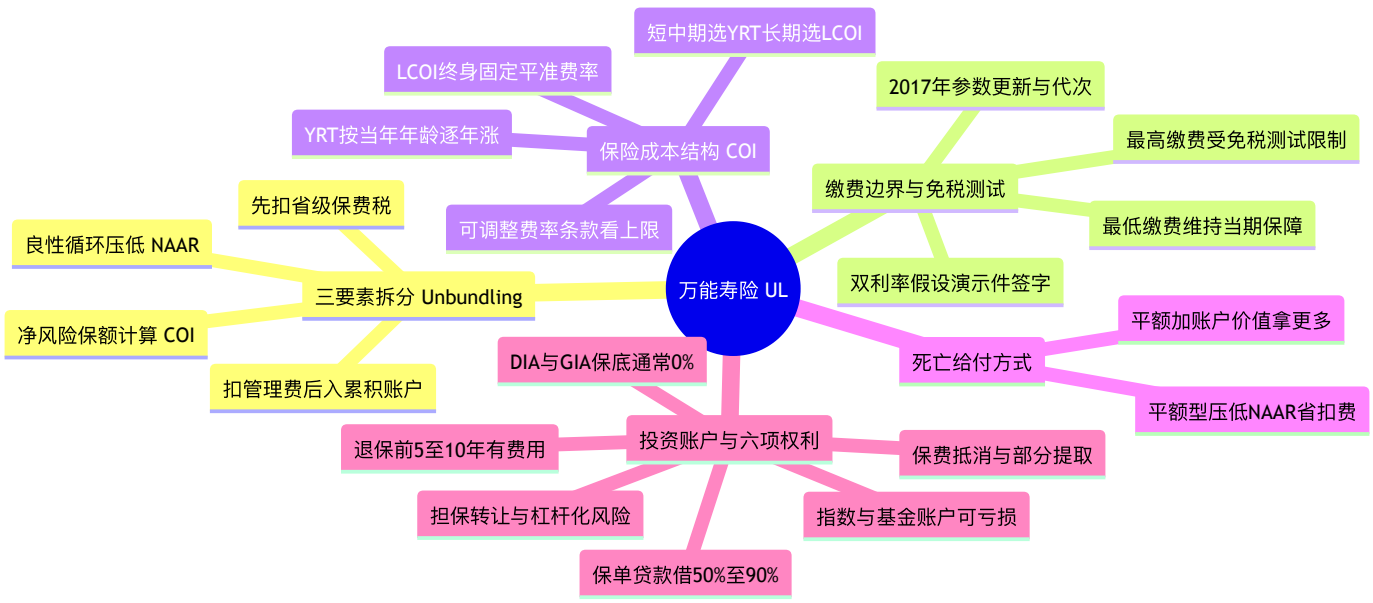
老客户增额免核保误区 / Assuming face amount increases for existing clients require no underwriting：题干出现「现有保单持有人因家庭或负债变化申请提高保额」或「对 2016 年及以前签发的保单进行重大变更」。 / The question stem mentions an existing policyholder applying to increase coverage due to family or debt changes, or making major changes to a policy issued on or before December 31, 2016.

policy change risk questions: Setting scenarios where a client makes excess deposits or requests a face amount increase, conversion, or life insured change on a grandfathered policy issued on or before December 31, 2016, testing maximum funding limits, exemption test consequences, and the risk of policy generation (G1/G2/G3) demotion after January 1, 2017.

- 累积账户六项权利与融资对比题：设置客户急需资金周转或规划退休现金流的场景，辨析部分提取、保费抵消、保单贷款（50%–90% 限额）、担保转让（collateral assignment）与杠杆化（leveraging）在税务处置、身故给付扣减及银行追偿上的差异。 / Accumulating fund six rights and financing comparison questions: Presenting scenarios where a client requires emergency liquidity or plans retirement cash flow, distinguishing among partial withdrawals, premium offset, policy loans (50% to 90% limit), collateral assignment, and leveraging regarding tax disposition, death benefit deductions, and lender recourse.

杠杆化与担保转让混淆 / Confusing leveraging with collateral assignment：题干涉及「动用累积账户价值获取现金流」，对比向保司借钱与向银行抵押借钱的税务后果、利息偿还方式及市场下跌时的强平风险。 / The question stem involves accessing accumulating fund values for cash flow, contrasting the tax treatment, interest repayment mechanics, and forced liquidation risks between insurer policy loans and third-party bank collateral assignment loans.

导图



第 4 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
三要素拆分与保费入账顺序 / Unbundled elements and premium deposit sequence	unbundling / accumulating fund	客户缴入保费后先按整笔保费扣除省级保费税，剩余进入累积账户，再从中按月或按年扣除保险成本（COI）与管理费，余额按所选投资账户滚动增值。 / When a premium is deposited, provincial premium tax is deducted from the gross premium first, the remainder enters the accumulating fund, monthly or annual cost of insurance (COI) and administration fees are deducted from it, and the remaining balance compounds in the selected investment accounts.
净风险保额与良性循环 / Net amount at risk and the virtuous circle	net amount at risk (NAAR)	净风险保额（NAAR）等于身故给付减去账户价值，是保险公司计算死亡风险扣费（COI）的唯一基础；平额给付下账户价值越高，NAAR 越小、扣费越低。 / Net amount at risk (NAAR) equals the death benefit minus the account value and is the sole basis for calculating mortality deductions (COI); under a level death benefit, a higher account value results in a lower NAAR and reduced deductions.
最低缴费与最高缴费边界 / Minimum and maximum funding boundaries	minimally funded / maximum funded	最低缴费仅够覆盖当期成本与费用（考试口径常以维持至 100 岁为设计目标但不保证终身）；最高缴费受免税测试上限约束，防止保单沦为纯免税储蓄工具。 / Minimum funding covers only current costs and charges (often designed to age 100 for exam purposes but not guaranteed for life); maximum funding is capped by the exemption test to prevent the policy from functioning solely as a tax shelter.
免税测试与 2017 代次分水岭 / Exemption test and 2017 generation watershed	exemption test / G1/G2/G3 policy classification	每保单周年日比对实际账户价值与假想基准保单；2017 年 1 月 1 日精算参数重大更新后，对 2016 年及以前存量保单做增额、转换或换被保险人可能导致代次降级。 / On each policy anniversary, actual accumulating fund values are compared against a hypothetical benchmark policy; after the major actuarial update on January 1, 2017, increasing coverage, converting, or changing the life insured on pre-2017 policies may trigger generation demotion.
保单演示件双利率假设要求 / Dual interest rate assumptions for illustrations	policy illustration	万能寿险演示件必须附至少两套投资回报假设（现行利率与一套明显更低的利率），并由保单持有人签字确认理解两套数字均非保证。 / Universal life policy illustrations must present at least two investment return assumptions (the current rate and a significantly lower rate), and the policyholder must sign acknowledging that neither set of figures is guaranteed.
YRT 与 LCOI 定价及转换规则 / YRT and LCOI pricing and conversion rules	yearly renewable term costing (YRT) / level cost of insurance (LCOI)	YRT 按当年年龄定价、早期低后期急剧攀升，适合 10–15 年短中期持有；LCOI 按发单时精算摊平终身固定，适合长期持有；部分合同允许 YRT 转 LCOI 但一般不允许反向转回。 / YRT is priced on attained age, starting low and escalating steeply later, making it suitable for 10 to 15 year horizons; LCOI is actuarially leveled at issue and stays fixed for life, fitting permanent horizons; some contracts permit converting YRT to LCOI, but converting back is generally prohibited.
平额与平额加账户价值给付 / Level versus level plus account value benefits	level death benefit / level death benefit plus account value	平额给付下受益人只拿固定保额，账户增长用于压低 NAAR 节省扣费；平额加账户价值下受益人拿固定保额加全部账户价值，NAAR 恒等于固定保额故扣费更高。 / Under a level death benefit, the beneficiary receives only the face amount while account growth shrinks NAAR to save deductions; under level plus account value, the beneficiary receives the face amount plus the entire account value, meaning NAAR remains constant and deductions are higher.
三类投资账户的风险与保底 / Three investment account types, risks, and floors	daily interest account (DIA) / guaranteed investment account (GIA)	日息账户（DIA）与保证投资账户（GIA）保底通常为 0%，而指数或基金联动账户不直接持有基金份额且可能发生负回报，叠加最低缴费会加速消耗账户价值。 / Daily interest accounts (DIA) and guaranteed investment accounts (GIA) typically have a 0% floor, whereas index or fund linked accounts do not hold underlying fund units and can experience negative returns, which accelerates account depletion when combined with minimum funding.
累积账户六项权利与退保费用 / Six accumulating fund rights and surrender charges	surrender charge / premium offset / policy loan / collateral assignment / leveraging	持有人享有退保（前 5–10 年常按 LCOI 倍数收退保费且不超过账户价值）、部分提取、保费抵消、保单贷款（可借现金价值 50%–90%）、担保转让（不触发处置）及杠杆化六项权利。 / The policyholder holds six rights: surrender (surrender charges apply in the first 5 to 10 years, often based on multiples of LCOI and capped at the account value), partial withdrawals, premium offset, policy loans (borrowing 50% to 90% of cash value), collateral assignment (without triggering disposition), and leveraging.

万能寿险无期缴按期系数 / Absence of modal factor in universal life	modal factor	不同于定期险与终身寿险月缴年化总额偏高（例题高约 6%），万能寿险没有按期系数（modal factor），月缴、季缴、半年缴年化总额与年缴相同。 / Unlike term and whole life insurance where monthly annualized premiums are higher (commonly around 6%), universal life has no modal factor, meaning monthly, quarterly, semi-annual, and annual payment schedules produce the identical annual total.

自测提问（康奈尔左栏）

1. 一笔保费缴入万能寿险后，先后扣除哪些项目才进入投资账户滚动增值？ / When a premium is deposited into a universal life policy, which items are deducted before funds enter the investment account to compound?
2. 为什么「平额死亡给付」能触发良性循环降低扣费，而「平额加账户价值」不能？ / Why does a level death benefit trigger a virtuous circle that reduces deductions, whereas level plus account value does not?
3. YRT 与 LCOI 在前 10–15 年和终身持有期的成本表现及转换方向有何差异？ / How do YRT and LCOI differ in cost performance over the first 10 to 15 years versus a lifetime horizon, and what are the conversion restrictions?
4. 哪些触发情形会让万能寿险账户价值不足而滑向失效，演示件为何强制要求两套利率假设？ / What triggers cause a universal life account value to become insufficient and slide toward lapse, and why do illustrations require two interest rate assumptions?
5. 直接申请保单贷款、向银行做担保转让与保单杠杆化在税务处置和追偿风险上有什么区别？ / What are the differences in tax disposition and recourse risk among taking a direct policy loan, pledging the policy via collateral assignment, and policy leveraging?

总结：请用三句话总结万能寿险「拆开三要素」后，保单持有人如何通过选择成本结构（YRT/LCOI）、死亡给付方式与缴费水平来平衡保障成本、免税增值与保单失效风险。 / In three sentences, summarize how, after unbundling the three elements in universal life insurance, the policyholder balances insurance costs, tax-sheltered growth, and lapse risk by selecting the cost structure (YRT or LCOI), death benefit option, and funding level.

第 5 章 · 附加条款 / Riders and Supplementary Benefits

人寿保险 / Life Insurance　P2 稳住 / Hold steady　Riders · 模考 1 题

带着这几道题读：客户领了重疾给付（DD）或绝症给付（TI）后，身故金会少吗？ / Does receiving a dread disease (DD) benefit or terminal illness (TI) benefit reduce the final death benefit?；GIB 免核保加保是按什么时点触发、按原年龄还是新年龄算保费？ / What triggers a GIB addition without medical evidence, and are premiums calculated at the original or attained age?；用一张保单兼顾终身需求与 10 年房贷，主险退保后附加险还在吗？ / When combining permanent needs and a 10-year mortgage under one policy, does the rider remain in force if the base policy is surrendered?；父母给孩子或配偶投保并交费，加错豁免条款会导致什么拒赔后果？ / When parents insure a child or spouse and pay premiums, what claim denial results from selecting the wrong waiver provision?

怎么考

- 生前给付对身故金的影响计算与辨析：给出客户的保单面额及绝症给付（TI）或重疾给付（DD）比例上限（如 50% 或最高 $50,000），考查加速身故金作为「预支」会等额扣减最终身故金，并与独立重疾险（CI）的额外独立赔付作对比。 / Calculating and distinguishing the impact of living benefits on the death benefit: Given a client's policy face amount and an advance limit for a terminal illness (TI) or dread disease (DD) benefit (such as 50% or up to $50,000), test that an accelerated death benefit acts as an advance that reduces the ultimate death benefit dollar-for-dollar, and contrast this with the separate, additional payout of a stand-alone critical illness (CI) insurance policy.
- 投保人与被保险人分离时的豁免条款选择：设计父母为未成年子女投保、或配偶一方为另一方投保并交费的场景，测试考生能否区分普通完全伤残豁免（只保被保险人伤残）与父母/代付人豁免（保投保人身故或伤残）。 / Selecting waiver of premium benefits when the policyholder and life insured are different: In scenarios where parents purchase coverage for minor children or one spouse purchases coverage and pays premiums for the other, test whether the candidate can distinguish between a standard waiver of premium for total disability (which covers only disability of the life insured) and a parent or payor waiver benefit (which covers the policyholder's death or total disability).
- 阶段性需求与长期需求的组合配置：给出客户既有终身税务需求又有 10 年期债务的场景，考查用终身寿险主险加定期险附加险（节省单次核保与 $50–$100 保单年费）的逻辑，以及主险退保或失效时依附型附加险与已缴清增额（PUA）的法律后果。 / Structuring combinations of temporary and permanent needs: Given a scenario where a client has both lifelong tax liabilities and a 10-year debt obligation, test the rationale of combining a whole life base policy with a term insurance rider (saving duplicate underwriting and a $50 to $100 annual policy fee), as well as the legal consequences for dependent riders and paid-up additions (PUA) if the base policy lapses or is surrendered.

高频陷阱（看到信号就警觉）

附加险当独立保单（类别错配） / Treating Riders as Standalone Policies (Category Mismatch)：题干出现主险失效（lapse）、到期（expire）或整单退保（surrender），问名下附加险或增额保障能否继续保留。 / The question stem mentions base policy lapse, expiry, or full surrender, and asks whether attached riders or supplemental paid-up coverage can be maintained.

预支与另付混淆（产品混淆） / Confusing Advances with Additional Payouts (Product Confusion)：题干问领取生前给付后，受益人最终能拿到的身故金（death benefit）如何变化，或对比附加重疾给付（DD）与独立重疾险（stand-alone CI）的赔付后果。 / The question stem asks how the final death benefit received by beneficiaries changes after living benefits are paid, or compares an attached dread disease (DD) benefit with stand-alone critical illness (CI) insurance.

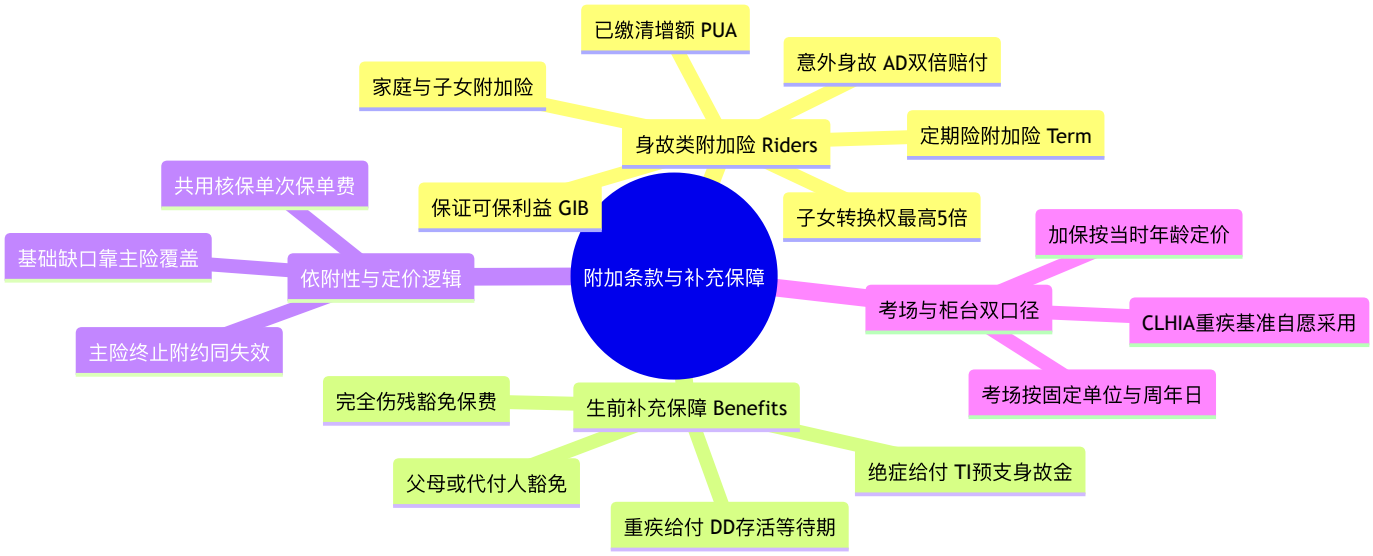
豁免对象张冠李戴（条款错配） / Mismatched Waiver Insured Parties (Provision Mismatch)：题干出现父母为未成年子女投保、或夫妻一方为另一方投保并负责缴费，问付款人身故或完全伤残时如何确保保单不失效。 / The question stem presents parents insuring minor children or one spouse insuring the other and paying premiums, asking how to keep the policy in force if the payor dies or becomes totally disabled.

GIB把免核保当免费或随时加保（术语与双口径误读） / Misinterpreting GIB as Free or Anytime Coverage (Terminology and Dual-Standard Misreading)：题干问行使 GIB 加保时的保费定价依据、是否需要健康证明（evidence of insurability），或在考场问标准 GIB 何时可以行权。 / The question stem asks about premium pricing basis when exercising GIB, whether evidence of insurability is required, or when standard GIB option dates occur on the exam.

- 逆选择保护机制的反向应用：围绕健康恶化或实质不可保的客户（如患病满一定年龄的子女或年轻投保人），考查子女附加险转换权（到期前免核保转永久险、最高放大 5 倍）与保证可保利益（GIB，固定周年日免核保按当时年龄加保）的行权规则。 / Application of anti-selection protection mechanisms: Focus on clients with deteriorating health or who have become effectively uninsurable (such as an impaired child reaching a certain age or young policyholders), testing exercise rules for the child rider conversion privilege (converting to permanent insurance before expiry without medical evidence, up to a 5-fold increase) and guaranteed insurability benefit (GIB, exercising on fixed policy anniversaries without evidence of insurability at attained-age rates).
- 意外身故附加险（AD）的理赔边界与需求分析误区：通过客户死于疾病、自杀或在事故发生 1 年限期后身故的案例，或者试图用 AD 双倍赔付凑齐家庭核心保额缺口的做法，考查除外条款与「遗属所需资金不因死因改变」的原则。 / Claim boundaries and needs analysis pitfalls of the accidental death (AD) rider: Through cases where a client dies of illness, suicide, or beyond the 1-year post-accident limit, or attempts to use double indemnity under an AD rider to fill a core family coverage gap, test policy exclusions and the principle that survivors' financial needs do not change based on the cause of death.

靠意外双倍赔付凑基础保额（范围夸大与以偏概全） / Relying on Accidental Double Indemnity for Core Coverage (Scope Inflation and Generalization)：题干给出客户的固定家庭负债或遗属生活费缺口，提议用低成本的 AD 附加险把总赔付凑够目标金额。 / The question stem gives a client's fixed family debt or survivor living expense shortfall and proposes using low-cost AD riders to bring total payout up to the target amount.

导图



第 5 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
附加险与补充保障的分类逻辑 / Classification of Riders and Supplementary Benefits	riders and supplementary benefits	考试口径将身故后追加给付归为附加险（riders），将生前触发的预支、另付或保费豁免归为补充保障（supplementary benefits），但实务中须按具体合同触发条款核对。 / Under exam conventions, additional benefits paid after death are categorized as riders, while living triggers such as advances, separate payouts, or premium waivers are classified as supplementary benefits; however, in practice each contract's specific trigger provisions must be verified.
捆绑定价优势与依附性限制 / Bundled Pricing Advantages and Dependency Limitations	term insurance rider / paid-up additions (PUA) rider	附加险因共用一次核保与单份保单年费（通常 $50–$100）而比独立保单便宜，但依附主险存续，主险失效或整单退保时附加险同时终止、PUA 现金价值一并结算。 / Riders are less expensive than stand-alone policies because they share a single underwriting assessment and one annual policy fee (typically $50 to $100); however, they are dependent on the base policy, meaning riders terminate and PUA cash values are settled together upon base policy lapse or full surrender.
意外身故与意外伤残的理赔边界 / Claim Boundaries for Accidental Death and Dismemberment	accidental death (AD) rider / accidental dismemberment benefit	AD 仅在死因属于意外且发生在事故后限期内（常见 1 年）时额外赔付（常见 2 倍身故金），除外自杀、自伤、战争与犯罪；AD&D 另按损失表在生前赔付肢体或功能损失。 / An AD rider pays an additional benefit (typically double indemnity) only if death is accidental and occurs within a stipulated timeframe following the accident (commonly 1 year), excluding suicide, self-inflicted injury, war, and criminal acts; AD&D additionally pays living benefits for loss of limbs or function according to a schedule of losses.
加速身故金的预支扣减机制 / Advance and Deduction Mechanism of Accelerated Death Benefits	accelerated death benefit: terminal illness (TI) and dread disease (DD)	绝症给付（TI，常见上限为面额 25%–75% 或举例 50% 上限 $50,000）与重疾给付（DD，需存活满常见 30 天等待期）均属提前预支，会等额减少最终身故金，而独立重疾险（CI）不扣减寿险身故金。 / Terminal illness (TI, commonly capped at 25% to 75% of face value or 50% up to $50,000) and dread disease (DD, requiring survival past a typical 30-day waiting period) are advances that reduce the ultimate death benefit dollar-for-dollar, whereas stand-alone critical illness (CI) insurance does not deduct from the life insurance death benefit.
子女附加险的自动覆盖与免核保转换 / Automatic Coverage and Conversion Privilege of Child Riders	family/child coverage rider and converting child coverage rider	子女附加险按固定单位计费（不随子女人数加费），新生儿满一定天数（常见 15 天，出生后头 2 周内身故不赔）自动覆盖至 21 或 25 岁，到期前可免核保转为最高达原保额 5 倍的个人永久险。 / A child rider charges a flat premium per unit regardless of the number of children, automatically covering newborns once they reach a specified age (commonly 15 days, with no benefit if death occurs within the first 2 weeks) up to age 21 or 25, and can be converted before expiry without medical evidence into an individual permanent policy for up to 5 times the rider face amount.
保证可保利益的行权触发与定价 / Exercise Triggers and Premium Pricing for Guaranteed Insurability Benefit	guaranteed insurability benefit (GIB)	考试口径下 GIB 在固定保单周年日（如第 5、10 周年日）行权且受单次与累计限额约束（部分现行合同新增毕业、结婚、生子、收养后 31 天内行权），免核保但保费按加保时的实际年龄计算。 / Under exam conventions, GIB is exercised on fixed policy anniversaries (such as the 5th or 10th anniversary) subject to single and cumulative limits (some modern contracts also allow exercise within 31 days of graduation, marriage, birth, or adoption), requiring no medical evidence but pricing new coverage at the insured's attained age.
重疾定义基准与公司间差异 / Critical Illness Benchmark Definitions and Inter-Company Differences	CLHIA CI Benchmark Definitions / Big 4	考试口径以「Big 4」（心脏病发、中风、冠状动脉搭桥、危及生命的癌症）概括重疾门槛（部分保司保 25 种以上），行业虽有 CLHIA 2024 Final 基准定义但各保司自愿采用，须逐份合同核对。 / The exam summarizes common critical illness coverage thresholds through the Big 4 (heart attack, stroke, coronary artery bypass surgery, and life-threatening cancer, while some insurers cover 25 or more conditions); although the industry has the CLHIA 2024 Final benchmark definitions, their adoption by insurers is voluntary and wording must be verified in each specific contract.

基础缺口覆盖原则与第三人核保 / Core Shortfall Coverage Principle and Third-Party Underwriting	value of coverage and underwriting of riders	家庭核心保额缺口必须由基础保额全额覆盖而不能靠附加险凑数；若在保单上附加覆盖配偶或其他人的定期险附加险，该被保险人必须单独接受核保。 / A family's core coverage shortfall must be fully covered by the base insurance policy rather than supplemented with riders; if a term insurance rider is attached to cover a spouse or another third party, that individual must undergo separate underwriting.
完全伤残豁免与父母代付人豁免的区分 / Distinguishing Total Disability Waiver from Parent or Payor Waiver	waiver of premium for total disability vs. parent/payor waiver benefit	普通完全伤残豁免在被保险人伤残满等待期后豁免保费且保单分红与现金价值照常累积；当投保人非被保险人时，须配置父母/代付人豁免（代付人亦需核保）才能在代付人身故或伤残时豁免保费。 / A standard waiver of premium for total disability waives premiums after the life insured satisfies the waiting period while dividends and cash values continue to accumulate; when the policyholder is not the life insured, a parent or payor waiver benefit (requiring underwriting of the payor) must be added to waive premiums upon the payor's death or total disability.

自测提问（康奈尔左栏）

1. 为什么附加险通常比买独立保单便宜，客户为此付出的核心代价是什么？ / Why are riders generally less expensive than buying stand-alone policies, and what is the primary trade-off the client makes?
2. 加速身故金（TI 与 DD）和独立重疾险（CI）对最终身故金的影响有什么本质区别？ / What is the fundamental difference in how accelerated death benefits (TI and DD) versus stand-alone critical illness (CI) insurance affect the final death benefit?
3. 子女附加险在新生儿覆盖、计费方式以及到期前转换权上有哪些考试常见数字与规则？ / What key figures and rules frequently tested on exams apply to child riders regarding newborn coverage, pricing structure, and pre-expiry conversion privileges?
4. 保证可保利益（GIB）在考场口径与现行新合同中的行权触发条件有何不同，加保保费按什么年龄算？ / How do option exercise triggers for the guaranteed insurability benefit (GIB) differ between exam conventions and modern contracts, and what age determines the new premium rate?
5. 当投保人与被保险人不是同一人时，普通完全伤残豁免与父母/代付人豁免各自保谁的风险？ / When the policyholder and the life insured are different persons, whose risk is covered by a standard waiver of premium for total disability versus a parent or payor waiver benefit?

总结：请用三句话总结：如何根据客户的「核心身故缺口 vs 阶段性或生前缺口」「投保人与被保险人是否同一人」以及「未来健康恶化风险」匹配正确的附加条款，并说明考场答卷口径与实务合同核对的边界。 / In three sentences, summarize: how to match appropriate riders based on a client's core death benefit gap versus temporary or living need gaps, whether the policyholder and life insured are the same person, and future health insurability risks, while explaining the boundary between exam conventions and actual contract verification.

第 6 章 · 团体寿险 / Group Life Insurance

人寿保险 / Life Insurance　P3 过一遍 / Skim　Group Life · 模考 1 题

带着这几道题读：雇主与员工按比例分摊团体寿险保费时，哪部分算应税福利、身故金交不交税？ / When an employer and employee split group life insurance premiums, which portion is a taxable benefit and is the death benefit taxable?；BC 员工离职时原保额超过 $200,000，31 天内免核保最多能转多少？ / When a BC employee leaves employment with original coverage exceeding $200,000, what is the maximum amount they can convert without medical evidence within 31 days?；新员工满3个月试用期但当天因病未到岗，保障能否生效？ / If a new employee completes a 3-month probationary period but is absent due to illness that day, can their coverage take effect?；准备在 65 岁生日当天退休的员工，转换权与超额缺口该如何处理？ / How should the conversion privilege and any excess coverage gap be handled for an employee planning to retire on their 65th birthday?

怎么考

- 保费与身故金税务判定题：给出雇主与员工各自的保费分摊比例及年薪倍数保额，考查哪一部分计入当年应税福利（taxable benefit）、哪一部分不可抵扣，以及身故保险金本金是否免税，专门测试是否与团体伤残险记反。 / Premium and death benefit tax determination questions: Presenting employer and employee premium split percentages and salary-multiple coverage amounts, testing which portion constitutes a taxable benefit in the current year, which portion is not deductible, and whether the death benefit principal is tax-free, specifically checking whether candidates confuse the rules with group disability insurance.
- 离职或计划终止转换权（conversion privilege）计算与条件题：结合员工年龄（65岁前后）、原保额与非魁省 $200,000 免核保上限、31天申请及缴清首期保费窗口，考查员工在离职时能免健康证明转换多少个人寿险保额。 / Conversion privilege calculation and condition questions upon termination or plan end: Combining employee age (before versus at age 65), original coverage, the non-Quebec $200,000 non-medical conversion cap, and the 31-day window to apply and pay the first premium, testing how much individual life coverage an employee can convert without evidence of insurability upon leaving employment.
- 三方合同关系与法定查阅权场景题：通过雇主调整或终止某一会籍分级（membership class）、更换承保人或员工索取条款发生争议，测试总合同（master contract）与福利手册（benefit booklet）的区别及 BC《Insurance Act》下的主保单取阅权。 / Three-party contractual relationship and statutory inspection right scenario questions: Presenting employer adjustments or terminations of a membership class, insurer replacements, or disputes arising from an employee requesting policy terms, testing the distinction between the master contract and benefit booklet as well as the right to inspect and copy the master policy under the BC Insurance Act.
- 入职资格与逆选择（adverse selection）控制机制题：设定新员工尚在试用期（probationary period）、生效日未满足在职要求（actively-at-work requirement）或错过 60 天限定

高频陷阱（看到信号就警觉）

跨险种税务方向记反 / Inverting tax treatment across insurance lines：题干同时出现雇主分摊团体寿险保费比例（如 70%/30% 或全额支付）并询问员工当年 T4 应税福利或受益人身故金税务后果。 / The question stem presents an employer group life premium contribution ratio (such as 70% / 30% or 100% employer-paid) and asks about the employee's current-year T4 taxable benefit or the beneficiary's death benefit tax consequences.

转换上限当成固定保额或漏看缴付条件 / Treating the conversion cap as a fixed coverage amount or missing payment conditions：题干给出员工离职日期、原保额（高于或低于 $200,000）及年龄，询问免健康证明转换（conversion privilege）的额度或截止动作。 / The question stem provides an employee's termination date, original coverage amount (above or below $200,000), and age, asking for the conversion privilege maximum amount without evidence of insurability or the required completion actions by the deadline.

主保单查阅权与总合同边界混淆 / Confusing master policy inspection rights with master contract boundaries：题干出现福利手册与主保单条款不一致、理赔争议或雇主变更会籍类别，询问谁持有主保单及成员能否向保险人索取主保单副本。 / The question stem presents inconsistencies between the benefit booklet and master contract terms, claim disputes, or an employer modifying membership classes, asking who holds the master contract and whether a member can request a copy of the master policy from the insurer.

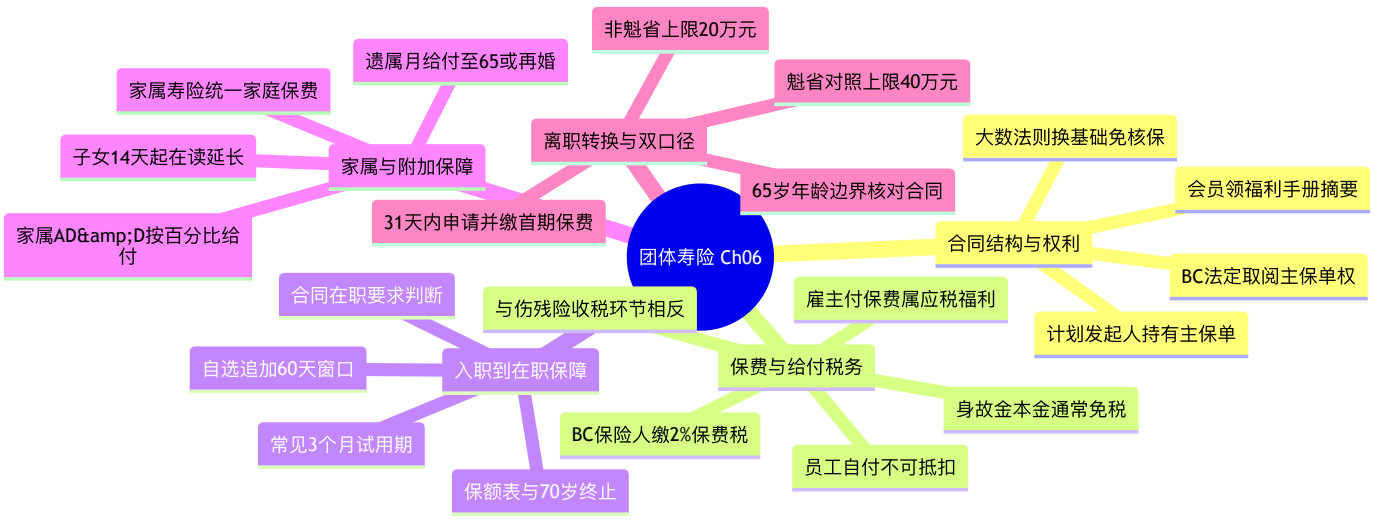
自选追加保额与在职要求过度推定 / Over-presuming non-underwritten status for optional coverage and actively-at-work requirements：题干出现新员工入职满 3 个月当天未上班，或员工在入职数年后因健康变化想加购自选保额。 / The question stem involves a new employee being absent from work on the day their 3-month probationary period ends, or an employee wanting to purchase optional coverage years after joining due to health changes.

窗口才申请自选追加保额（optional additional coverage），判断保障是否生效及是否需要核保。 / Eligibility and adverse selection control mechanism questions: Setting scenarios where a new employee is within the probationary period, fails to satisfy the actively-at-work requirement on the effective date, or misses the 60-day limited window before applying for optional additional coverage, testing whether coverage takes effect and whether medical underwriting is required.

- 附属保障读表与概念辨析题：将家属寿险（dependant life coverage）统一家庭费率、遗属月给付（survivor income benefits）的终止条件（65岁/再婚/身故）以及家属 AD&D 的百分比（50% vs 40%/15%）放在家庭场景中考查。 / Ancillary coverage schedule reading and concept distinction questions: Placing flat family rates for dependant life coverage, termination conditions for monthly survivor income benefits (age 65, remarriage, or death), and dependant AD&D schedule percentages (50% versus 40% / 15%) into family scenarios for testing.

> **家属险计费与遗属给付概念混淆 / Confusing dependant life rating with survivor income benefit concepts**：题干涉及多子女家庭购买统一家庭费率家属险、配偶再婚对遗属月给付的影响，或有/无子女时配偶 AD&D 百分比（50% 与 40%/15%）切换。 / The question stem involves a multi-child family enrolling in flat family rate dependant life coverage, the effect of spousal remarriage on monthly survivor income benefits, or switching spousal AD&D percentages between scenarios with and without children (50% versus 40% / 15%).

导图



第 6 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
团体主保单持有人与BC法定取阅权 / Group master policyholder and BC statutory inspection right	plan sponsor / master contract / benefit booklet	雇主或协会作为计划发起人与保险人订立主保单，成员通常只领福利手册摘要，但依 BC《Insurance Act》s41(5)(b) 在合理通知后有权向保险人查阅并取得主保单副本（首份免费）。 / The employer or association acts as the plan sponsor entering into the master contract with the insurer, and members typically receive only a benefit booklet summary; however, under BC Insurance Act s41(5)(b), a group life insured has the statutory right, upon giving reasonable notice, to inspect and obtain a copy of the master policy from the insurer, with the first copy provided free of charge.
逆选择控制与基础免核保交换 / Adverse selection control and non-medical basic coverage exchange	adverse selection / non-evidence maximum	保险公司以团体整体特征定价并在免健康证明额度内承保基础保障，条件是保额由计划硬性限定；自选追加保额若超出限定申请窗口（考试口径示例 60 天）或额度则须核保。 / The insurer prices coverage based on overall group characteristics and underwrites basic coverage within the non-evidence maximum, on the condition that benefit amounts are strictly predetermined by plan terms; optional additional coverage requires medical underwriting if it exceeds the specified enrolment window (60 days in the exam example) or non-medical limits.
团体寿险保费与身故金税务规则 / Group life insurance premium and death benefit tax rules	taxable benefit	雇主代付的团体寿险保费计入员工当年应税收入（T4 应税福利），员工自付部分不可抵扣也不产生应税福利，而寿险身故保险金本金不论谁付保费通常均免所得税。 / Group life insurance premiums paid by the employer are included in the employee's taxable income for the year (reported as a taxable benefit on the T4 slip); employee contributions are not tax-deductible and create no taxable benefit; and the life insurance death benefit principal is generally exempt from income tax regardless of who paid the premiums.
非魁省免核保转换上限与31天窗口 / Non-Quebec non-medical conversion cap and 31-day window	conversion privilege / CLHIA Guideline G3	在非魁省地区（含 BC），65 岁前/时终止团体保障的成员可在 31 天窗口内免健康证明转换为个人寿险，上限为 $200,000 或原保额中较小者（魁省上限为 $400,000），且须在窗口内缴清首期保费。 / In non-Quebec provinces (including BC), a member whose group coverage terminates before or at age 65 can convert to an individual life policy within a 31-day window without evidence of insurability, capped at the lesser of $200,000 or the prior group coverage amount (compared to Quebec's $400,000 limit), provided the application and the first modal premium are fully paid within the window.
转换窗口天数双口径与65岁边界 / Dual benchmarks for conversion window duration and age 65 boundary	conversion privilege	考试口径内部有两处写 31 天、一处写 30 天（校对疏忽），考场以题干合同数字为准；65 岁当天或之后终止是否享有转换权须按具体合同与保险人须知核对。 / The exam material references 31 days in two sections and 30 days in one section due to editorial discrepancy; candidates should rely on the specific contract figures provided in the question stem; whether coverage terminating on or after the member's 65th birthday qualifies for conversion must be verified against the specific contract and insurer guidelines.
BC省级保费税纳税主体 / BC provincial insurance premium tax liability	insurance premium tax	BC 持牌保险人的寿险、意外及疾病保险保费税率为 2%，申报缴纳主体是保险人，不等于给员工额外增加一项 2% 的个人所得税应税福利。 / The BC insurance premium tax rate on life, accident, and sickness insurance for licensed insurers is 2%, which is reported and remitted by the insurer; this does not constitute an additional 2% personal income taxable benefit for the employee.
试用期与在职要求门槛 / Probationary period and actively-at-work thresholds	probationary period / actively-at-work requirement	新员工通常须先满试用期（常见 3 个月），并在生效时按合同满足在职要求（actively-at-work requirement），未正式到岗履职前保障可能尚未生效。 / New employees typically must complete a probationary period (commonly 3 months) and satisfy the contractual actively-at-work requirement on the effective date; coverage may not take effect before the employee is actively performing employment duties.
保额表四形式与高龄递减终止 / Four schedule of benefits formats and late-age reduction or termination	membership class / schedule of benefits	基础保额按薪资倍数、统一定额、服务年限或组合设定并可按会籍分级分档，退休或高龄会员保额通常会递减直至特定年龄（考试口径举例 70 岁）完全终止。 / Basic coverage is structured as salary multiples, flat amounts, length of service, or combinations thereof and can be tiered by membership class; coverage for retired or senior members typically reduces in stages until terminating completely at a specified age (such as age 70 in the exam examples).
家属寿险与遗属收入给付区别 / Distinction	dependant life coverage /	家属寿险覆盖配偶及出生 14 天起至 18/19/21 岁（在读可至 23–25 岁）子女且常采用不随人数增加的统一家庭保费；遗属收入给付则是叠加在身故金外按月发放至配偶 65 岁、再婚或身

between dependant life coverage and survivor income benefits	survivor income benefits	故为止的补贴。 / Dependant life coverage insures spouses and eligible children from 14 days of age up to age 18, 19, or 21 (extended to age 23 to 25 if in full-time study) and frequently uses a flat family premium that does not increase with the number of children; survivor income benefits are monthly income supplements paid on top of the death benefit until the spouse reaches age 65, remarries, or dies.
团体AD&D配置与家属给付百分比 / Group AD&D structures and dependant benefit percentages	basic vs. voluntary AD&D	基础型 AD&D 随基础寿险自动提供，自选型按单位免核保购买；家属 AD&D 考试口径示例为单独覆盖配偶时按会员保额 50%，同时覆盖配偶与子女时配偶降为 40%、每名子女 15%。 / Basic AD&D is automatically bundled with basic group life coverage, while voluntary AD&D is purchased in units without medical underwriting; under the exam dependant AD&D schedule, covering a spouse alone pays 50% of the member's face amount, whereas covering both a spouse and children reduces the spouse benefit to 40% and provides 15% per child.

自测提问（康奈尔左栏）

1. 为什么团体寿险与团体伤残险在『雇主付保费』时的收税环节恰好相反？ / Why is the point of taxation exactly reversed between group life insurance and group disability insurance when the employer pays the premiums?
2. BC 省团体成员若与保险公司发生条款争议，能否突破福利手册直接索取主保单副本？ / If a BC group member has a coverage dispute with the insurer, can they look beyond the benefit booklet and obtain a copy of the master policy directly?
3. 非魁省成员离职行使免核保转换权时，额度上限、天数窗口及必须完成的缴费动作是什么？ / When a non-Quebec group member exercises the conversion privilege upon termination, what are the maximum coverage limit, the day window, and the mandatory payment action?
4. 为什么团体基础寿险能免核保，而自选追加保额一旦错过 60 天限定窗口就必须核保？ / Why can basic group life coverage be issued without medical evidence, while optional additional coverage requires underwriting once the 60-day window is missed?
5. 家属寿险、遗属月给付以及家属 AD&D（50% 与 40%/15%）在给付方式和计费规则上有何区别？ / How do dependant life coverage, monthly survivor income benefits, and dependant AD&D (50% versus 40% / 15%) differ in payout structures and premium rating rules?

总结：请用三句话总结：团体寿险『雇主签主保单、会员享保障』的结构如何决定逆选择控制、保费端应税福利与离职 31 天内最高 $200,000 免核保转换权。 / In three sentences, summarize how the group life insurance structure of the employer signing the master contract while members receive coverage dictates adverse selection control, premium-stage taxable benefits, and the non-medical conversion privilege of up to $200,000 within 31 days of termination.

第 7 章 · 寿险与税 / Taxation of Life Insurance and Tax Planning Strategies

人寿保险 / Life Insurance　P2 稳住 / Hold steady　Taxation & Strategies · 模考 2 题

带着这几道题读：退保保单利得按50%还是100%计入应税收入？ACB如何由保费与NCPI算出？ / Are policy gains on surrender included in taxable income at 50% or 100%, and how is ACB calculated from premiums and NCPI?；向保单借款超ACB、用保单作贷款抵押及借款利息抵扣，税务上分别怎么判？ / How are policy loans exceeding ACB, collateral assignments for loans, and loan interest deductibility evaluated for tax purposes?；公司收到$1,000,000身故赔款且ACB为$150,000，多少能进CDA？ / When a corporation receives a $1,000,000 death benefit and the policy ACB is $150,000, how much credits the CDA?；保单生前转给配偶或子女何时自动按ACB展期？何时应主动选择退出展期？ / When does an inter vivos transfer to a spouse or child automatically roll over at ACB, and when should a policyholder elect out of the rollover?

怎么考

- 生前处置与ACB算题：题干给出累计保费、纯保险净成本（NCPI）与现金退保价值（CSV）或保单贷款金额，要求计算调整后成本基础（ACB）、应税保单利得（policy gain）或新增应纳税额，测试保单利得100%计入应税收入而非按资本利得50%计入。 / Lifetime disposition and ACB calculation questions: Presenting cumulative premiums, net cost of pure insurance (NCPI), and cash surrender value (CSV) or policy loan amounts, requiring candidates to calculate the adjusted cost basis (ACB), taxable policy gain, or resulting tax payable, testing that policy gains are 100% included in taxable income rather than included at the 50% capital gains rate.
- 处置动作辨析题：题干对比全额退保、保单贷款、担保转让（collateral assignment）、绝对转让（absolute assignment）或变为非免税单，测试哪一动作触发处置（disposition）或视同处置（deemed disposition），以及贷款本金是否超ACB与贷款利息能否抵税的独立判断。 / Disposition action distinction questions: Comparing full surrenders, policy loans, collateral assignments, absolute assignments, or conversions into non-exempt policies, testing which action triggers a disposition or deemed disposition, alongside independent determinations of whether loan principal exceeds ACB and whether loan interest is tax-deductible.
- 家庭内部转让与展期题：题干描述夫妻间生前转让保单或父母无偿将保单转给子女，测试配偶展期（spousal rollover）的默认适用与主动选择退出（opt out）利用亏损的策略，以及子女展期必须直接过户给子女本人而非转入信托的法定边界。 / Intra-family transfer and rollover questions: Describing inter vivos policy transfers between spouses or parents transferring policies to children for no consideration, testing the default application of the spousal rollover, the strategy to elect out of the rollover to utilize business losses, and the statutory requirement that child rollovers must be transferred directly to the child rather than into a trust.
- 企业持有寿险与资本红利账户（CDA）题：题干给出私人公司作为受益人收到身故给付及保单当时的ACB，测试全额赔款

高频陷阱（看到信号就警觉）

保单利得误套资本利得50%计入率 / Applying the 50% capital gains inclusion rate to policy gains：题干出现退保（surrender）、保单贷款（policy loan）或转让并要求计算应税收入（taxable income）或应纳税额。 / The question stem mentions a surrender, policy loan, or policy transfer and asks for the taxable income or tax payable.

保单贷款误判为免税或混淆利息抵扣 / Assuming policy loans are entirely tax-free or confusing interest deductibility：题干出现保单持有人申请policy loan，或同时提及借款金额、ACB与借款用途（个人消费vs赚取应税投资收入）。 / The question stem involves a policyholder taking a policy loan, or mentions loan amount, ACB, and borrowed fund usage (personal spending versus earning taxable investment income).

担保转让与绝对转让混同 / Confusing collateral assignment with absolute assignment：题干出现assign the policy as collateral security for a bank loan（将保单作为银行贷款的担保物）。 / The question stem mentions assigning the policy as collateral security for a bank loan.

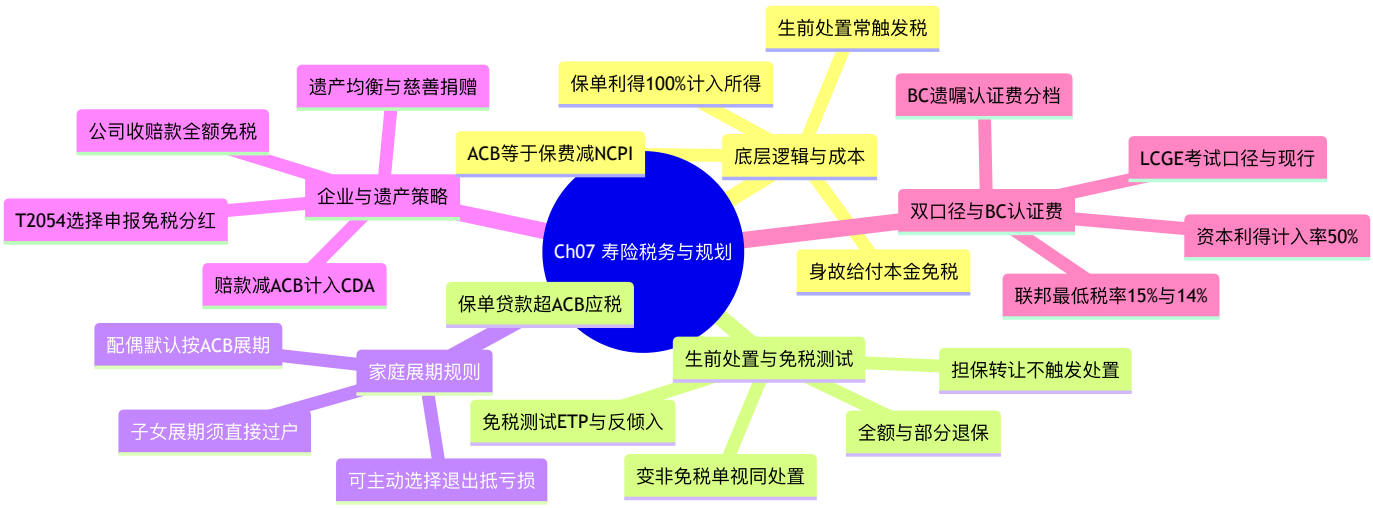
CDA免税额误算为全额身故给付 / Crediting the full death benefit to the CDA without deducting ACB：题干给出公司持有保单的身故给付金额及当时的非零ACB，问可免税分配给股东的资本红利（capital dividend）或计入CDA的金额。 / The question stem provides a corporate-owned policy's death benefit and a non-zero ACB, asking for the CDA credit or tax-free capital dividend amount.

配偶/子女展期条件与默认方向颠倒 / Reversing spousal or child rollover conditions and default directions：题干描述生前将保单转让给配偶（且转让人当年有营业亏损）或通过信托（trust）转让给未成年子女。 / The question stem describes transferring a policy to a spouse during lifetime (especially when the transferor has business losses) or transferring a policy to minor children through a trust.

免税进公司、但仅有「身故给付减ACB」的差额计入CDA并须按时提交T2054选择申报才可免税分配给股东。 / Corporate-owned life insurance and capital dividend account (CDA) questions: Presenting private corporations receiving death benefits as beneficiaries alongside the policy's ACB, testing that the full death benefit is received tax-free by the corporation, but only the excess of the death benefit over ACB credits the CDA and requires a timely filed Form T2054 election to be distributed tax-free to shareholders.

- 遗产规划、慈善捐赠与双口径参数题：题干结合遗产均衡（estate equalization）、慈善保单转让或遗嘱受益人指定、BC省遗嘱认证费（probate fee）及终身资本利得豁免（LCGE），测试生前转让与身后捐赠的收据差异、具名受益人绕开遗嘱认证，以及考试口径（2022）与现行法规口径的区分。 / Estate planning, charitable giving, and dual-benchmark parameter questions: Combining estate equalization, charitable policy transfers or beneficiary designations, BC probate fees, and the lifetime capital gains exemption (LCGE), testing the receipt differences between inter vivos transfers and testamentary gifts, named beneficiaries bypassing probate, and the distinction between 2022 exam syllabus figures and current tax rules.

导图



第 7 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
身故给付免税与保单利得100%应税 / Death benefit tax exemption and 100% taxable policy gains	Death benefit & policy gain	普通免税寿险（exempt policy）的身故给付本金不计入受益人所得，但生前处置产生的保单利得（处置所得减ACB）须100%计入当年应税收入，不适用资本利得50%计入率。 / The death benefit principal of an exempt life insurance policy is generally not included in the beneficiary's income, but policy gains arising from a lifetime disposition (proceeds of disposition minus ACB) must be 100% included in taxable income for the year and do not qualify for the 50% capital gains inclusion rate.
调整后成本基础（ACB）与纯保险净成本（NCPI） / Adjusted cost basis (ACB) and net cost of pure insurance (NCPI)	Adjusted cost basis (ACB) & NCPI	G2/G3保单的ACB简化起点为累计已缴保费减去累计纯保险净成本（NCPI），并随红利、贷款及还款调整；NCPI随年龄增长而上升，导致ACB在后期逐渐下降。 / For G2 and G3 policies, the simplified starting calculation for adjusted cost basis (ACB) is cumulative premiums paid minus cumulative net cost of pure insurance (NCPI), further adjusted for dividends, policy loans, and repayments; because NCPI increases with age, the ACB typically declines in later policy years.
联邦税率、BPA与LCGE双口径 / Federal tax brackets, BPA, and LCGE dual benchmarks	LCGE, federal tax brackets & BPA	资本利得一般计入率仍为50%；考试口径（2022）合格小型企业股份LCGE上限为$913,630、联邦最低税率15%、BPA为$14,398，而2026现行LCGE为$1,275,000、最低税率14%、最高BPA为$16,452。 / The general capital gains inclusion rate remains 50%; under the 2022 exam syllabus, the lifetime capital gains exemption (LCGE) limit for qualified small business corporation shares is $913,630, the lowest federal tax bracket is 15%, and the basic personal amount (BPA) is $14,398, whereas under 2026 current rules the LCGE is $1,275,000, the lowest federal rate is 14%, and the maximum BPA is $16,452.
BC省遗嘱认证费分档规则 / BC probate fee tiering rules	BC probate fee	BC省遗产估值≤$25,000免征认证费，$25,000至$50,000部分每$1,000收$6，超$50,000部分每$1,000收$14（考试口径一般申请费印$208，现行法院提交费为$200）；指定具名受益人的保单赔款不进遗产从而豁免认证费。 / Under BC probate fee rules, estate values up to $25,000 are exempt, values between $25,000 and $50,000 are charged $6 per $1,000, and values exceeding $50,000 are charged $14 per $1,000 (with the flat court filing fee stated as $208 in the exam syllabus versus $200 currently); naming a beneficiary on a life insurance policy bypasses the estate, exempting the proceeds from probate fees.
保单贷款税务处理与利息抵扣 / Policy loan tax treatment and interest deductibility	Policy loan & interest deductibility	保单贷款属于处置，贷款金额不超过ACB时无应税利得且等额扣减ACB，超过ACB的部分为应税保单利得且ACB归零；还款可先抵扣已报利得再垫高ACB；贷款利息仅在借款用于赚取应税收入（非仅资本利得或个人消费）且经T2210核实时方可抵扣。 / A policy loan constitutes a disposition under tax law; borrowing up to the ACB generates no taxable gain and reduces the ACB dollar-for-dollar, while borrowing in excess of the ACB triggers a taxable policy gain and reduces the ACB to zero; loan repayments can first be deducted against previously reported policy gains before restoring the ACB; loan interest is deductible only when borrowed funds are used to earn taxable income (not solely capital gains or personal expenditures) and verified on Form T2210.
担保转让与绝对转让的区别 / Distinction between collateral assignment and absolute assignment	Collateral assignment vs. absolute assignment	用免税保单向贷款机构作担保转让（collateral assignment）不触发保单处置，保内增值继续递延；绝对转让（absolute assignment）改变保单所有权，触发处置。 / Assigning an exempt life insurance policy to a lender as collateral security does not trigger a disposition of the policy, allowing cash value growth to continue tax-deferred; an absolute assignment transfers policy ownership and constitutes a disposition.
配偶与子女保单生前展期 / Inter vivos spousal and child policy rollovers	Spousal rollover & child rollover	双方均为加拿大税务居民时，生前转让保单给配偶默认按ACB自动展期（转让人可主动选择退出以触发利得抵扣亏损）；无偿转让给子女须直接过户给子女本人方可按ACB展期，转入信托不适用。 / When both spouses are Canadian tax residents, an inter vivos policy transfer to a spouse automatically rolls over at the ACB by default (though the transferor may elect out of the rollover to realize a gain and offset losses); transferring a policy to a child for no consideration rolls over at the ACB only if transferred directly to the child, and transfers into a trust do not qualify.
免税测试（ETP）与视同处置 / Exempt test policy (ETP) and deemed disposition	Exempt test policy (ETP) & deemed disposition	保险公司每保单周年日比对保单累积基金与免税测试保单（ETP）及反倾入规则；若超限未修正而变为非免税单，即使未提取现金也触发视同处置（deemed disposition），此后年度收益按年课税。 / On each policy anniversary, the insurer tests the policy accumulating fund against the exempt test policy (ETP) and anti-dump-in rules; if excess funds are not remedied and the policy becomes non-exempt, a deemed disposition occurs immediately

		even if no cash is withdrawn, and subsequent annual earnings are taxed on an accrual basis.
企业持有寿险与资本红利账户（CDA） / Corporate-owned life insurance and the capital dividend account (CDA)	Capital dividend account (CDA)	私人公司收到寿险身故给付全额免税，但计入CDA可免税分配给股东的金额仅为「身故给付减ACB」；公司向股东发放资本红利须在应付日或实付日较早者当日或之前提交Form T2054选择申报。 / A private corporation receives a life insurance death benefit completely tax-free, but the amount credited to the capital dividend account (CDA) for tax-free distribution to shareholders is limited to the excess of the death benefit over the policy's ACB; paying a capital dividend to shareholders requires filing Form T2054 on or before the earlier of when the dividend becomes payable or is paid.
保单税法代次（G1/G2/G3）与慈善捐赠双路径 / Policy tax generations (G1/G2/G3) and dual charitable giving pathways	G1/G2/G3 grandfathering & charitable gift	保单按1982-12-02及2017-01-01分为G1/G2/G3三代，2017年后对G2保单做定期转永久或加保核保可触发s.148(11)丧失既得权；慈善捐赠分生前转让（产生s.148(7)处置与当期/续期保费收据）与保单留己仅指定机构为身故受益人（生前保费无收据，身后由遗产申报抵免）。 / Policies are categorized into G1, G2, and G3 generations based on issue dates relative to December 2, 1982 and January 1, 2017; converting term to permanent or adding medically underwritten coverage to a G2 policy after 2016 triggers ITA s.148(11) loss of grandfathered status; charitable giving follows two distinct pathways: absolute transfer of ownership (triggering an ITA s.148(7) disposition and donation receipts for fair value and future premiums) versus retaining ownership and naming the charity as beneficiary (no lifetime premium receipts, with the death benefit claimed as a donation credit on final or estate returns).

自测提问（康奈尔左栏）

1. 为什么身故给付免税，而退保或贷款产生的保单利得却要100%计入应税收入？ / Why is the death benefit tax-free, while policy gains from surrenders or policy loans are 100% included in taxable income?
2. G2/G3保单的ACB怎么算？为什么保单持有越久，同样金额的保单贷款越容易触发税负？ / How is the ACB of a G2 or G3 policy calculated, and why does holding a policy longer make an identical policy loan amount more likely to trigger a tax liability?
3. 保单贷款、担保转让（collateral assignment）与绝对转让在处置认定和利息抵扣上有何区别？ / How do policy loans, collateral assignments, and absolute assignments differ regarding disposition status and interest deductibility?
4. 公司收到的寿险身故给付如何计入资本红利账户（CDA）并合法免税分配给股东？ / How is a corporate-received life insurance death benefit credited to the capital dividend account (CDA) and legally distributed tax-free to shareholders?
5. 配偶展期与子女展期的默认规则、例外条件及考试口径与2026现行税制数字有哪些差异？ / What are the default rules and statutory exceptions for spousal and child rollovers, and how do 2022 exam syllabus figures differ from 2026 current tax rules?

总结：请用三句话总结：普通免税保单在「身故给付、生前处置（退保/贷款/转让）、企业CDA分配」三个场景下的核心计税公式与最易混淆的考场陷阱。 / In three sentences, summarize the core tax formulas and most frequent exam traps for exempt life insurance policies across three scenarios: death benefits, lifetime dispositions (surrenders, loans, transfers), and corporate CDA distributions.

第 8 章 · 企业寿险 / Business Life Insurance: Key Person, Buy-Sell Agreements, and Corporate-Owned Policies

人寿保险 / Life Insurance　P2 稳住 / Hold steady　Business Life Insurance · 模考 1 题

带着这几道题读：关键人身故后，为何未违约的商业贷款也会变成企业的流动性危机？ / Why can a commercial loan in good standing become an immediate corporate liquidity crisis upon a key person's death?；计算合格公司股份处置税负时，考试口径与现行 LCGE 怎么用？ / When calculating the tax liability on disposing of qualified corporate shares, how are the exam standard and current LCGE benchmarks applied?；多位股东签买卖协议，怎样既少管保单又拿到成本基础提升？ / When multiple shareholders execute a buy-sell agreement, how can they minimize policy administrative burdens while securing a cost basis step-up?；公司收到免税身故金后，能把全部金额都计入 CDA 免税发给股东吗？ / When a corporation receives a tax-free death benefit, can the entire amount credit the CDA for tax-free distribution to shareholders?

怎么考

- 场景辨析题：给出多股东或合伙人企业的背景（如人数变化、年龄或健康差距大），考查应选择交叉持有（cross-purchase）、公司赎回（share redemption）还是混合法（hybrid method），以及谁是投保人、受益人和买方。 / Scenario distinction questions: Presenting multi-shareholder or partnership business backgrounds (such as changes in participant numbers, or substantial age and health disparities), testing whether to select a cross-purchase, corporate share redemption, or hybrid method, as well as identifying the policyowner, beneficiary, and purchasing party.
- 税务与成本基础机制题：对比交叉持有与公司赎回对幸存股东调整后成本基础（ACB）和未来资本利得的影响，测試是否识破“持股比例结果相同代表税务后果等价”的误区。 / Taxation and cost basis mechanism questions: Comparing the impact of cross-purchase versus corporate share redemption on the surviving shareholders' adjusted cost basis (ACB) and future capital gains, testing whether candidates avoid the trap of assuming that identical shareholding percentages mean equivalent tax consequences.
- CDA 与公司保单资金流向题：考查公司收到免税身故给付后，哪部分能计入资本红利账户（CDA）并免税分配给股东，以及定期险或永久险的调整后成本基础（ACB）对 CDA 进账额的扣减作用。 / CDA and corporate policy fund flow questions: Testing which portion of a tax-free life insurance death benefit received by a corporation can credit the capital dividend account (CDA) for tax-free distribution to shareholders, and how the adjusted cost basis (ACB) of term or permanent life insurance reduces the CDA credit.
- 企业风险冲击与保额估算题：结合随时可催收贷款（demand loan）抽贷危机、关键人离世带来的技能损失（loss of skills）或视同处置资本利得税，考查关键人保险的三种保额估算思路与担保转让（collateral assignment）保费扣除条件。 / Business risk impact and coverage valuation questions: Combining demand loan recall crises, loss of

高频陷阱（看到信号就警觉）

持股比例相同等于机制与税务相同 / Assuming identical ownership percentages mean identical mechanisms and tax results：题干出现两名或多名股东讨论日后出售公司时的资本利得税，或询问总股数是否发生变化、谁是买方。 / The question stem features two or more shareholders discussing capital gains taxes on a future sale of the business, or asks whether total shares outstanding change and who the purchasing party is.

免税身故金全额进 CDA / Crediting the full tax-free death benefit to the CDA：题干给出公司持有保单的身故给付金额与非零的调整后成本基础（ACB），问可免税派发的资本红利增加额。 / The question stem provides the death benefit of a corporate-owned policy alongside a non-zero ACB and asks for the tax-free capital dividend increase.

交叉互保保额相等即负担公平 / Assuming equal coverage under criss-cross insurance creates equal premium burdens：题干特意交代股东之间存在明显的年龄差距、吸烟习惯差异或健康状况不对等，并采用交叉互保（criss-cross insurance）。 / The question stem notes significant disparities in age, smoking status, or health conditions between shareholders using criss-cross life insurance.

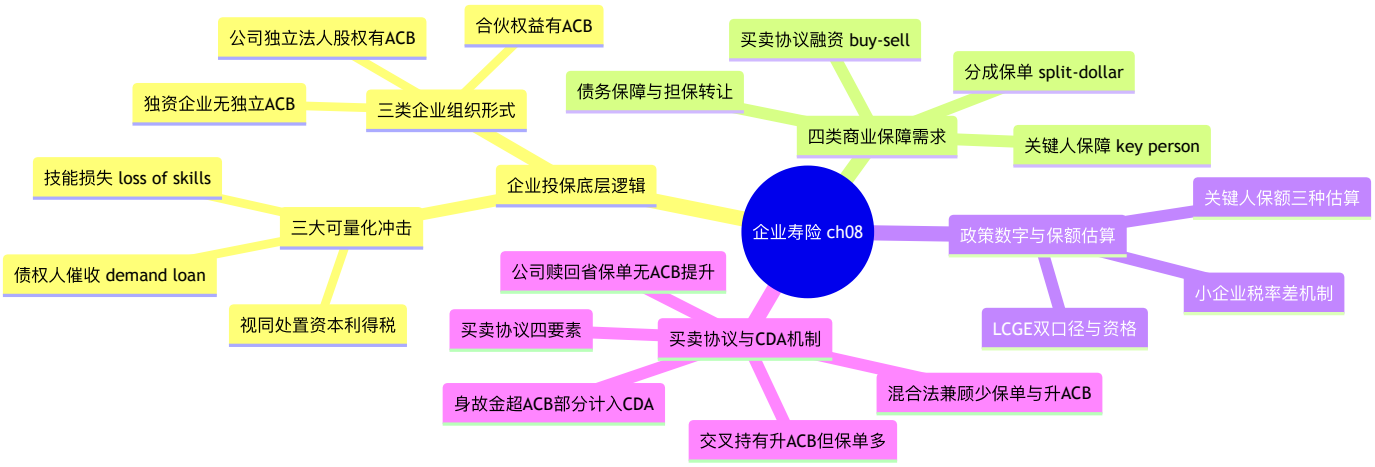
随时可催收贷款到期前安全 / Believing a demand loan is safe before maturity：题干提到企业依赖核心人物经营或担保，且账上有一笔商业随时可催收贷款（demand loan），询问核心人物身故后的流动性风险。 / The question stem mentions a business relying on a core founder or guarantor with a commercial demand loan on its balance sheet, asking about liquidity risks upon that person's death.

skills upon a key person's death, or capital gains tax upon deemed disposition, testing the three valuation methods for key person insurance and the statutory conditions for deducting premiums under a collateral assignment.

- 企业组织形式与双口径规则题：对比独资企业（sole proprietorship）、合伙企业（partnership）与公司（corporation）在业主身故时的资产处置与责任差异，以及终身资本利得豁免（LCGE）的适用资格与考试口径计算。 / Business structure and dual-benchmark rule questions: Comparing sole proprietorships, partnerships, and corporations regarding asset disposition and liability exposure upon the owner's death, alongside eligibility requirements and exam-benchmark calculations for the lifetime capital gains exemption (LCGE).

> **买卖协议只要定好买家和价格就完备 / Believing a buy-sell agreement is complete once buyer and valuation are set**：题干描述股东已由律师起草协议约定好作价方式和互相收购义务，但尚未配置任何资金工具或寿险保单。 / The question stem describes shareholders executing a drafted agreement with clear pricing and buyout obligations, but without securing funding vehicles or life insurance policies.

导图



第 8 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
企业身故三大可量化财务冲击 / Three quantifiable financial impacts of business death	loss of skills / creditor demands / capital gains tax	关键人或业主身故对企业的可量化冲击主要为技能损失空窗期成本、随时可催收贷款（demand loan）被要求还款的流动性危机，以及依据 ITA s.70(5) 死亡前按公允市值视同处置引发的资本利得税。 / The quantifiable impacts of a key person or owner's death on a business primarily include interim costs from loss of skills, liquidity crises caused by lender demands on demand loans, and capital gains taxes triggered by the deemed disposition of capital property at fair market value immediately prior to death under ITA s.70(5).
企业组织形式与独立 ACB 差异 / Business structures and separate ACB distinctions	sole proprietorship / partnership / corporation	独资企业与业主为同一法律实体且企业本身无独立调整后成本基础（ACB）；合伙权益与公司股权均有独立 ACB 可买卖继承，且公司为独立法人、股东原则上不对公司债务负责（个人担保或董事法定连带责任除外）。 / A sole proprietorship is legally identical to its owner and possesses no separate adjusted cost basis (ACB); both partnership interests and corporate shares have a separate ACB that can be bought, sold, or inherited, and a corporation is an independent legal entity whose shareholders are generally not liable for corporate debts (absent personal guarantees or statutory director liabilities).
企业场景下的可保利益原则 / Insurable interest principle in business contexts	insurable interest	核心判断标准是投保人是否会因被保险人身故遭受实际经济损失（涵盖企业对关键员工、债权人对债务人、合伙人或股东之间），保额须与预期经济损失合理对应并经财务核保。 / The core test of insurable interest is whether the policyowner will suffer a genuine financial loss upon the death of the life insured (including a business insuring key employees, creditors insuring debtors, and partners or shareholders insuring each other); coverage must reasonably correspond to the anticipated financial loss and satisfy financial underwriting.
终身资本利得豁免（LCGE）双口径与资格 / Lifetime capital gains exemption (LCGE) dual benchmarks and eligibility	lifetime capital gains exemption (LCGE)	考试口径 2022 年合格 CCPC 股份豁免额为 $913,630（农渔业财产 $1,000,000），2026 现行上限为 $1,275,000（按 50% 计入率对应扣除上限 $637,500）；普通经营合伙权益通常不适用，但符合定义的家族农渔业合伙权益可能适用。 / Under the 2022 exam standard, the lifetime capital gains exemption (LCGE) limit for qualified small business corporation (QSBC) shares is $913,630 ($1,000,000 for qualified farm and fishing property), whereas the 2026 current limit is $1,275,000 (providing a cumulative deduction of $637,500 at the 50% inclusion rate); ordinary commercial partnership interests are ineligible, but qualifying family farm or fishing partnerships may qualify.
关键人保额三种估算方法 / Three key person insurance valuation methods	key person insurance valuation	行业常用收入/薪酬倍数法、利润贡献法（毛利润贡献份额乘以替代期）、替代与债务保障法（猎头培训双薪成本加相关随时可催收贷款余额）互相印证，并非只取简单平均数。 / The industry commonly cross-references the income/salary multiple method, the profit contribution method (gross profit contribution share multiplied by replacement years), and the replacement and debt protection method (headhunter fees, training dual-salary costs, and outstanding balances of tied demand loans), rather than taking a simple mathematical average.
买卖协议完备的四个必要条件 / Four essential conditions of an enforceable buy-sell agreement	guaranteed buyer / guaranteed value / mandatory sale / guaranteed funding	一份能真正落地的买卖协议必须同时具备保证有买家、保证价格、强制出售和保证资金四项条件，其中保证资金（通常由寿险提供）是避免协议沦为空文的最关键一环。 / A fully workable buy-sell agreement must simultaneously satisfy four conditions: guaranteed buyer, guaranteed value, mandatory sale, and guaranteed funding; guaranteed funding (typically provided by life insurance) is the most critical element to prevent the agreement from becoming unenforceable.
交叉持有与公司赎回的核心差异 / Core distinctions between cross-purchase and share redemption	cross-purchase agreement vs. share redemption (entity purchase)	交叉持有由股东互保并直接买股，总股数不变且幸存股东获得新股份的成本基础提升（step-up in basis），但多人时保单数量按排列组合膨胀且年龄健康差异会导致保费不均；公司赎回由公司持保并注销股份，总股数减少、每人一张保单易管理，但幸存股东无成本基础提升。 / Under a cross-purchase agreement, shareholders insure each other and purchase shares directly, keeping total shares constant and giving the survivor a cost basis step-up on purchased shares, but multiple owners cause policy counts to multiply and health/age disparities create unequal premium burdens; under share redemption, the corporation owns policies and cancels redeemed shares, reducing total share count and requiring only one policy per shareholder, but providing no cost basis step-up to survivors.
混合法（本票法）的双重优势 / Dual advantages of the	hybrid method (promissory note)	公司统一持有保单并收取免税身故金记入 CDA，再向幸存股东派发免税资本红利，由幸存股东用该资金（常配合本票先行买股）偿还向遗产开出的本票，兼顾保单数量精简与幸存股东成本基础提升。 / Under the hybrid method, the corporation owns the policies and receives

hybrid method using promissory notes		the tax-free death benefit to credit its CDA, then distributes a tax-free capital dividend to surviving shareholders, who use those funds to repay the promissory notes issued to the estate for purchasing the deceased shareholder's shares; this achieves both a streamlined policy count and a cost basis step-up for the survivors.
资本红利账户（CDA）计入规则与申报 / Capital dividend account (CDA) credit rules and reporting	capital dividend account (CDA) / Form T2054	符合条件的私人公司收到免税寿险身故给付后，只有超出保单调整后成本基础（ACB）的部分能增加 CDA 余额，并通过提交 T2054 表（ITA s.83(2) 资本红利选择表）向加拿大税务居民股东免税分配。 / When a private corporation receives a tax-free life insurance death benefit, only the excess over the policy's adjusted cost basis (ACB) credits the capital dividend account (CDA), which can then be distributed tax-free to Canadian-resident shareholders by filing Form T2054 under ITA s.83(2).
保单担保转让与贷款保费扣除 / Collateral assignment of policies and loan premium deductibility	collateral assignment	企业将保单抵押给受限金融机构作贷款担保属于担保转让而非绝对转让，不触发处置；若贷款利息可扣且满足 ITA s.20(1)(e.2)，可在当年保费与纯保费成本（NCPI）较小者中按合理对应期间欠款比例扣除。 / Pledging a policy to a restricted financial institution as loan collateral constitutes a collateral assignment rather than an absolute transfer and does not trigger a disposition; where loan interest is deductible and ITA s.20(1)(e.2) requirements are met, a tax deduction is allowed for the portion of the lesser of annual premium and net cost of pure insurance (NCPI) that reasonably corresponds to the outstanding loan balance.

自测提问（康奈尔左栏）

1. 为什么独资企业、合伙企业和公司在业主身故时的税务与债务冲击深度不同？ / Why do sole proprietorships, partnerships, and corporations experience different depths of tax and liability impact upon an owner's death?
2. 买卖协议必须具备哪四个条件，为什么说保证资金是最关键的一环？ / What four conditions must a buy-sell agreement satisfy, and why is guaranteed funding the most critical element?
3. 交叉持有、公司赎回与混合法在保单数量、总股数变化和幸存股东成本基础（ACB）上有何区别？ / How do cross-purchase, share redemption, and hybrid methods differ regarding policy count, total shares outstanding, and the survivor's adjusted cost basis (ACB)?
4. 公司收到的免税寿险身故给付，哪一部分可以计入资本红利账户（CDA）免税分给股东？ / Which portion of a tax-free life insurance death benefit received by a corporation can credit the capital dividend account (CDA) for tax-free distribution to shareholders?
5. 股东人数超过两人或年龄健康差距悬殊时，为什么交叉互保会暴露出严重缺陷？ / Why does criss-cross insurance expose severe structural flaws when shareholders exceed two or have substantial age and health disparities?

总结：用三句话总结企业购买关键人保险、设计买卖协议融资结构（交叉持有 vs 公司赎回 vs 混合法）以及通过 CDA 分配身故给付的核心税务逻辑。 / In three sentences, summarize the core tax and structural logic of purchasing key person life insurance, structuring buy-sell agreement funding (cross-purchase vs. share redemption vs. hybrid method), and distributing proceeds through the CDA.

第 9 章 · 投保与核保 / Application and Underwriting

人寿保险 / Life Insurance　P1 必拿分 / Must score　Application & Underwriting · 模考 3 题

带着这几道题读：吸烟和周末极限跳伞，哪一个才会让保单变成加费保单？ / Between smoking cigarettes and weekend extreme skydiving, which one actually causes a policy to become a rated policy?；客户交了首月保费，但在TIA问卷勾选了一项疾病，临时保障能生效吗？ / If a client pays the first month's premium but checks 'yes' to an illness on the TIA questionnaire, can temporary coverage take effect?；核保员在MIB查到危险爱好编码，能否直接下达拒保通知？ / Can an underwriter issue a decline notice solely upon finding a hazardous hobby code in the MIB database?；保单签发后去交付时发现客户刚确诊重病，代理人能不能把保单交出去？ / If the client is diagnosed with a critical illness after policy issue but before delivery, can the agent deliver the policy?；夫妻离婚后，当年给配偶买的保单会自动失效吗？ / Does a life insurance policy purchased on a spouse automatically become void after the couple divorces?

怎么考

- 生活方式与保费影响辨析题：给出申请人的吸烟状态、偶尔饮酒或高风险极限运动等背景，考查哪些因素只决定基础费率表分类（如吸烟人与非吸烟人标准费率），哪些因素才会真正触发加费或除外条款。 / Lifestyle and premium impact discrimination questions: The question stem provides an applicant's background such as smoking status, occasional alcohol use, or high-risk extreme sports, testing which factors merely determine standard rate classification (such as smoker versus non-smoker standard rates) and which factors actually trigger a rating or an exclusion clause.
- 核保信息源与权限边界题：围绕代理人实地核保、医疗信息局（MIB）编码记录、主治医生报告（APS）及机动车记录（MVR）设问，考查谁承担费用、代理人能否替核保员定级，以及MIB记录能否单独作为直接拒保依据。 / Underwriting information sources and authority boundaries questions: Centering on agent field underwriting, Medical Information Bureau (MIB) coded records, Attending Physician's Statements (APS), and Motor Vehicle Records (MVR), testing who pays the costs, whether an agent can assign risk classifications on behalf of underwriters, and whether an MIB record alone can serve as direct grounds for decline.
- 临时保险协议（TIA）与保单交付生效题：在递交申请到保单交付的空窗期设置健康变化或问卷答「是」的情景，测试TIA自动拒签条件、代理人签发裁量权，以及保单交付时「可保性无变化」的生效前提。 / Temporary Insurance Agreement (TIA) and policy delivery validity questions: Setting scenarios of health changes or answering 'yes' on questionnaires during the gap between application submission and policy delivery, testing automatic TIA disqualification conditions, agent issuance discretion, and the precondition that insurability must remain unchanged upon policy delivery.
- 不实陈述与两年不可抗辩期题：对比申请人在投保单上的无意错误、故意欺诈性虚报与年龄误报，考查合同在被保险人生存期间有效满两年后的法律保护边界，以及欺诈为何不受不可抗辩期保护。 / Misrepresentation and two-year

高频陷阱（看到信号就警觉）

混淆基础费率分类与评级加费 / Confusing standard rate classification with premium ratings：题干列举吸烟、偶尔小酌与频繁高风险运动，问哪一项会导致保单被加费（rated）或附加除外条款。 / The question stem lists smoking, occasional social drinking, and frequent high-risk sports, asking which item will cause the policy to be rated or issued with an exclusion clause.

误认MIB报告可直接作为拒保依据 / Assuming an MIB report can serve directly as grounds for decline：选项中出现「仅凭MIB记录直接拒保或加费（solely based on the MIB report）」等绝对化表述。 / Options contain absolute statements such as declining or rating solely based on the MIB report.

认为交了首期保费TIA就必然生效 / Believing paying the first premium guarantees TIA coverage：题干提到申请人已付首月保费，但在TIA健康问卷有一项答「是」，或代理人观察到申请人持续剧烈咳嗽等异常。 / The question stem mentions an applicant paying the first month's premium but answering 'yes' to an item on the TIA health questions, or the agent observing abnormalities like persistent severe coughing.

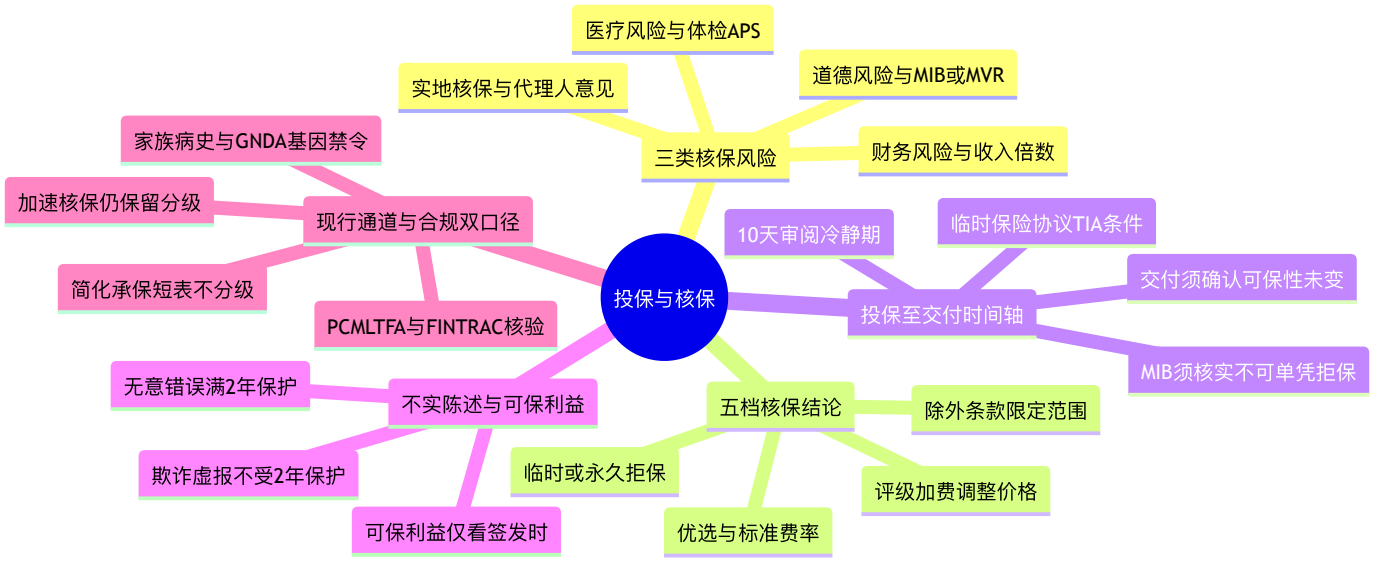
把可保利益当成理赔时的持续要求 / Treating insurable interest as an ongoing requirement at claim time：题干出现「多年前投保时为夫妻或商业伙伴，现已离婚或离职，问原保单是否有效或能否追加新保单」。 / The question stem features a scenario where a couple or business partners bought insurance years ago and are now divorced or separated, asking whether the existing policy remains valid or if a new policy can be added.

incontestability questions: Comparing innocent mistakes, deliberate fraudulent misrepresentations, and misstatements of age on the application, testing the legal boundaries of protection once the contract has been in force for two years during the lifetime of the insured, and why fraud is never protected by incontestability.

- 双口径与承保通道对比题：考查加速核保与简化承保在是否保留风险分级上的核心差异，以及家族病史问询（合法）与索要基因检测结果（《基因非歧视法》禁止）之间的合规边界。 / Dual benchmarks and underwriting channel comparison questions: Testing the core difference between accelerated underwriting and simplified issue regarding whether risk classification tiers are retained, as well as the compliance boundary between asking about family medical history (permitted) and demanding genetic test results (prohibited by the Genetic Non-Discrimination Act).

> **混淆无意错误与欺诈的2年不可抗辩规则 / Confusing innocent mistakes with fraud under the two-year incontestability rule**：题干明确区分申请人是「不知情/无意漏报（mistake）」还是「故意隐瞒病史或吸烟史（fraud）」，并给出保单已在被保险人生存期间满2年的时间节点。 / The question stem clearly distinguishes whether the applicant made an innocent mistake or committed deliberate fraud concealing medical or smoking history, providing a timeline where the policy has been in force for two years during the insured's lifetime.

导图



第 9 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
实地核保与代理人职责边界 / Field underwriting and agent authority boundaries	Field underwriting / Agent's comments	代理人作为保司的「眼睛」负责收集信息、核实身份、见证签字并在代理人意见栏记录个人观察，但不能代替核保员决定承保等级或替申请人修改健康回答。 / Acting as the insurer's eyes, the agent is responsible for collecting information, verifying identity, witnessing signatures, and recording personal observations in the agent's comments section, but cannot replace the underwriter in deciding risk classifications or alter health answers on behalf of the applicant.
三类核保风险及信息源 / Three underwriting risk categories and information sources	Physical/medical risk, Financial risk, Moral hazard	核保综合评估医疗风险（问卷、体检、APS、MIB）、财务风险（职业收入净值、既有保单）与道德风险（MIB、MVR、调查报告、代理人意见）。 / Underwriting comprehensively evaluates medical risk (questionnaires, medical exams, APS, MIB), financial risk (occupation, income, net worth, existing coverage), and moral hazard (MIB, MVR, inspection reports, agent's comments).
基础费率分类与加费的区别 / Difference between standard rate classification and premium ratings	Standard rate classification vs. Rated policy	吸烟状态决定申请人适用吸烟人或非吸烟人基础标准费率表，而频繁高风险运动、高危地区旅行或严重驾驶违规才会触发在基础费率上加收保费的加费（rated）或除外条款（exclusion）。 / Smoking status determines whether the applicant qualifies for the smoker or non-smoker standard rate table, whereas frequent high-risk sports, hazardous travel, or severe driving violations trigger a premium rating (rated policy) or an exclusion clause on top of standard rates.
单向保护与撤销加费申请 / Unilateral contract protection and removal of rating	Unilateral protection / Removal of rating	已生效且具续保保证的寿险不会因被保险人事后单纯健康恶化而重新评级加费，但若加费原因消失（如戒烟满规定年限），投保人可申请降低或撤销评级。 / Once in force with guaranteed renewability, a life insurance policy will not be re-rated with a premium surcharge simply because the insured's health deteriorates, but if the cause of a rating ceases to exist (such as quitting smoking for the required period), the policyowner can apply for a reduction or removal of the rating.
加速核保与简化承保的机制差异 / Mechanisms distinguishing accelerated underwriting from simplified issue	Accelerated underwriting vs. Simplified issue	两者均免去传统体检，但加速核保利用算法与既有数据作全面评估并保留优选、标准、加费等分级，而简化承保仅凭短表格与即时数据直接接受或拒绝且不设分级、保费通常更高。 / While both eliminate traditional medical exams, accelerated underwriting uses algorithms and existing data for comprehensive evaluation and retains risk classifications such as preferred, standard, and rated, whereas simplified issue uses short questionnaires and instant data to accept or decline without tiering, typically charging higher premiums.
家族病史与基因检测双口径 / Dual benchmarks of family history and genetic testing	Family history vs. Genetic Non-Discrimination Act (GNDA)	核保问卷询问父母及兄弟姐妹的家族病史完全合法，但《基因非歧视法》（GNDA）严禁强迫基因检测或要求披露基因检测结果作为合同条件。 / Asking about family medical history of parents and siblings on an application is entirely legal, but the Genetic Non-Discrimination Act (GNDA) strictly prohibits requiring genetic testing or disclosing genetic test results as a condition of insurance.
临时保险协议（TIA）生效与拒签规则 / Temporary Insurance Agreement (TIA) validity and disqualification rules	Temporary Insurance Agreement (TIA) / Conditional receipt	申请TIA须提交完整正式申请、缴纳至少一个月保费并单独填写TIA问卷；若TIA健康问卷任一问题答「是」或代理人观察到申请人存在健康疑虑，均不得签发TIA。 / Applying for a TIA requires submitting a complete formal application, paying at least one month of premium, and completing a separate TIA questionnaire; if any question on the TIA health questionnaire is answered 'yes' or if the agent observes health concerns, a TIA must not be issued.
MIB与APS的核保使用规则 / Underwriting rules for MIB and APS	Medical Information Bureau (MIB) / Attending Physician's Statement (APS)	主治医生报告（APS）由保司付费向申请人医生索取；医疗信息局（MIB）共享编码化风险线索，但保司绝不能仅凭MIB报告直接拒保，必须先独立核实事实。 / An Attending Physician's Statement (APS) is requested by the insurer from the applicant's physician at the insurer's expense; the Medical Information Bureau (MIB) shares coded risk clues, but an insurer must never decline an application solely based on an MIB report and must independently verify the facts first.
保单交付生效要件与10天冷静期 / Policy delivery validity requirements and ten-day free-look period	Policy delivery / Insurability unchanged / 10-day free-look	保单交付是核保的延续，须确认首期保费付清、投保人接受且被保险人自申请以来可保性无重大变化方可完成交付；收单后通常享至少10天审阅期可无条件退保退费。 / Policy delivery is a continuation of the underwriting process, requiring confirmation that the initial premium is paid in full, the policyowner accepts the

		policy, and the insured's insurability has not changed since the application; receipt of the policy begins a free-look period of at least 10 days for unconditional cancellation and premium refund.
无意错误、欺诈与可保利益时点 / Innocent mistake, fraud, and timing of insurable interest	Mistake vs. Fraudulent misrepresentation / Insurable interest	一般无意重大错误在合同于被保险人生存期间有效满2年且无欺诈时受不可抗辩保护，欺诈性虚报不受该2年保护；可保利益只需在保单签发时存在，事后离婚不影响原合同效力。 / Innocent material mistakes are protected by incontestability once the contract has been in force for two years during the lifetime of the insured without fraud, whereas fraudulent misrepresentation is never protected; insurable interest is required only at policy issue, and a subsequent divorce does not affect the validity of the existing contract.

自测提问（康奈尔左栏）

1. 为什么吸烟人交更高保费不属于「加费保单（rated policy)」，哪些因素才会真正触发加费或除外条款？ / Why does a smoker paying a higher premium not count as a rated policy, and what factors actually trigger a rating or an exclusion clause?
2. 代理人在实地核保（field underwriting）和签发临时保险协议（TIA）时，分别拥有什么权限与禁区？ / What authorities and restrictions does an agent have during field underwriting and when issuing a Temporary Insurance Agreement (TIA)?
3. 核保员查到MIB不良编码记录时为什么不能直接拒保，必须走哪一步程序？ / Why can an underwriter not decline coverage solely upon discovering an adverse MIB code, and what step must be taken first?
4. 从保单签发到正式交付给客户的空窗期内，如果被保险人健康发生重大变化，代理人必须怎么做？ / If the insured experiences a material health change between policy issuance and formal delivery, what must the agent do?
5. 无意错误与欺诈性虚报在2年不可抗辩期规则下有什么本质区别，家族病史与基因检测结果在合规上如何区分？ / What is the fundamental difference between innocent mistakes and fraudulent misrepresentation under the two-year incontestability rule, and how are family medical history and genetic test results distinguished under compliance rules?

总结：请用三句话总结本章核心：第一句区分三类风险与五档结论（特别是吸烟分类与加费的区别），第二句串起从TIA、MIB核实到交付确认无变化的流程硬约束，第三句写清2年不可抗辩期及GNDA/FINTRAC双口径边界。 / Summarize the core of this chapter in three sentences: First, distinguish the three risk categories and five underwriting outcomes (especially the difference between smoker rate classification and ratings); second, connect the strict procedural constraints from TIA and independent MIB verification to confirming unchanged insurability at delivery; third, articulate the two-year incontestability rule and the compliance boundaries under GNDA and FINTRAC.

第 10 章 · 评估寿险需求 / Assessing the Client's Situation: Determining Life Insurance Needs (Income Replacement vs. Capital Needs Approach)

人寿保险 / Life Insurance　P1 必拿分 / Must score　Assessing Needs · 模考 6 题

带着这几道题读：题干同时给房屋市值和按揭余额，并有团体寿险时，怎么算建议新增保额？ / When the question stem gives both property market value and mortgage balance, and mentions group life insurance, how do you calculate recommended new coverage?；收入替代法同时计入边际税率与通胀率时，资本化价值怎么一步步算？ / When the income replacement approach accounts for both marginal tax rates and inflation, how is capitalized value calculated step by step?；离婚调解协议没写必须买寿险，前配偶的抚养费义务在身故后会自动消失吗？ / If a divorce mediation agreement does not explicitly require buying life insurance, does the child support obligation automatically disappear upon death?；客户名下有继续经营的合格小型企业股份和合伙权益，身故税负与可用资产怎么算？ / When a client holds ongoing qualified small business corporation shares and partnership interests, how are death taxes and available assets calculated?

怎么考

- 情景净保额计算题：给出家庭月开支、政府遗属给付、房屋市值与按揭余额、既有团体险，考你用资本需求法（capital needs approach）算出最终建议新增保额，重点测验是否误用房价代替按揭余额、是否漏减既有保障。 / Scenario net coverage calculation questions: The question stem provides household monthly expenses, government survivor benefits, property market value and mortgage balance, and existing group insurance, testing your ability to calculate the recommended new insurance amount using the capital needs approach, focusing on whether you mistakenly use property market value instead of mortgage balance and whether you omit deducting existing coverage.
- 收入替代法四步调整题：给出税后年收入、投资回报率、边际税率与通胀率，考你区分未调整、仅税后调整、仅通胀调整、税后加通胀双重调整四步的资本化价值（capitalized value）公式与结果差异。 / Income replacement approach four-step adjustment questions: The question stem provides annual after-tax income, investment rate of return, marginal tax rate, and inflation rate, testing your ability to distinguish the capitalized value formulas and result differences across four steps: unadjusted, after-tax adjustment only, inflation adjustment only, and dual adjustment for both taxes and inflation.
- 资本保留法与资本耗尽法辨析题：给出有明确终止年限的抚养需求或终身配偶收入需求，考你判断何时该用资本耗尽法（capital drawdown method）、何时该用资本保留法（capital retention method），以及选错方法会导致保额如何失真。 / Capital retention versus capital drawdown discrimination questions: The question stem provides dependency needs with a definite end date or permanent spousal income needs, testing your ability to determine when to use the capital drawdown method versus the capital retention method, and how choosing the wrong method distorts the required coverage amount.
- 家庭与企业复杂处境排查题：涉及再婚混合家庭的调解协议赡养费、全职照护配偶复工计划、独资与合伙及合格小型企业股

高频陷阱（看到信号就警觉）

用房价代替按揭余额 / Using property market value instead of mortgage balance：题干同时出现房屋市值（market value）与按揭余额（mortgage balance）两个数字。 / The question stem lists both property market value and mortgage balance figures.

漏减可用既有保障 / Omitting deduction of available existing coverage：题干末尾提到雇主提供的团体寿险（group life insurance）、既有个人保单或挂钩买卖协议的公司保单。 / The end of the question stem mentions employer-provided group life insurance, existing personal policies, or corporate policies tied to buy-sell agreements.

不可变卖资产混入可用资产池 / Mixing illiquid non-saleable assets into the available asset pool：题干出现配偶将继续居住（continue living in）、家人计划保留经营（retain and continue operating）或传给子女等限制变现的措辞。 / The question stem includes wording restricting liquidation such as the spouse will continue living in, the family plans to retain and continue operating, or passing down to children.

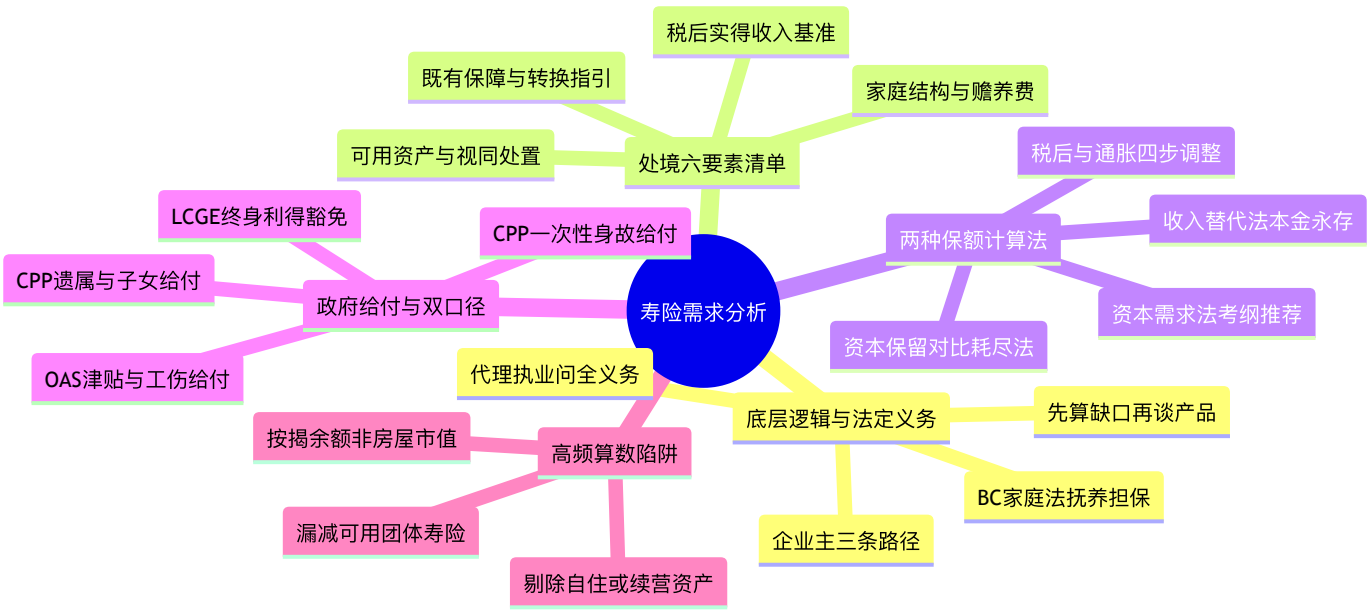
资本保留法与耗尽法混用 / Confusing the capital retention method with the capital drawdown method：题干明确给出需要覆盖的具体年数（如10年、14年）或子女到达特定年龄的终点，或同时给出回报率、税率与通胀率三个百分比。 / The question stem specifies a definite number of years to cover (such as 10 or 14 years), a milestone child age, or provides rate of return, tax rate, and inflation rate percentages simultaneously.

份的视同处置（deemed disposition），考你六要素清单中哪些隐性负债必须计入、哪些不可变卖资产必须剔除。 / Complex family and business situation assessment questions: Involving mediation agreement support payments in blended families, return-to-work plans for caregiving spouses, and deemed disposition of sole proprietorships, partnerships, and qualified small business corporation (QSBC) shares, testing which hidden liabilities from the six-element checklist must be included and which non-liquid assets must be excluded.

- 考试口径与现行规定双口径题：围绕加拿大退休金计划遗属给付（CPP survivor benefits）、终身资本利得豁免（lifetime capital gains exemption, LCGE）及团体险转换期，考你在考场按题干与考试口径作答、同时识别过度乐观代入最高额的陷阱。 / Exam benchmark versus current rule dual-benchmark questions: Centering on Canada Pension Plan (CPP) survivor benefits, the lifetime capital gains exemption (LCGE), and group life conversion windows, testing your ability to answer on the exam according to the question stem and exam benchmarks while identifying traps of overly optimistic assumptions using maximum amounts.

考场旧口径与现行规则混淆 / Confusing exam legacy benchmarks with current rules：题干涉及CPP一次性身故给付、遗属与子女月给付、LCGE额度，或出现普通经营合伙（general operating partnership）与合格小型企业公司股份（QSBC shares）。 / The question stem involves the CPP lump-sum death benefit, monthly survivor and child benefits, or LCGE amounts, or mentions general operating partnerships versus qualified small business corporation (QSBC) shares.

导图



第 10 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
需求分析独立于产品推荐 / Needs analysis independent of product recommendations	needs analysis approach	需求分析是先于产品推荐的独立财务分析文件，旨在算出家庭少掉该份收入后的保障缺口，而非直接决定买哪张保单。 / The needs analysis approach is an independent financial analysis document that precedes product recommendations, designed to calculate the family's coverage shortfall if that income were lost, rather than immediately determining which policy to buy.
前配偶赡养费与投保义务 / Spousal support and court-ordered insurance obligations	court-ordered insurance	在BC省Family Law Act s.170(e)及s.171下，即使调解协议未明文要求投保，只要抚养义务未写明随身故终止，前配偶仍可能对遗产索赔。 / Under British Columbia's Family Law Act s. 170(e) and s. 171, even if a mediation agreement does not explicitly require purchasing insurance, as long as the support obligation does not state that it terminates upon death, the former spouse may still claim against the estate.
终身资本利得豁免双口径与资格 / Lifetime capital gains exemption dual benchmarks and eligibility	lifetime capital gains exemption (LCGE)	考试口径2022年合格小型企业股份上限为$913,630（农渔业$1,000,000），2026年现行统一为$1,275,000；普通经营合伙不适用，但合格家族农渔业合伙权益可适用。 / Under the 2022 exam benchmark, the limit for qualified small business corporation (QSBC) shares is $913,630 ($1,000,000 for farming and fishing), whereas the 2026 current indexed limit is $1,275,000; general operating partnerships are ineligible, but qualified family farm or fishing partnership interests may qualify.
CPP遗属与身故给付双口径 / CPP survivor and death benefit dual benchmarks	CPP survivor benefits	CPP一次性身故给付基本额为$2,500（2025年起无合资格遗属且未领退休或伤残给付等条件时可加$2,500至$5,000）；月给付考场按题干或2022旧值（65岁以下$674.79、65岁以上$752.15、子女$264.53），2026现行最高为$803.54、$904.59及子女$307.81。 / The basic CPP lump-sum death benefit is $2,500 (starting in 2025, an additional $2,500 top-up to $5,000 is available under specific conditions such as having no eligible survivor and no prior retirement or disability benefits); for monthly benefits, the exam uses values from the question stem or 2022 snapshot ($674.79 for under 65, $752.15 for 65 and older, and $264.53 for children), whereas the 2026 current maximums are $803.54, $904.59, and $307.81 for children.
收入替代法及回报率四步调整 / Income replacement approach and four-step return adjustments	income replacement approach	将税后实得收入（take-home pay）除以投资回报率求资本化价值；计入税后回报率为回报率×(1−税率)，计入通胀调整回报率为(1+回报率)÷(1+通胀率)−1。 / Divide after-tax take-home pay by the investment rate of return to determine the capitalized value; the after-tax rate of return is calculated as return x (1 – tax rate), and the inflation-adjusted rate of return is calculated as (1 + return) / (1 + inflation rate) – 1.
资本需求法核心公式 / Capital needs approach core formula	capital needs approach	考试口径更推荐资本需求法：先算遗属身故后开支减身故后收入的收入缺口（income shortfall）并资本化，加上一次性资本需求得出总需求，再减去身故时可用资产与既有保障得出资本缺口（capital shortfall）。 / The exam framework recommends the capital needs approach: first calculate the survivor income shortfall (post-death expenses minus post-death income) and capitalize it, add one-time capital needs to arrive at total capital needs, and then subtract assets available upon death and existing coverage to determine the capital shortfall.
资本保留法与资本耗尽法选择 / Choosing between capital retention and capital drawdown methods	capital retention method / capital drawdown method	无明确终点的长期收入替代用资本保留法（本金永存只花利息）；有明确年限的需求用资本耗尽法（本金用尽即止，零实际净收益时等于年缺口×年数）。 / Long-term income replacement without a definite end date uses the capital retention method (preserving principal permanently and spending only interest); needs with a definite duration use the capital drawdown method (exhausting principal over time, which equals annual shortfall x number of years under a zero net real return assumption).
按揭余额与可用资产界定 / Mortgage balance and defining available assets	assets available upon death	房贷净需求只算按揭余额而非房屋市值；配偶继续居住的自住房或家人保留继续经营的公司股权不计入可变卖的身故时可用资产池。 / Net mortgage needs include only the remaining mortgage balance, not property market value; the family home where a surviving spouse will continue living or corporate shares the family plans to retain and operate are excluded from the liquid pool of assets available upon death.
团体寿险抵扣与转换权边界 / Existing group life deductions and	existing coverage review	确认死亡时可赔、可供家属使用且未用于买卖协议等其他用途的既有保障才可从总需求扣减；BC省团体险离职转换权仅受CLHIA行业自律指引约束（考试口径内部有30天与31天两处表述）。 / Existing coverage can be deducted from total capital needs only after confirming it is payable upon death, available for family needs, and not earmarked for other

conversion privilege boundaries	purposes such as buy–sell agreements; in BC, group life conversion privileges upon employment termination rest solely on CLHIA industry guidelines (with the exam text citing both 30–day and 31–day windows).

自测提问（康奈尔左栏）

1. 为什么需求分析必须独立于产品推荐？BC省家庭法对前任赡养费与保单有何规定？ / Why must needs analysis be independent of product recommendations, and what does BC family law provide regarding spousal support and life insurance?
2. CPP身故给付、遗属与子女月给付及LCGE在2022考试口径与2026现行标准下各是多少？ / What are the amounts for CPP death benefits, monthly survivor and child benefits, and the LCGE under the 2022 exam snapshot versus 2026 current standards?
3. 收入替代法四步回报率调整怎么算？为什么考纲更推荐资本需求法？ / How are the four–step rate of return adjustments calculated under the income replacement approach, and why does the syllabus recommend the capital needs approach?
4. 资本保留法与资本耗尽法各自适用什么情景？房贷需求该用市值还是按揭余额？ / What scenarios do the capital retention and capital drawdown methods apply to, and should mortgage needs use market value or mortgage balance?
5. 计算最终建议新增保额时，哪些资产必须从可用资产池剔除？哪些既有保障不能直接抵扣？ / When calculating recommended new coverage, which assets must be excluded from the available asset pool, and which existing coverage cannot be directly deducted?

总结：用三句话总结：收入替代法与资本需求法的底层假设差异、从总资本需求到建议新增保额的完整减法链条，以及房贷、不可变卖资产与双口径数字的避坑口诀。 / Summarize the core of this chapter in three sentences: First, explain the underlying assumption differences between the income replacement and capital needs approaches; second, trace the complete deduction chain from total capital needs to recommended new coverage; third, articulate the key rules to avoid traps regarding mortgages, illiquid assets, and dual–benchmark statutory figures.

第 11 章 · 提出寿险推荐 / Recommending an Insurance Policy

人寿保险 / Life Insurance　P1 必拿分 / Must score　Recommending · 模考 4 题

带着这几道题读：客户现金流紧张时，默认推荐保额最大、条款最全的终身险为什么是错的？ / Why is it wrong to default to recommending the largest and most comprehensive whole life policy when a client's cash flow is tight?；关于替换披露表格 LIRD 的法律依据与魁北克例外，考场怎么答？ / How should candidates answer exam questions regarding the statutory basis of the LIRD replacement disclosure form and the Quebec exception?；含非保证金额的演示件为什么要展示两套情景，客户签字代表什么？ / Why must illustrations containing non-guaranteed values display two scenarios, and what does the client's signature signify?；定期险期满时客户已开始吸烟，为什么续保旧单可能比买新单更有利？ / When an expiring term policyholder has started smoking, why might renewing the existing policy be more advantageous than buying a new one?；同司换单与跨司换单在不当行为定性上有什么区别，何时才能取消旧单？ / What is the distinction between intra-company and cross-company replacements regarding improper conduct, and when can the old policy be cancelled?

怎么考

- 产品类型与期限匹配题：给出客户的具体风险（如房贷、收入替代、身故税负、特殊需要子女终身抚养）及现金流状况，考查以风险持续期（duration of risk）为主判据选择定期险（term insurance）、可转换定期险（convertible term）还是永久险（permanent insurance）。 / Product type and duration matching questions: Presenting a client's specific risks (such as a mortgage, income replacement, death tax liability, or lifelong support for a special needs child) and cash flow situation, testing the selection of term insurance, convertible term insurance, or permanent insurance using duration of risk as the primary criterion.
- 多方案成本比较与续保决策题：考查累计成本分析（cumulative cost analysis）而非仅看首年保费，或当客户在定期险期满且健康恶化（如开始吸烟）时，比较按原健康等级续保与重新核保买新单的利弊。 / Multi-option cost comparison and renewal decision questions: Testing cumulative cost analysis rather than merely looking at first-year premiums, or comparing the pros and cons of renewing at the original health rating versus undergoing new underwriting to purchase a new policy when an expiring term policyholder's health has deteriorated (such as starting to smoke).
- 保单演示件（policy illustration）合规与签字意义题：考查定期险与含非保证金额永久险演示件的区别、保证值与非保证值（guaranteed vs non-guaranteed values）的分列展示、至少两套情景（at least two scenarios）的要求，以及客户签字仅代表理解演示性质而非保司承诺回报。 / Policy illustration compliance and signature significance questions: Testing the distinctions between term insurance illustrations and permanent insurance illustrations containing non-guaranteed amounts, the separate presentation of guaranteed versus non-guaranteed values, the requirement for at least two scenarios, and that the client's signature signifies only understanding the nature of the illustration rather than an insurer guarantee of projected returns.

高频陷阱（看到信号就警觉）

目标误置（把最贵最全当默认最优） / Misplaced objective (treating the most expensive and comprehensive option as the default best)：题干强调客户目前收入有限或现金流紧张（tight cash flow），而选项出现保费昂贵的全额终身险组合。 / The question stem emphasizes that the client currently has limited income or tight cash flow, while options feature an expensive full whole life combination.

漏算一步（只看首年保费或忽略原健康等级锁定） / Missing a step (looking only at first-year premiums or overlooking original health rating lock-in)：题干出现不同期限定期险组合对比，或期满客户期间健康变差、开始吸烟却要决定续保还是重买。 / The question stem presents a comparison of term insurance combinations with different durations, or an expiring policyholder whose health has worsened or who started smoking having to decide between renewal and new coverage.

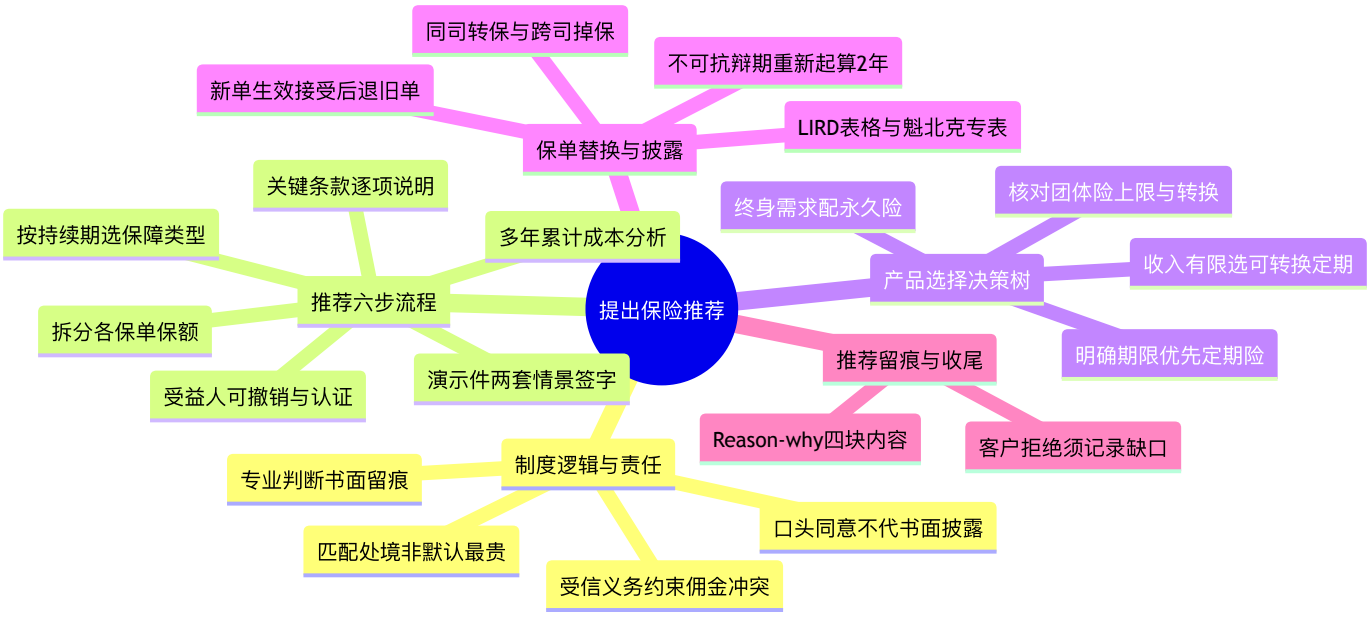
管辖混淆（受益人默认可撤销与魁北克替换表格） / Jurisdictional confusion (revocable beneficiary default versus Quebec replacement form)：题干出现指定配偶为受益人未声明是否可撤销，或询问魁北克与其余省份在保单替换披露表格上的差异。 / The question stem mentions naming a spouse as beneficiary without specifying whether it is revocable, or asks about differences between Quebec and other provinces regarding policy replacement disclosure forms.

同类不同规则（转保 churning 与掉保 twisting 混淆） / Similar terms with different rules (confusing churning with twisting)：题干描述代理人诱导客户退旧单换新单时，明确提到在同一家保险人内部（same insurer）或跨不同保险人（different insurers）。 / The question stem describes an agent inducing a client to surrender an old policy for a new one, explicitly noting whether it occurs within the same insurer or across different insurers.

- 保单替换（policy replacement）披露与流程顺序题：考查转保（churning）与掉保（twisting）的同司/跨司区分、寿险替换声明书（LIRD）的适用范围（魁北克使用专门表格）、客户主动提出更换仍须披露，以及必须待新单生效且客户接受后才能取消旧单。 / Policy replacement disclosure and procedural sequence questions: Testing the intra-company versus inter-company distinction between churning and twisting, the scope of application of the Life Insurance Replacement Declaration (LIRD) (with Quebec using its own specific form), the requirement that disclosure is still mandatory even when initiated by the client, and the rule that the existing policy must only be cancelled after the new policy is in force and accepted by the client.
- 客户拒绝或折衷接受推荐时的留痕题：考查当客户因预算限制只买部分保额或拒绝推荐时，代理人如何通过书面推荐记录（reason-why record）说明未覆盖缺口并由客户确认，而非强行施压或放弃记录。 / Client refusal or partial acceptance record-keeping questions: Testing how an agent uses a written reason-why record to document uncovered gaps and obtain client acknowledgement when the client purchases only partial coverage due to budget constraints or refuses the recommendation entirely, rather than applying pressure or abandoning documentation.

> **前提误用与流程倒置（客户主动换单免披露或先退旧单） / Misapplied premise and inverted process (assuming client-initiated replacements waive disclosure or cancelling the old policy prematurely)**：题干写明客户主动要求替换既有保单，或询问新单核保期间旧保单应何时取消。 / The question stem states that the client actively requested replacing an existing policy, or asks when the existing policy should be cancelled during underwriting of the new policy.

导图



第 11 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
风险持续期决定险种 / Duration of risk determines policy type	duration of risk	需求有明确终止年限优先选定期险，需求终身存在优先选永久险，需求不确定且收入有限时选可转换定期险保留未来选项。 / Needs with a definite termination horizon favor term insurance, lifelong needs favor permanent insurance, and uncertain needs with limited income favor convertible term insurance to preserve future options.
多年累计成本分析 / Multi-year cumulative cost analysis	cumulative cost analysis	比较单张定期险续保与不同期限定期险组合时，必须比较多年累计总保费而非仅看首年保费，因为续保跳涨幅度决定长期成本。 / When comparing renewing a single term policy against combinations of term policies with different durations, one must compare multi-year cumulative total premiums rather than just looking at first-year premiums, because the magnitude of renewal premium jumps determines long-term cost.
受益人默认可撤销规则 / Default revocable beneficiary rule	revocable vs irrevocable beneficiary	除魁北克针对遗嘱外书面指定已婚或民事结合配偶默认不可撤销外，全国其余省份受益人指定默认均为可撤销，欲设不可撤销须主动声明。 / Except in Quebec where designating a married or civil union spouse in writing outside a will is irrevocable by default, beneficiary designations across all other Canadian provinces are revocable by default, and establishing an irrevocable designation requires an explicit declaration.
保单演示件情景与签字意义 / Policy illustration scenarios and signature significance	policy illustration	含非保证金额的寿险演示件必须清楚区分保证值与非保证值并至少展示两套情景，客户签字确认的是理解演示件性质而非保司承诺达到该回报。 / Life insurance illustrations containing non-guaranteed values must clearly distinguish between guaranteed and non-guaranteed values and display at least two scenarios; the client's signature confirms understanding the nature of the illustration rather than an insurer guarantee that the projected returns will be achieved.
转保与掉保的界定 / Definition of churning versus twisting	churning vs twisting	用误导或不实信息说服客户在同一家保司内换单或提现买新单称为转保（churning），发生在不同保司之间则称为掉保（twisting），两者均违反受信义务。 / Using misleading or false information to persuade a client to replace a policy or withdraw cash to buy a new policy within the same insurer is called churning; when occurring between different insurers, it is called twisting; both violate fiduciary duty.
寿险替换声明书与法域依据 / Life Insurance Replacement Declaration and jurisdictional statutory basis	life insurance replacement declaration (LIRD)	考试口径泛称多数司法辖区要求使用 LIRD（魁北克使用专门的《保险合同替换通知》），而在 BC 执业时须知《保险合同（人寿保险替换）规则》s.3(4) 提供了明确的成文法依据。 / The exam standard broadly states that most jurisdictions require the use of the LIRD (while Quebec uses its own specific Notice of Replacement of Insurance Contract), whereas practicing in BC requires knowing that section 3(4) of the Insurance Contract (Life Insurance Replacement) Regulation provides the explicit statutory basis.
保单替换利弊与新不可抗辩期 / Replacement pros and cons and new incontestability period	incontestability period	更换保单会使新保单重新起算 2 年不可抗辩期、损失旧单已摊销早期费用的现金价值，并按当前年龄与健康状况重新核保计费。 / Replacing a policy causes a new two-year incontestability period to restart on the new policy, forfeits the cash value of the old policy that has already amortized early acquisition costs, and subjects the client to new underwriting and pricing based on current age and health status.
替换取消旧单的法定顺序 / Statutory sequence for cancelling old policy in a replacement	policy replacement	无论是谁主动提出换单都必须履行替换披露，且必须先确认新单正式生效并被客户接受后才能取消旧单，以免产生保障空窗期。 / Replacement disclosure must be fulfilled regardless of who initiated the replacement, and the existing policy must only be cancelled after confirming the new policy is formally in force and accepted by the client to prevent a coverage gap.
推荐书面留痕与拒绝处理 / Written reason-why record and handling client refusal	reason-why record	每次实质性推荐都应记录客户处境摘要、备选方案取舍、最终匹配需求及客户回应；若客户只买部分保额或拒绝，须书面记录未覆盖的风险缺口。 / Every substantive recommendation should record a summary of the client's situation, alternatives considered and trade-offs, the final recommendation matched to specific needs, and the client's response; if the client purchases only partial coverage or declines, the uncovered risk gap must be documented in writing.

自测提问（康奈尔左栏）

1. 为什么口头同意不能代替推荐环节的书面披露与签字留痕？ / Why can verbal consent never replace written disclosure and signed documentation during the recommendation phase?
2. 从算出保额到客户签字接受的六步推荐流程分别是什么？ / What are the six steps of the recommendation process from calculating coverage to client signature and acceptance?
3. 含非保证金额的永久险演示件必须符合什么标准，客户签字代表什么？ / What standards must permanent life policy illustrations containing non-guaranteed values meet, and what does the client's signature signify?
4. 转保（churning）与掉保（twisting）有什么区别，替换旧单时为什么不能先取消旧保单？ / What is the difference between churning and twisting, and why must the old policy never be cancelled before the new one is accepted?
5. 当客户健康恶化面临定期险续保，或因预算拒绝全额推荐保额时，代理人该如何处理并写好 reason-why 记录？ / How should an agent handle situations where a client faces term renewal after health has deteriorated or declines full recommended coverage due to budget, and how should the reason-why record be written?

总结：请用三句话总结：如何按风险持续期与现金流匹配产品、如何在演示与替换环节履行书面披露防止利益冲突，以及如何在客户折衷或拒绝时完成留痕。 / In three sentences, summarize how to match products based on duration of risk and cash flow, how to fulfill written disclosure during illustration and replacement to prevent conflicts of interest, and how to complete documentation when a client compromises or refuses.

第 12 章 · 寿险保障期内服务 / Ongoing Policy Service

人寿保险 / Life Insurance　P2 稳住 / Hold steady　Ongoing Service · 模考 3 题

带着这几道题读：吸烟者戒烟后申请改为非吸烟费率，或者申请把保单抵押给银行，哪个需要核保？ / When a smoker quits smoking and applies for non-smoker rates, or when a policyowner assigns a policy to a bank as collateral, which request requires medical underwriting?；保单宽限期届满失效后第 55 天申请恢复，只补交欠费够不够？ / When applying to reinstate a policy 55 days after it lapsed at the end of the grace period, is simply paying overdue premiums sufficient?；客户离婚再婚后口头让代理人把受益人改成现任配偶，身故后保险金归谁？ / If a client divorces, remarries, and verbally asks their agent to change the beneficiary to the current spouse, who receives the death benefit upon the client's death?；理赔时发现投保年龄填小了 3 岁（非欺诈），保司会拒赔还是按比例调整保额？ / If claim verification reveals that the applicant's age was understated by 3 years without fraud, will the insurer deny the claim or adjust the death benefit proportionally?；被保险人失踪多久可以申请推定死亡？考场标准答案与 BC 法律规定一样吗？ / How long must a life insured be missing before applying for a declaration of presumption of death, and does the standard exam answer align with BC provincial legislation?

怎么考

- 保单变更分类题：给出客户变更请求（如加保额、改吸烟状态、改受益人、保单转让），考查是否触发重新核保（underwriting）或税务处置。 / Policy change classification questions: Given client change requests (such as increasing the face amount, changing smoker status, changing beneficiaries, or policy assignments), tests whether each change triggers medical underwriting or tax disposition rules.
- 欠费与复效时间轴题：给出逾期天数与被保险人生存或健康状态，考查 30 天宽限期（grace period）、宽限期末后 30 天免核保复效与 2 年有条件复效（reinstatement）的边界。 / Premium default and reinstatement timeline questions: Given the number of overdue days and the living or health status of the life insured, tests the boundaries between the 30-day grace period, the 30-day post-grace period reinstatement window without medical underwriting, and the 2-year conditional reinstatement window.
- 受益人指定与保护题：结合婚姻变动、口头通知、不可撤销受益人（irrevocable beneficiary）或债权人追偿，考查书面声明（declaration）形式要求、生前存档及免债范围。 / Beneficiary designation and protection questions: In scenarios involving marital changes, oral notifications, irrevocable beneficiaries, or creditor recovery, tests the written declaration formal requirements, lifetime filing rules, and the scope of creditor protection.
- 保单替换与合规流程题：围绕同公司转保（churning）或跨公司掉保（twisting），考查寿险替换声明书（LIRD）签署时点、利弊披露及新单生效前保留旧单的原则。 / Policy replacement and compliance process questions: Centered on internal churning versus external twisting, tests the timing for signing the Life Insurance Replacement Declaration (LIRD), mandatory disclosure of advantages and disadvantages, and the principle of keeping the existing policy in force until the new policy takes effect.

高频陷阱（看到信号就警觉）

双30天连续保障陷阱 / The dual 30-day continuous coverage trap：题干出现宽限期届满后第 N 天被保险人身故，家属试图补缴保费要求理赔。 / The question stem describes the life insured dying N days after the grace period expires, and family members attempt to pay overdue premiums and demand a claim payment.

口头或自动改受益人陷阱 / The oral or automatic beneficiary change trap：题干出现离婚再婚未改保单、口头嘱咐代理人改受益人、或未送达书面变更文件即身故。 / The question stem features a divorce or remarriage without updating policy documents, verbal instructions given to an agent to change the beneficiary, or the life insured dying before written documents are delivered.

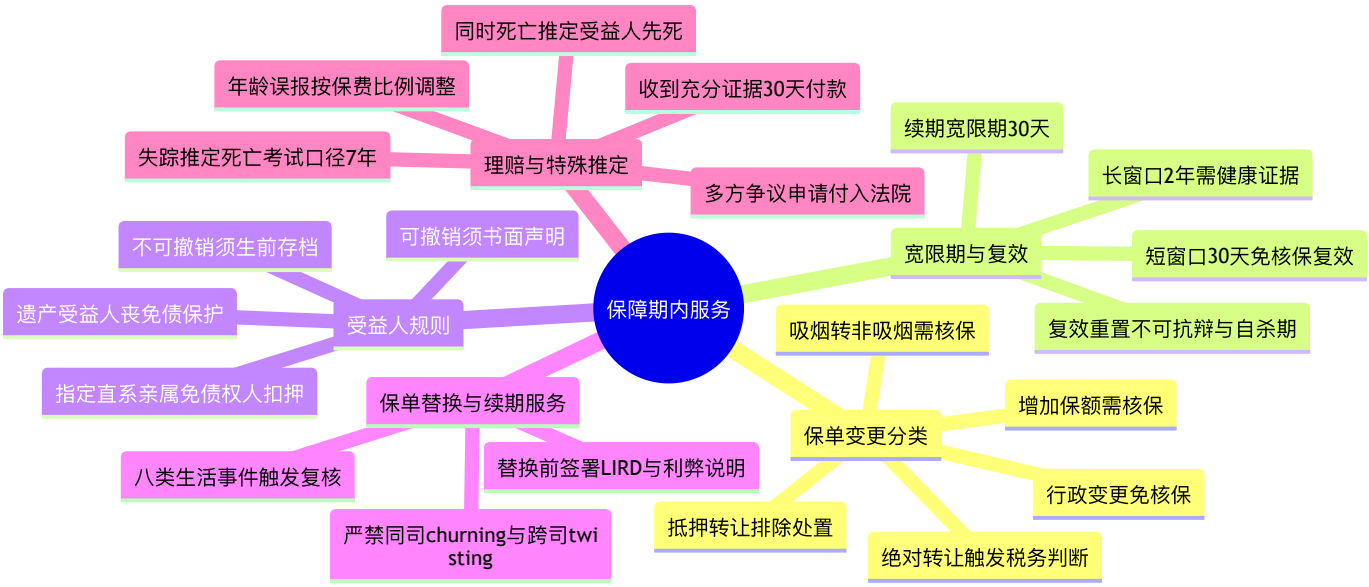
年龄误报拒赔或反算陷阱 / The age misstatement claim denial or inverted ratio trap：题干出现理赔时发现投保年龄填错（非欺诈），给出原保额、实缴保费与真实年龄应缴保费。 / The question stem reveals an unintentional age error during claim settlement, providing the original face amount, actual premium paid, and correct premium payable for the true age.

两年复效无条件恢复陷阱 / The 2-year unconditional reinstatement trap：题干出现保单失效超过 30 天但未满 2 年（如失效后 55 天），客户要求直接补费恢复保单。 / The question stem presents a policy that has been lapsed for more than 30 days but less than 2 years (such as 55 days post-lapse), where the client requests immediate policy reinstatement simply by paying overdue premiums.

- 理赔核定与特殊推定题：围绕年龄误报（misstatement of age）比例调整、同时死亡推定（simultaneous death presumption）、付入法院（payment into court）及失踪 7 年推定死亡（presumption of death）的考试口径与 BC 法条差异。 / Claim adjudication and statutory presumption questions: Centered on proportional death benefit adjustments for misstatement of age, the simultaneous death presumption, payment into court, and the dual-benchmark difference between the 7-year exam standard and BC statutory provisions for presumption of death.

> **考试口径与BC成文法混淆陷阱 / The exam standard versus BC statutory rule confusion trap**：题干涉及失踪多年申请推定死亡，或持财产授权书（POA）要求变更既有保单受益人。 / The question stem involves applying for a declaration of presumption of death after years of disappearance, or an attorney under an enduring power of attorney (POA) attempting to alter an existing policy beneficiary designation.

导图



第 12 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
行政变更与核保变更的分界 / Distinction between administrative and underwriting changes	administrative change vs. underwriting change	姓名、地址、缴费频率、删除附加险及可撤销受益人变更无需重新核保；增加保额、增加附加险、吸烟改非吸烟通常需提供健康或可保性证据（保证可保性或转换权除外）。 / Changes to name, address, premium payment frequency, deleting riders, and changing revocable beneficiaries are administrative changes requiring no medical underwriting; increasing coverage amounts, adding riders, and changing from smoker to non-smoker status generally require evidence of good health or insurability, unless exercised under a guaranteed insurability option or contractual conversion privilege.
保单所有权转让的税务区分 / Tax classification of policy ownership assignments	assignment (absolute / collateral)	绝对转让与抵押担保转让均无需健康核保，但绝对转让通常属于权益处置需做税务判断，而单纯抵押担保转让被所得税法 s.148 的处置定义排除。 / Neither absolute assignments nor collateral assignments require medical underwriting; however, an absolute assignment permanently transfers ownership and generally constitutes a disposition of interest subject to taxation, whereas a pure collateral assignment is expressly excluded from the definition of disposition under Income Tax Act section 148.
续期保费宽限期 / Renewal premium grace period	grace period	非首期保费到期未缴进入宽限期，按到期日次日起 30 天（工业险 28 天）与合同约定天数取较长者，期内发生承保事故合同仍有效（非团体/债权人团体险可扣欠费）。 / When an overdue renewal premium is unpaid, the policy enters a grace period of 30 days (28 days for industrial life insurance) starting the day after the due date, or the longer period specified in the contract; if an insured event occurs during this period, the contract remains valid, and the insurer may deduct the overdue premium (in individual and creditors' group insurance).
失效保单两档复效窗口 / Two-tier reinstatement windows for lapsed policies	reinstatement	因未付到期保费在宽限期末失效后，另 30 天内且付款时被保险人仍生存可免健康证据复效；超过 30 天但在失效后 2 年内申请，须付清欠费、合同债务与受限利息并提供满意健康与可保性证据，条件满足时保司必须恢复。 / After a policy lapses at the end of the grace period due to unpaid premiums, it can be reinstated within an additional 30-day window without evidence of good health provided the life insured is still alive when payment is made; if requested after 30 days but within 2 years of lapse, the policyowner must pay all overdue premiums, policy indebtedness, and statutory capped interest, and present evidence of insurability and good health satisfactory to the insurer, upon which the insurer is legally required to reinstate the contract.
受益人指定形式与不可撤销存档 / Beneficiary designation formalities and irrevocable filing	revocable / irrevocable beneficiary & declaration	可撤销受益人变更须以合同内指定或书面声明作出，口头指示无效；不可撤销受益人须在被保险人生存期间存档于保司加拿大总或主要办事处且不能以遗嘱作出，处分合同时须核是否满 19 岁并取得同意。 / A revocable beneficiary change must be effected within the contract or by a signed written declaration, as oral instructions are legally void; an irrevocable beneficiary designation cannot be made in a will and must be filed at the insurer's head or principal office in Canada during the lifetime of the life insured, and any subsequent dealing with the contract requires verifying that the irrevocable beneficiary is at least 19 years old and obtaining their consent.
债权人保护与遗产受益人风险 / Creditor protection and estate beneficiary risks	creditor protection & estate beneficiary	保险金到期后指定受益人款项不入遗产且免受债权人追索；合同存续期间指定被保险人的配偶、子女、孙辈或父母可使合同权益免于执行或扣押，而落入遗产则丧失债权人保护。 / Once insurance proceeds fall due, money designated to a beneficiary does not form part of the estate and is exempt from creditor claims; during the contract's lifetime, designating the spouse, child, grandchild, or parent of the life insured exempts the contract rights from execution or seizure, whereas designating the estate forfeits this statutory creditor protection.
保单替换合规与不当替换禁止 / Policy replacement compliance and prohibited replacements	life insurance replacement declaration (LIRD), churning & twisting	适用替换时代理人须在申请前提供并讲解声明及替换利弊的书面说明并取得申请人与被保险人签署确认，新单生效前保留旧单，严禁误导性的同保司转保（churning）或跨保司掉保（twisting）。 / When a replacement is involved, the agent must provide and explain the Life Insurance Replacement Declaration (LIRD) alongside a written statement of advantages and disadvantages before submitting the application, obtaining signed acknowledgments from the applicant and insured; the existing policy must be maintained until the new policy takes effect, and misleading internal churning or external twisting is strictly prohibited.

年龄误报保额调整与不可抗辩重置 / Age misstatement benefit adjustments and reinstatement reset	misstatement of age, incontestability period & suicide clause	非欺诈年龄误报不受 2 年不可抗辩期限制，按「原保额 × 实缴保费 ÷ 应缴保费」调整给付（超可保年龄且人在世时可在生效后 5 年内且发现后 60 天内撤销）；复效使披露条款与自杀条款（常见 2 年）从最近复效日重新起算。 / An unintentional misstatement of age is not protected by the 2-year incontestability period and adjusts the death benefit proportionally using the formula 'Original Face Amount x Premium Paid / Premium Payable' (if the true age exceeds insurable limits while the insured lives, the insurer may rescind within 5 years of issue and within 60 days of discovery); reinstatement resets the disclosure rules and the suicide exclusion clause (typically 2 years) from the most recent reinstatement date.
理赔付款期限、同时死亡与付入法院 / Claims payment deadline, simultaneous death, and payment into court	proof of claim, simultaneous death presumption & payment into court	保司收到法定充分证据后须在 30 天内付款，死亡保险金诉讼时效通常为提交充分证据后 2 年与死亡后 6 年取较早者；先后死因不明默认受益人先于被保险人死亡，多方争执时保司可申请付入法院免责。 / The insurer must pay the insurance money within 30 days of receiving satisfactory proof of claim; the limitation period for commencing an action to recover life insurance proceeds is generally the earlier of 2 years after furnishing proof of claim or 6 years after the death; where order of death cannot be determined, the beneficiary is presumed to have died before the life insured; in cases of competing claims or disputes, the insurer may apply to pay the proceeds into court to obtain a full discharge.
失踪推定死亡的考试口径与BC法条差异 / Presumption of death: exam standard versus BC statutory differences	presumption of death	考试口径通则以失踪满 7 年作为申请推定死亡的门槛，而 BC《Presumption of Death Act》s.3 仅要求无音讯、无理由相信在世、有合理依据推定已死亡三要件，无固定年限要求。 / The standard exam standard uses 7 years of unexplained absence as the threshold to apply for a declaration of presumption of death, whereas section 3 of the British Columbia Presumption of Death Act requires only three conditions: no contact, no reason to believe the person is alive, and reasonable grounds to believe the person is dead, with no fixed statutory waiting period.

自测提问（康奈尔左栏）

1. 哪些保单变更属于纯行政变更，哪些变更必须重新提供健康核保（underwriting）证据？ / Which policy changes qualify as purely administrative changes, and which changes require submitting fresh evidence of insurability for underwriting?
2. 宽限期（grace period）30 天与复效（reinstatement）短窗口 30 天、长窗口 2 年的适用条件有何本质区别？ / What are the fundamental differences in eligibility conditions between the 30-day grace period, the 30-day short reinstatement window, and the 2-year long reinstatement window?
3. 可撤销受益人与不可撤销受益人（irrevocable beneficiary）在指定形式、存档要求与变更权限上有何不同？ / How do revocable and irrevocable beneficiary designations differ regarding formalities, head office filing requirements, and alteration rights?
4. 离婚、口头通知代理人或持财产授权书（POA）分别会对保单受益人指定产生什么法律后果？ / What are the legal consequences of divorce, verbal notice to an insurance agent, or holding a power of attorney for property (POA) on existing policy beneficiary designations?
5. 理赔时遇到年龄误报、同时死亡、多方争抢保险金或失踪推定死亡，考场答案与 BC 成文法分别如何处理？ / When settling claims involving age misstatements, simultaneous deaths, competing claimants, or disappearance, how do standard exam answers and BC statutes resolve each scenario?

总结：用三句话总结保单签发后「变更核保分界、欠费宽限与两档复效窗口、受益人书面形式与理赔特殊调整」的核心规则及考场与 BC 法条的双口径差异。 / In three sentences, summarize the core post-issue rules governing underwriting thresholds for policy changes, the grace period and two-tier reinstatement windows, beneficiary formalities, and statutory claim adjustments, highlighting where standard exam answers diverge from BC provincial legislation.

第 13 章 · A&S 保护什么 / What Accident and Sickness Insurance Protects: Financial Goals and Four Risk Categories for Individuals, Families, and Businesses

意外与疾病 / Accident & Sickness　P2 稳住 / Hold steady　Financial Protection · 模考 4 题

带着这几道题读：企业订单下滑与店主重病停工，哪个才属于 A&S 承保的风险？ / Between declining business customer orders and an owner's severe illness halting work, which risk is covered by A&S insurance?；非工伤短期失能时，考试按多少周计算联邦 EI 病假给付？ / For a non-work-related short-term disability, how many weeks of federal EI sickness benefits are calculated under the exam standard?；担心日常处方药掏空存款 vs 担心护理费耗尽遗产，各选什么险？ / Worrying about routine prescription drugs draining savings versus worrying about long-term care fees exhausting an estate: which insurance product solves each concern?；店主用个人重疾险金交店租发工资，为什么会埋下财务隐患？ / Why does an owner using personal critical illness insurance payouts to pay commercial rent and employee wages create serious financial risks?

怎么考

- 场景匹配题（财务目标 × 四类风险）：给出一个家庭或个人的突发事件（如早逝、短期骨折、癌症确诊、年老需要护理），考你识别这属于哪一类风险、冲击哪一个财务目标（财富积累、退休收入或日常需求），并区分一般死亡风险（寿险）与意外身故责任（AD&D）。 / Scenario-matching questions (financial goals x four risk categories): Given an unexpected event for a family or individual (such as premature death, a short-term fracture, a cancer diagnosis, or needing care in old age), tests identifying which risk category it belongs to, which financial goal it impacts (wealth accumulation, retirement income, or daily family needs), and distinguishing general mortality risk (life insurance) from accidental death coverage (AD&D).
- 需求分类与产品对号题（四大需求）：给出客户想要保护的对象（月度现金流、日常储蓄、已积累资产/遗产、企业固定开支），考你区分保收入（DI）、保储蓄（扩展医疗/牙科/旅行险）、保资产（CI/LTC）与保企业（BOE/关键人险/买卖协议伤残险）。 / Needs classification and product-matching questions (four core needs): Given what the client wants to protect (monthly cash flow, routine savings, accumulated assets or estate, or business overhead expenses), tests distinguishing protecting income (DI), protecting savings (extended health, dental, and travel insurance), protecting assets (CI and LTC), and protecting business (BOE, key person insurance, or buy-sell disability insurance).
- 多来源给付先后与协调题（先付人逻辑）：给出工伤或非工伤、短期或长期伤残场景，考你判断政府项目（工伤补偿、EI 病假福利、CPP-D、省级医保）与团体/个人商业保险谁先赔、谁补缺口，以及为什么不能把各来源给付简单相加。 / Multi-source benefit order and coordination questions (first payor rule): Given a work-related or non-work-related, short-term or long-term disability scenario, tests determining whether government programs (workers' compensation, EI sickness benefits, CPP-D, provincial

高频陷阱（看到信号就警觉）

伤残与重疾判定混淆 / Confusing disability and critical illness claim triggers：题干出现客户被诊断出某种严重疾病但仍能远程或兼职工作，或因背痛/骨折暂时无法工作但未达重疾列表标准。 / The question stem describes a client diagnosed with a severe illness who can still work remotely or part-time, or a client temporarily unable to work due to back pain or a fracture without meeting any covered critical illness definition.

多来源给付简单相加 / Simply adding multiple benefit sources together：题干列出两项或以上收入替代来源（如同时提及工伤与 EI、或团体 LTD 与 CPP-D），问客户实际能拿到多少或谁先赔。 / The question stem lists two or more income replacement sources (such as mentioning both workers' compensation and EI, or group LTD and CPP-D), asking how much the client actually receives or which pays first.

保储蓄与保资产错位 / Confusing protecting savings with protecting assets：题干对比“日常非医保覆盖的处方药/理疗开销”与“需要变卖退休投资或房产来支付的重疾康复/长期护理费用”。 / The question stem compares routine non-government-covered prescription drug and physiotherapy expenses with needing to liquidate retirement investments or real estate to pay for critical illness recovery or long-term care costs.

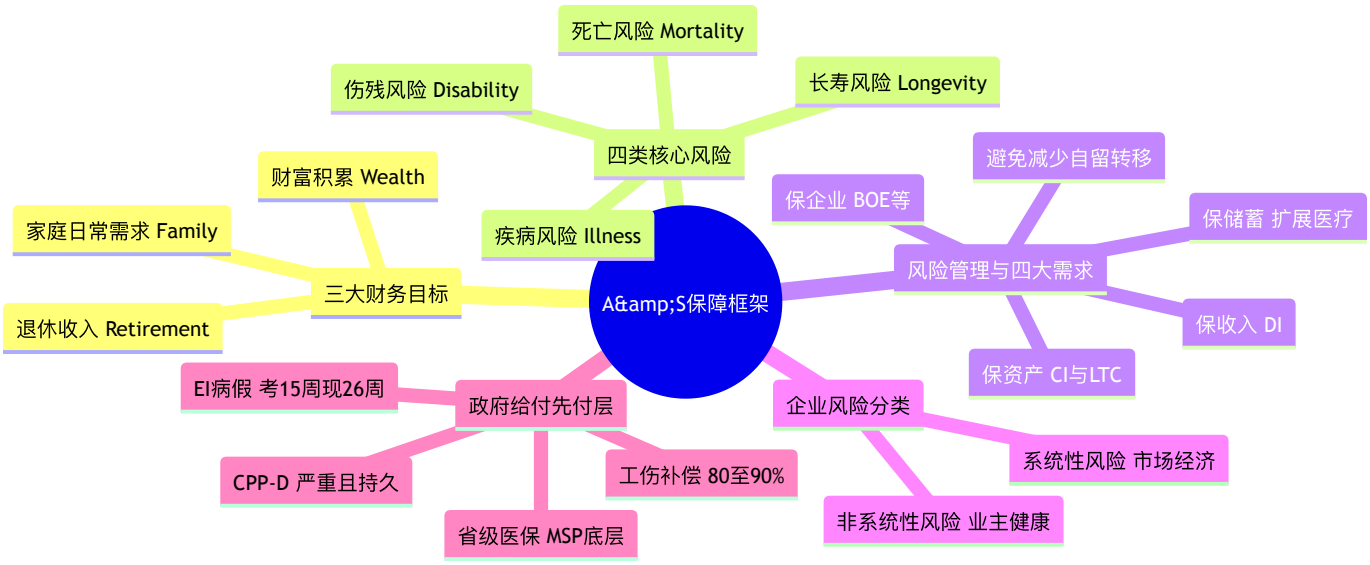
企业固定开支套用个人重疾 / Using personal critical illness insurance for business overhead：题干主角是小企业主或自雇人士，既担心家庭房贷生活费，又担心自己生病或伤残期间店面租金和员工薪水无法支付。 / The question stem features a small business owner or self-employed person who worries about both home mortgage living costs and paying commercial rent and employee wages during an illness or disability.

health coverage) or group/individual private insurance pay first, which fills the gap, and why multiple benefit sources cannot simply be added together.

- 企业风险与管理策略辨析题：给出中小企业主面临的经营困境或健康冲击，考你区分系统性风险（市场/经济波动，A&S 不保）与非系统性风险（业主健康等企业特有风险，A&S 可保），以及风险管理四招（避免、减少、自留、转移）的应用。 / Business risk and management strategy distinction questions: Given operational challenges or health shocks faced by small and medium-sized business owners, tests distinguishing systematic risk (market and economic fluctuations, not covered by A&S) from unsystematic risk (business-specific risks such as owner health, coverable by A&S), and applying the four risk management techniques (avoidance, reduction, retention, and transfer).
- 考试口径与双口径数字题：针对 EI 病假福利周数（考试口径 15 周 vs 现行 26 周）、工伤补偿替代比例（考试口径 80–90% 区间）及 CPP-D 判定标准（严重且持久），考你在考场按考试口径作答并识别时间轴缺口。 / Exam standard and dual-benchmark numerical questions: Focusing on EI sickness benefit weeks (exam standard of 15 weeks vs. current 26 weeks), workers' compensation wage-loss replacement ratio (exam standard of 80% to 90%), and CPP-D qualification criteria (severe and prolonged), tests answering according to the exam standard in the exam room and identifying timeline gaps.

> **EI 病假周数双口径错位 / Dual-benchmark confusion on EI sickness benefit weeks**：题干涉及非工伤短期失能，询问 EI 病假福利可覆盖的最长周数，或计算雇员在团体 LTD 启动前的政府给付周期。 / The question stem involves a non-work-related short-term disability, asking for the maximum weeks covered by EI sickness benefits, or calculating the government benefit duration before group LTD starts.

导图



第 13 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
三大财务目标与四类风险矩阵 / Financial goals and four risk categories matrix	financial goals and four risk categories (mortality, disability, illness, longevity)	个人与家庭追求财富积累、退休收入和家庭日常需求三大目标，会受死亡、伤残、疾病、长寿四类风险冲击；一般早逝主要由寿险承担，A&S 的 AD&D 仅保意外身故。 / Individuals and families pursue three primary financial goals—wealth accumulation, retirement income, and daily family needs—which are threatened by four risk categories: mortality, disability, illness, and longevity; premature death from any cause is primarily covered by life insurance, while AD&D in A&S covers only accidental death.
长寿风险的本质 / Nature of longevity risk	longevity risk	长寿风险指活得比资产和储蓄能支撑的时间更久，是四类风险中唯一看似“好事”但会稀释退休积累、侵蚀遗产或转嫁护理成本的财务风险。 / Longevity risk refers to outliving accumulated assets and savings; it is the only one among the four risk categories that appears positive on the surface, but financially threatens retirement accumulation, erodes the estate, or shifts long-term care costs onto family members.
企业系统性与非系统性风险 / Systematic and unsystematic business risks	systematic risk vs. unsystematic risk (business risk)	利率、行业周期等系统性风险不属于 A&S 承保范围；业主或关键员工健康受损属于非系统性（企业特有）风险，可通过自留（self-funding）与投保组合应对。 / Systematic risks, such as interest rate fluctuations and industry economic cycles, fall outside the scope of A&S insurance; health impairment of an owner or key employee is an unsystematic (business-specific) risk that can be managed through a combination of risk retention (self-funding) and insurance coverage.
EI 病假福利双口径规则 / Dual-benchmark rules for EI sickness benefits	Employment Insurance (EI) sickness benefits	EI 病假福利按收入 55% 替代，考试口径最长给付 15 周（1 周等待期后，旧上限 $638/周），而 2026 现行政策为最长 26 周（上限 $729/周），考试作答须服从考试口径与题干。 / EI sickness benefits replace 55% of insurable earnings; the exam standard provides a maximum benefit period of 15 weeks (after a one-week waiting period, with an earlier maximum of $638 per week), whereas the 2026 current rule provides up to 26 weeks (maximum $729 per week); candidates must follow the exam standard and specific question stems on the exam.
CPP 伤残给付判定与起付 / CPP disability benefit qualification and commencement	CPP disability benefit (CPP-D)	申领 CPP-D 须未满 65 岁、满足缴费年限（通常近 6 年满 4 年，或满 25 年缴费时近 6 年满 3 年），且伤残须“严重且持久”（severe and prolonged），通常在认定伤残开始四个月后起付。 / Qualifying for CPP-D requires being under age 65, meeting contribution criteria (generally 4 of the last 6 years, or 3 of the last 6 years with at least 25 years of contributions), and having a disability that is severe and prolonged; benefits typically begin four months after the month ESDC determines the severe and prolonged disability started.
工伤补偿与先付人逻辑 / Workers' compensation and first payor rule	Workers' Compensation and first payor rule	多来源给付先看触发原因：工伤或职业病优先归工伤补偿（考试口径替代净收入 80–90%，BC 现行 WorkSafeBC 约 90%），通常不再走 EI；各来源须分别核对全来源上限与抵消条款。 / When coordinating multiple benefit sources, determine the triggering cause first: workplace injuries or occupational diseases are covered primarily by workers' compensation (exam standard replaces 80% to 90% of net earnings; BC WorkSafeBC pays about 90%), and the claimant usually does not receive EI; each source must be separately reviewed for all-source maximum limits and offset clauses.
风险管理四招 / Four risk management techniques	risk avoidance, reduction, retention, and transfer	风险管理包含避免（不参与高风险活动）、减少（健康管理/安全培训）、自留（应急储备/拉长等待期）与转移（购买 A&S 保险），评估需求时应先审视前三招再确定转移额度。 / Risk management comprises avoidance (refraining from high-risk activities), reduction (health management and safety training), retention (emergency savings and lengthening waiting periods), and transfer (purchasing A&S insurance); advisors should evaluate the first three techniques before determining the amount of risk to transfer.
A&S 四大需求与产品映射 / Four A&S need categories and product mapping	protecting income, savings, assets, and business	A&S 四大需求分别为：保收入（个人/团体 DI）、保储蓄（扩展医疗/牙科/旅行险）、保资产（重疾险 CI 与长期护理险 LTC）、保企业（营运费用险 BOE、关键人险、买卖协议伤残险）。 / The four A&S need categories are: protecting income (individual and group DI), protecting savings (extended health, dental, and travel insurance), protecting assets (critical illness insurance CI and long-term care insurance LTC),

		and protecting business (business overhead expense BOE, key person insurance, and buy–sell disability insurance).
伤残定义四级光谱 / Four–level spectrum of disability definitions	own occupation, regular occupation, any occupation, CPP total disability	衡量伤残是否达到“不能工作”的标准按宽松到严格分为四级：本职工作（own occupation）→ 常规职业（regular occupation）→ 任何职业（any occupation）→ CPP 完全伤残，越靠后获赔门槛越高。 / The standards defining an inability to work range from most liberal to most restrictive across four levels: own occupation –> regular occupation –> any occupation –> CPP total disability; the further along the spectrum, the higher the threshold required to qualify for benefits.
自雇人士与平台劳动者的政府保障边界 / Government benefit boundaries for self–employed and platform workers	self–employed EI special benefits and platform workers coverage	自雇者默认不参加 EI 特别福利，须主动注册且通常满 12 个月方可申领；但 BC 自 2024–09–03 起将网约车及配送平台劳动者纳入 WorkSafeBC 工伤制度。 / Self–employed individuals are excluded by default from EI special benefits and must register voluntarily and usually wait 12 months before claiming; however, British Columbia has included app–based ride–hail and delivery platform workers under the WorkSafeBC workers' compensation system effective September 3, 2024.

自测提问（康奈尔左栏）

1. 家庭三大财务目标遇到死亡、伤残、疾病、长寿四类风险时，为什么一般死亡缺口不靠 A&S 解决？ / When three family financial goals face mortality, disability, illness, and longevity risks, why is a general premature death gap not addressed by A&S insurance?
2. 企业主面临的系统性风险与非系统性风险有何区别？A&S 能转移哪一类？ / What is the difference between systematic and unsystematic risks for business owners, and which one can A&S insurance transfer?
3. 工伤、非工伤短期失能、非工伤长期严重伤残、日常医疗支出四类场景下，政府与私人保险谁先赔？ / Across workplace injuries, non–work–related short–term disabilities, non–work–related severe long–term disabilities, and routine medical costs, which pays first between government and private insurance?
4. A&S 的“保收入、保储蓄、保资产、保企业”四大需求分别对应哪些险种？ / Which specific insurance products correspond to the four A&S need categories: protecting income, protecting savings, protecting assets, and protecting business?
5. EI 病假福利周数、工伤替代比例、MSP 与 CPP–D 在考场口径与 BC 柜台现行政策之间有哪些双口径差异？ / What dual–benchmark differences exist between the exam standard and current BC rules regarding EI sickness benefit weeks, workers' compensation replacement ratios, MSP, and CPP–D?

总结：用三句话总结：代理人如何先按“财务目标×四类风险”识别缺口，再扣除政府先付层（工伤/EI/CPP–D/MSP），最后用 A&S 四大需求（保收入/储蓄/资产/企业）匹配对应产品。 / In three sentences, summarize how an advisor first identifies gaps using the financial goals by four risk categories matrix, deducts the government first–payor tier (workers' compensation, EI, CPP–D, MSP), and matches the remaining needs to the four A&S product categories (protecting income, savings, assets, and business).

第 14 章 · 伤残收入险 / Disability Insurance (DI): Income Replacement, Coordination of Group, Individual, and Government Benefits

意外与疾病 / Accident & Sickness　P1 必拿分 / Must score　Disability Income · 模考 3 题

带着这几道题读：团体险写本职定义，转岗后还能领全额伤残给付吗？ / If a group disability policy specifies an own occupation definition, can an employee still collect full benefits after transferring to another role?；考场上问 EI 病假最长付几周，答 15 周还是 26 周？ / When the exam asks for the maximum benefit weeks for EI sickness benefits, should you answer 15 weeks or 26 weeks?；获批 CPP 伤残给付后，团体 LTD 在 85% 上限下会被削多少？ / After CPP disability benefits are approved, how much will group LTD be reduced under an 85% all-source maximum?；复工 4 个月同因复发，等待期和剩余给付期怎么算？ / When a relapse from the same cause occurs after returning to work for 4 months, how are the waiting period and remaining benefit period calculated?

怎么考

- 残疾定义与续保等级判定题：给出投保人失能后的复工或转岗情况，考查四种残疾定义（own occupation、regular occupation、any occupation、total disability according to CPP）下是否继续赔付，或考查三种续保等级（non-cancellable、guaranteed renewable、cancellable）下保险公司能否单方涨价、改条款或撤单。 / Disability definition and renewability classification questions: Given an insured's return to work or job transfer after disability, tests whether benefits continue under the four disability definitions (own occupation, regular occupation, any occupation, and CPP total disability), or tests whether the insurer can unilaterally raise premiums, alter policy terms, or cancel coverage under the three renewability provisions (non-cancellable, guaranteed renewable, and cancellable).
- 全来源上限与多方抵消计算题：给出失能前税前月收入、团体长期伤残（group LTD）、CPP 伤残给付（CPP-D）以及个人伤残险金额，考查按主合同全来源上限（all-source maximum，常见值 85%）计算团体险被削减后的实际给付额。 / All-source maximum and multi-benefit offset calculation questions: Given pre-disability gross monthly income, group long-term disability (group LTD), CPP disability benefits (CPP-D), and individual disability insurance amounts, tests calculating the net reduced group benefit under the master contract's all-source maximum (typically 85%).
- 等待期与给付期独立封顶算数题：同时给出等待期（waiting period）、给付期（benefit period）和实际失能持续月数，考查等待期与给付期互不冲抵、先用给付期上限封顶的理赔月数计算。 / Waiting period and benefit period independent cap calculation questions: Given the waiting period, benefit period, and actual months of continuous disability, tests calculating payable claim months where the waiting period and benefit period do not offset each other and the benefit period cap applies first.
- 复发条款时间窗口辨析题：给出首次领款月数、复工月数及同因再次失能情况，考查在复发窗口（recurring disability clause，常见值 6 个月）内免重计等待期但合并扣减剩余给

高频陷阱（看到信号就警觉）

团体与个人本职定义同名不同义 / Confusing group and individual own occupation definitions：题干同时出现 group plan / group LTD 与 own occupation，且提到转岗或从事其他有报酬工作。 / The question stem mentions both group plan / group LTD and own occupation, and describes a job transfer or engaging in other gainful work.

等待期与给付期互相冲抵 / Offsetting waiting period and benefit period against each other：题干同时给出等待期（如 90 或 120 天）、给付期（如 2 年或 5 年）和总失能时长三个时间数字。 / The question stem provides three time figures simultaneously: the waiting period (such as 90 or 120 days), the benefit period (such as 2 or 5 years), and total disability duration.

复发条款只记免等待不记并上限 / Remembering waived waiting period but forgetting combined benefit cap under recurring disability：题干出现同一原因再次失能（same cause），并明确给出两次失能之间复工的具体月数（如 4 个月或 7 个月）。 / The question stem features a relapse from the same cause and specifies the exact number of months returned to work between disabilities (such as 4 months or 7 months).

全来源上限漏看主合同或错把政府给付当额外收入 / Overlooking master contract terms in all-source maximum or treating government benefits as unreduced extra income：题干给出失能前税前收入、团体伤残险比例、CPP-D 金额及 all-source maximum（如 85%）。 / The question stem provides pre-disability gross income, group disability benefit percentage, CPP-D amount, and the all-source maximum (such as 85%).

付期，或超出窗口后重走等待期并重置给付期。 / Recurring disability clause time-window distinction questions: Given the initial benefit months, months returned to work, and subsequent relapse from the same cause, tests distinguishing whether relapses within the recurring disability window (typically 6 months) waive the waiting period while combining against the remaining benefit period, or whether relapses outside the window require a fresh waiting period and reset the benefit period.

- 考试口径与现行政策双口径题：考查联邦就业保险病假福利（EI sickness benefits）最长给付周数（考试口径 15 周 vs 现行 26 周）及团体转个人险转换权（conversion privilege）免核保机制。 / Exam standard and current policy dual-benchmark questions: Tests the maximum benefit weeks for federal Employment Insurance (EI) sickness benefits (exam standard of 15 weeks vs. current 26 weeks) and the medical underwriting waiver under group-to-individual conversion privileges.

自雇者可保收入漏减经营支出或混入被动收入 / Failing to deduct operating expenses or including passive income in self-employed insurable earnings：题干主人公为自雇人士（self-employed），并同时列出营业总收入、经营费用以及租金或投资收益。 / The question stem features a self-employed individual and lists gross business revenue, operating expenses, and ongoing rental or investment income.

导图



第 14 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
四种残疾定义从宽到严 / Four disability definitions from most liberal to most restrictive	definition of disability (own occupation, regular occupation, any occupation, CPP total disability)	个人险 own occupation 允许转做他业且给付不减；regular occupation（及团体险的 own occupation）在复工后减停给付；any occupation 只要能做任何匹配教育训练经验的工作即停付；CPP 须同时满足严重且持久（severe and prolonged）。 / Individual own occupation allows working in another occupation with unreduced benefits; regular occupation (and group own occupation) reduces or stops benefits upon returning to work; any occupation ceases benefits if the insured can perform any work commensurate with education, training, or experience; CPP total disability requires the disability to be both severe and prolonged.
三种续保等级与 65 岁转换 / Three renewability provisions and conversion at age 65	non-cancellable, guaranteed renewable, and cancellable policies	non-cancellable 锁死保费与合同内容且不可撤单，65 岁时通常可免医核转为 guaranteed renewable；guaranteed renewable 不可撤单但可按整类人群调保费；cancellable 可由保险公司单方终止。 / Non-cancellable policies lock in premiums and terms with no unilateral cancellation and typically permit medical-free conversion to guaranteed renewable at age 65; guaranteed renewable policies cannot be cancelled but allow class-wide premium increases; cancellable policies may be terminated unilaterally by the insurer.
个人可保额比例与自雇收入基数 / Individual insurable income ratio and self-employed earnings baseline	insurable income and net business income	个人伤残险可承保额按考试口径行业惯例一般不超过税前收入的 60% 至 66.66%，自雇者须按总收入减经营支出后的净经营收入核算，持续非劳动收入另列而不直接计入可保劳动收入。 / Under the exam standard's industry practice, individual disability insurance generally covers no more than 60% to 66.66% of gross earned income; self-employed individuals must calculate coverage using net business income (gross revenue minus operating expenses), while ongoing passive income is listed separately and excluded from insurable earned income.
EI 病假福利双口径 / Dual benchmarks for Employment Insurance sickness benefits	Employment Insurance (EI) sickness benefits	考试口径规定 EI 病假福利在 1 周等待期后最长给付 15 周（55% 收入替代，2022 上限 $638/周），而现行政策最长为 26 周（上限 $729/周），考场无自带数字时按考试口径 15 周作答。 / The exam standard provides EI sickness benefits for up to 15 weeks following a one-week waiting period (55% income replacement, 2022 cap of $638 per week), whereas current policy provides up to 26 weeks (cap of $729 per week); candidates answer 15 weeks on the exam unless specific new figures are given.
团体离职转换权免医疗核保 / Group conversion privilege without medical underwriting	conversion privilege	退出团体计划后可在短期窗口内（考试口径不同章节分别写 30 天与 31 天，实务依主合同）免医疗核保转换为个人伤残保单。 / Upon terminating group plan membership, an employee can convert group coverage into an individual disability policy within a short window (stated as 30 days or 31 days across different chapters of the exam material; governed by the master contract in practice) without providing evidence of insurability.
团体全来源上限与抵消机制 / Group all-source maximum and offset mechanisms	all-source maximum (group offset)	团体主合同通常规定所有直接来源与间接来源合计不得超过失能前税前收入的 85%（考试口径常见值），超出部分直接削减团体险给付，个人保单是否计入依主合同条款而定。 / A group master contract typically stipulates that total benefits from all direct and indirect sources cannot exceed 85% of pre-disability gross income (typical exam value); any excess directly reduces group disability payments, and whether individual policies are included depends on the master contract terms.
等待期与给付期相互独立 / Independence of waiting period and benefit period	waiting period (elimination period) and benefit period	等待期是从残疾发生到起赔的间隔，给付期是最长可领期限，两者互不冲抵，计算实际领款月数时须先以给付期上限封顶。 / The waiting period is the interval from disability onset to the start of payments, while the benefit period is the maximum duration payable; they do not offset each other, and payable months must be capped by the benefit period limit first.
复发条款的窗口效应 / Window effects of the recurring disability clause	recurring disability clause	前次残疾终止后在规定窗口内（考试口径常见值 6 个月）因同一原因再次失能视为同一次残疾，免重新计算等待期但合并扣减原给付期上限；超出窗口则重算等待期并重置给付期。 / A relapse from the same cause within the designated window (typically 6 months under the exam standard) after disability ends is treated as the same disability, waiving a new waiting period but combining against the original benefit period cap; relapses beyond the window require a fresh waiting period and reset the benefit period.

团体险定义切换时点 / Timing of definition changes in group disability plans	change of definition (from own/regular occupation to any occupation)	团体长期伤残（LTD）典型安排是在 LTD 开始给付满一定期限（如 12 个月，即自 12 个月 STD 起算的第 25 个月）后，才从常规或本职定义切换为任何职业定义（any occupation）。 / Under typical group long-term disability (LTD) structures, the definition shifts from own or regular occupation to any occupation only after LTD benefits have been paid for a specific period (such as 12 months of LTD, which is the start of Month 25 following a 12-month STD period).
推定残疾无需证明收入损失 / Presumptive disability without proof of income loss	presumptive disability	当被保险人发生合同列明的严重永久损伤时，无需证明收入损失，即使仍在全薪工作也可按全残领取给付。 / When the insured suffers a specified severe and permanent impairment listed in the policy, total disability benefits are payable without requiring proof of income loss or inability to work, even if the insured continues working at full salary.

自测提问（康奈尔左栏）

1. 四种残疾定义从宽到严怎么排序，团体险里的 own occupation 实际按哪一级执行？ / How are the four disability definitions ranked from most liberal to most restrictive, and which tier does group own occupation actually operate under?
2. non-cancellable、guaranteed renewable 和 cancellable 三种续保等级在调保费与撤单权上有什么区别？ / How do the three renewability provisions—non-cancellable, guaranteed renewable, and cancellable—differ regarding premium adjustment and cancellation rights?
3. 全来源上限（85% 税前收入）怎么计算团体险被削减的金额，个人 DI 是否计入会产生什么差异？ / How does an 85% all-source maximum calculate the reduction in group disability benefits, and what difference does including or exempting individual DI make?
4. 等待期、给付期和 6 个月复发条款放在同一条时间轴上时，怎么算实际还能领几个月？ / When the waiting period, benefit period, and 6-month recurring disability window are placed on a single timeline, how do you calculate the remaining payable months?
5. EI 病假周数、转换权窗口天数在考试口径与 2026 现行实务之间有什么双口径差异？ / What dual-benchmark differences exist between the exam standard and 2026 practice regarding EI sickness weeks and group conversion privilege windows?

总结：请用三句话总结伤残险理赔的三个核心步骤：先按合同定义判断赔不赔，再按等待期、给付期与复发窗口算出能领多久，最后按全来源上限和主合同抵消规则算出每月实领多少。 / In three sentences, summarize the three core steps of disability claim adjudication: first determine claim eligibility under policy definitions, next calculate payable duration using the waiting period, benefit period, and recurring window, and finally determine net monthly benefits using the all-source maximum and master contract offset rules.

第 15 章 · 重疾与长期护理 / Critical Illness & Long-Term Care Insurance

意外与疾病 / Accident & Sickness　P1 必拿分 / Must score　Critical Illness & LTC · 模考 3 题

带着这几道题读：确诊重疾后在存活期满前或满后身故，赔付结果有何不同？ / How does the payout outcome differ if the insured dies before versus after completing the survival period following a critical illness diagnosis?；LTC免赔期在考试口径与现行产品中分别是多少天？ / How many days is the LTC elimination period under general exam rules compared with current market products?；俗称小中风（TIA）或未买二次理赔附加险时为什么不赔？ / Why is coverage denied for a colloquial mini-stroke (TIA) or when a second illness occurs without a second event rider?；LTC每日花费低于日限额时，剩余额度能否顺延使用？ / When daily LTC care costs are below the daily cap, can the remaining balance carry forward for future use?

怎么考

- 情景定性题：给一段临床突发症状或初步诊断（如短暂性脑缺血发作或早期病变），考你能否识别理赔取决于合同条款的严格定义，而非日常病名。 / Scenario qualification questions: Presenting acute clinical symptoms or an initial diagnosis (such as a transient ischemic attack or an early-stage lesion), testing whether you can recognize that claim eligibility depends strictly on contractual definitions rather than everyday disease names.
- 时间闸门辨析题：在投保生效后不久确诊、或在确诊后短期内身故的场景中，测试合格期（qualification period）与存活期（survival period）的起算时点与法律后果。 / Time-gate discrimination questions: In scenarios where a diagnosis occurs shortly after policy inception or death occurs shortly after diagnosis, testing the starting points and legal consequences of the qualification period versus the survival period.
- 给付计算与顺延题：给出重疾险的部分给付比例（如35%），或长期护理险的每日给付上限、实际每日开销与总保障池，考你算实际赔付额或资金池可用天数的顺延。 / Benefit calculation and carry-forward questions: Providing a partial benefit percentage for critical illness (such as 35%), or a daily maximum benefit, actual daily expenses, and total benefit pool for long-term care, testing your ability to calculate the actual claim payout or the extended days available from the carried-forward benefit pool.
- 二次索赔与合同存续题：客户曾获全额重疾理赔或早期部分给付，数年后再患第二种重疾，考你原合同是否已终止、以及二次理赔附加险（second event rider）的适用条件。 / Second-event claim and policy continuation questions: A client previously received a full critical illness payout or an early partial benefit and suffers a second critical illness years later, testing whether the original policy terminated and the applicable conditions of a second event rider.
- 双口径与产品机制题：考核长期护理险的六项日常生活活动能力（ADLs）或认知障碍触发判据、免赔期（0—90天考试口径）及居家报销与机构定额给付的通则。 / Dual-standard and product mechanics questions: Testing the two trigger

高频陷阱（看到信号就警觉）

合格期与存活期混淆 / Confusing qualification period with survival period：题干出现政策刚生效/复效后不久查出症状，或出现确诊后第N天不幸身故的时间线。 / The question stem presents symptoms discovered shortly after policy issue or reinstatement, or outlines a timeline where the insured dies on day N following diagnosis.

凭日常病名直接判赔 / Determining claims based solely on colloquial disease names：题干强调症状在短时间内完全消退、影像无永久损伤，或专门写出医生的具体临床诊断缩写。 / The question stem highlights symptoms resolving completely within a short time, imaging showing no permanent impairment, or specifies the physician's precise clinical diagnostic abbreviation.

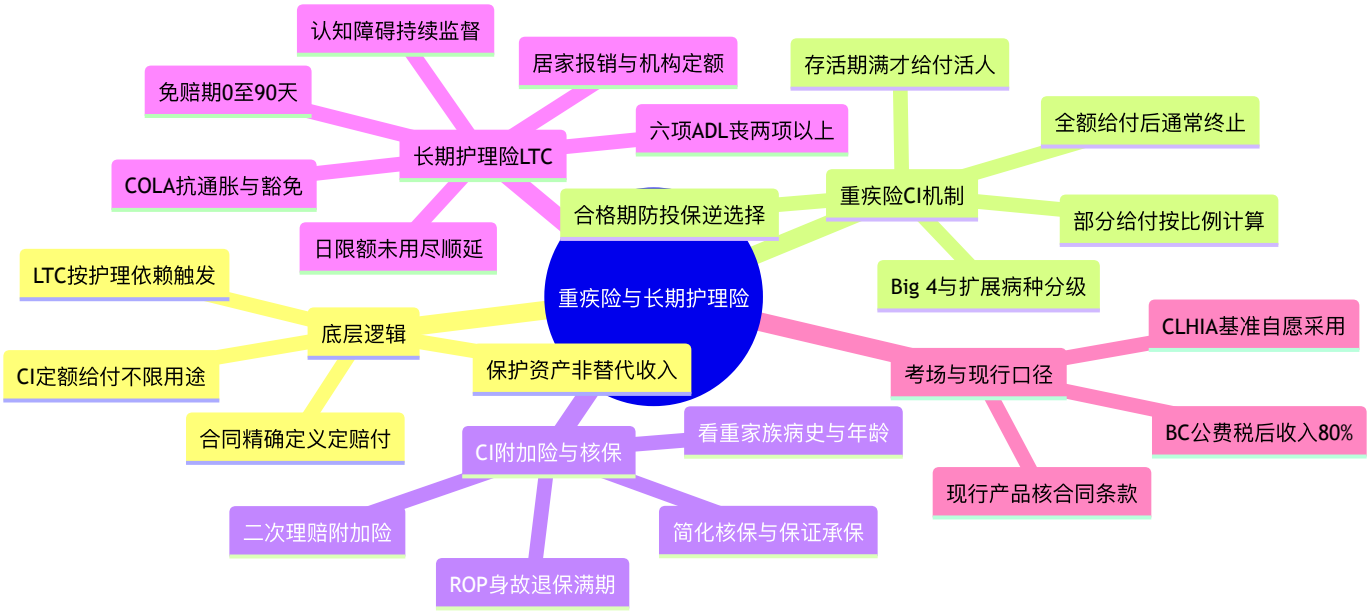
重疾险一概全额或终身持续 / Assuming critical illness always pays in full or continues indefinitely：题干明确提到某项条件按固定百分比（如35%）给付，或提到客户几年前已领取过100%全额重疾保险金且未加购附加险。 / The question stem specifies a condition paying a fixed percentage (such as 35%), or notes that the client received a 100% full critical illness payout years earlier without purchasing a rider.

漏算LTC未用完日额的顺延 / Overlooking the carry-forward of unused daily LTC benefits：题干同时给出每日给付上限、名义天数（或总保障上限）以及低于每日上限的实际每日照护账单。 / The question stem provides the daily maximum benefit, nominal days (or total maximum benefit pool), and an actual daily care invoice lower than the daily maximum.

把现行市场细节当成考场通则 / Treating current market details as general exam rules：题干询问长期护理险典型免赔期设计区间、居家与机构给付模式分类，或询问不同保司的重疾定义是否强制统一。 / The question stem asks about the typical LTC elimination period range, the general classification of home versus facility care models, or whether critical illness definitions are legally mandated across insurers.

criteria for long-term care insurance—the six activities of daily living (ADLs) or cognitive impairment—the elimination period (0 to 90 days under the exam rule), and standard rules for home care reimbursement versus facility care indemnity.

导图



第 15 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
资产保护定位 / Asset protection purpose	critical illness (CI) / long-term care (LTC) insurance	重疾险与长期护理险保护的是被吃掉的资产而非替代工作收入，重疾险通常一次性定额给付且不限制款项用途。 / Critical illness (CI) and long-term care (LTC) insurance protect depleted assets rather than replacing lost earned income; CI typically pays a lump-sum benefit with no restrictions on how the funds are used.
合格期与存活期区分 / Distinction between qualification period and survival period	qualification period / survival (waiting) period	合格期自保单生效或复效起算（常见30/90天）以防逆选择；存活期自确诊或手术后起算（常见30/90天），死于存活期结束前则不发生CI给付，活过存活期后、核准前身故仍照付。 / The qualification period runs from policy issue or reinstatement (commonly 30 or 90 days) to prevent anti-selection; the survival period runs from diagnosis or surgery (commonly 30 or 90 days), where dying before completing the survival period yields no CI benefit, but dying after satisfying the survival period and before claim approval still pays the benefit.
四大核心病种与分级 / The Big 4 core conditions and product tiers	"Big 4" conditions	考试口径的四大核心重疾为心脏病发作、中风、癌症、冠状动脉搭桥手术，市场产品常见3/4项基础款、10项款与20项以上综合款。 / Under exam rules, the Big 4 core critical conditions are heart attack, stroke, cancer, and coronary artery bypass surgery; market products commonly range from basic 3- or 4-condition plans to 10-condition plans and comprehensive plans covering 20 or more conditions.
行业重疾定义基准 / Industry critical illness benchmark definitions	CLHIA CI Benchmark Definitions	行业重疾定义基准经历了2013、2018与2024三版演进，但各保险公司是否采用及采用哪一版完全自愿，理赔必须逐条核对具体合同原文。 / The CLHIA CI Benchmark Definitions have evolved through 2013, 2018, and 2024 versions, but adoption by insurance companies is entirely voluntary, meaning claim adjudication requires verifying the exact wording in the specific policy contract.
LTC触发双判据 / Dual benefit triggers for LTC	activities of daily living (ADLs) / cognitive impairment test	长期护理险理赔通常要求六项日常生活活动能力（穿衣、洗澡、如厕、移位、进食、控制大小便）中至少2项不能独立完成，或满足需要持续监督的认知障碍判据。 / Long-term care insurance claims typically require the inability to perform at least 2 of the 6 activities of daily living (ADLs: dressing, bathing, toileting, transferring, eating, and continence) independently, or satisfying the cognitive impairment test requiring continual supervision.
LTC免赔期双口径 / Dual standard for LTC elimination periods	elimination period (LTC)	考试口径将长期护理险免赔期描述为0—90天可选（越短保费越高），而现行在售个人产品的等待期可达365或730天且须先满足保障生效日门槛。 / The exam describes the long-term care elimination period as an optional 0 to 90 days (shorter periods mean higher premiums), whereas individual products sold today can have waiting periods of 365 or 730 days and require satisfying a coverage effective date threshold first.
BC照护费用双轨制 / Dual framework for BC care costs	long-term care (LTC) insurance	考试口径仅列出未补贴私营机构月费旧区间（$995—$3,500），而2026现行BC公费机构按税后收入80%核定月费（标准最低$1,507.70、最高$4,142.60）。 / The exam only lists an outdated monthly fee range for unsubsidized private facilities ($995 to $3,500), whereas 2026 BC publicly subsidized facilities assess monthly fees at 80% of after-tax income (standard minimum $1,507.70, maximum $4,142.60).
CI全额结案与二次理赔 / Full CI claim termination and second event rider	second event rider / partial benefit	传统重疾险在支付100%全额理赔后合同终止，若未加购二次理赔附加险则后续重疾不再获赔；但部分给付（如按35%比例或早期疾病给付）未必导致主保障终止。 / A traditional critical illness policy terminates upon paying a 100% full claim, and subsequent conditions are not covered without a second event rider; however, partial benefits (such as a 35% payout or early-stage condition payout) do not necessarily terminate the base coverage.
LTC给付模式与余额顺延 / LTC payment models and balance carry-forward	indemnity model / reimbursement model / daily maximum benefit	考试口径通则将居家照护归为凭单据报销、机构照护归为定额给付；按总资金池扣减的报销型合同在每日实际花费低于日上限时，未用完额度可顺延延长给付天数。 / General exam rules categorize home care under an expense reimbursement model and facility care under an indemnity model; in reimbursement policies deducting from an aggregate pool, when daily actual expenses are below the daily cap, the unused balance carries forward to extend the benefit period.
抗通胀与保费返还附加险 / Inflation	cost-of-living adjustment (COLA) /	LTC可通过COLA附加险（考试口径示例按年2%—3%上调上限）抵御通胀且理赔期自动豁免保费；CI可通过ROP附加险在身故、退保或满期无理赔时退还部分或全部保费。 / LTC policies can offset inflation through a COLA rider (with exam examples showing a 2%

protection and return of premium riders	return of premium (ROP) rider	to 3% annual cap increase) and automatically waive premiums during claim periods; CI policies can refund partial or full premiums upon death, surrender, or maturity without claims via an ROP rider.

自测提问（康奈尔左栏）

1. 重疾险（CI）和长期护理险（LTC）与伤残险（DI）在保护目标上有什么根本区别？ / What is the fundamental difference in protection goals between critical illness (CI) and long-term care (LTC) insurance versus disability insurance (DI)?
2. 合格期与存活期分别从什么时候起算？如果被保险人在存活期满后、赔款发放前去世，保险金怎么处理？ / When do the qualification period and survival period each begin, and how is the benefit handled if the insured dies after completing the survival period but before the payout is issued?
3. 为什么俗称的小中风（TIA）在除外该情况的重疾险合同下会被拒赔？不同保司的病种定义是否统一？ / Why is a condition colloquially termed a mini-stroke (TIA) denied under a critical illness policy that excludes it, and are condition definitions uniform across different insurers?
4. 长期护理险的六项ADL是什么？考试口径的免赔期区间与现行市场在售产品有什么差异？ / What are the six ADLs in long-term care insurance, and how does the exam elimination period range differ from products currently sold on the market?
5. 当LTC每日实际报销额低于合同每日上限时，对总给付期有什么影响？全额CI理赔后合同状态如何？ / When actual daily LTC reimbursement is lower than the contractual daily maximum, what impact does it have on the total benefit period, and what happens to a CI policy after a full claim payout?

总结：用三句话总结：重疾险与长期护理险如何靠「精确合同定义、双时间闸门（合格期/存活期）与日限额资金池规则」决定赔不赔与赔多少，并指出考场通则与2026现行市场的一处关键双口径差异。 / Summarize in three sentences: how critical illness and long-term care insurance determine eligibility and payout amounts through precise contract definitions, dual time gates (qualification and survival periods), and daily maximum benefit pool rules, and highlight one key dual-standard difference between general exam rules and the current 2026 market.

第 16 章 · 医疗牙科与旅行险 / Extended Health, Dental, and Travel Insurance

意外与疾病 / Accident & Sickness　P2 稳住 / Hold steady　Health, Dental & Travel · 模考 2 题

带着这几道题读：同时有免赔额和共保比例时，账单怎么算？ / How is a claim calculated when both a deductible and a co-insurance factor apply?；牙医收费高于费用标准表，差额算拒赔吗？ / When a dentist charges more than the fee schedule, does the excess difference count as a claim denial?；稳定期内调过药，旅行中摔断腿赔不赔？ / If medication was adjusted during the stability period, is an accidental broken leg covered during the trip?；AD&D 意外伤残是一出事就赔 100% 保额吗？ / Does accidental dismemberment under an AD&D policy always pay 100% of the principal sum upon injury?

怎么考

- 账单分摊计算题：同时给出年度免赔额（deductible）与共保比例（co-insurance factor），测试是否严格遵循“先扣免赔额、再按比例乘余额”的顺序，以及个人免赔额与家庭免赔额（family deductible）谁先触发的连锁清算规则。 / Expense-sharing calculation questions: Presenting an annual deductible and a co-insurance factor simultaneously, testing whether you strictly follow the two-step sequence of subtracting the deductible first before applying the percentage to the remaining balance, as well as the sequential clearing rules governing whether the individual deductible or family deductible is satisfied first.
- 牙科与处方药报销边界题：通过牙医实际收费高于费用标准表（fee schedule）或客户坚持使用非处方集（formulary）品牌药的场景，测试差额自付的底层原因并非保险公司违约拒赔。 / Dental and prescription drug reimbursement boundary questions: Presenting scenarios where a dentist charges above the fee schedule or a client insists on a brand-name drug outside the formulary, testing your understanding that paying the out-of-pocket difference arises from non-covered excess charges rather than an insurer breach or claim denial.
- 旅行险既往病史与稳定期判定题：给出长者或慢性病患者出发前调药、复查或出现症状的天数，测试稳定期（stability period）回溯判定，以及某项既往病史拒赔是否影响同一行程中不相关意外索赔。 / Travel insurance pre-existing condition and stability period questions: Providing the timeline of medication adjustments, follow-up exams, or symptom emergence prior to departure for seniors or chronic condition patients, testing the retrospective determination of the stability period and confirming that denying a claim for a pre-existing condition does not void unrelated accidental injury claims on the same trip.
- 团体福利缺口与需求分析题：列出雇主团体套餐（group package）在视力、正畸、病房等级、意外身故与伤残（AD&D）或境外旅行上的短板，测试如何保留原团体计划并用个人计划精准补缺。 / Group benefits gap and needs analysis questions: Identifying coverage shortfalls in an employer group package regarding vision care, orthodontics, hospital room upgrades, accidental death

高频陷阱（看到信号就警觉）

免赔额与共保算反顺序 / Reversing the calculation order of deductible and co-insurance：题干同时出现账单总额、年度免赔额（annual deductible）和共保比例（co-insurance factor）。 / The question stem presents the total bill, an annual deductible, and a co-insurance factor simultaneously.

超费用标准误当拒赔 / Mistaking charges exceeding the fee schedule for claim denial：题干提到牙医诊所实际收费高于省牙医协会建议或合同指定的费用标准表金额。 / The question stem states that the dental clinic's actual charges exceed the provincial dental association fee guide or the fee schedule specified in the contract.

既往病史拒赔扩大化 / Overextending pre-existing condition exclusions to unrelated claims：题干先描述稳定期内调药或就诊，随后出现与该既往病史毫无关联的突发意外或新伤病索赔。 / The question stem describes a medication adjustment or medical visit during the stability period, followed by a sudden accident or new medical claim completely unrelated to the pre-existing condition.

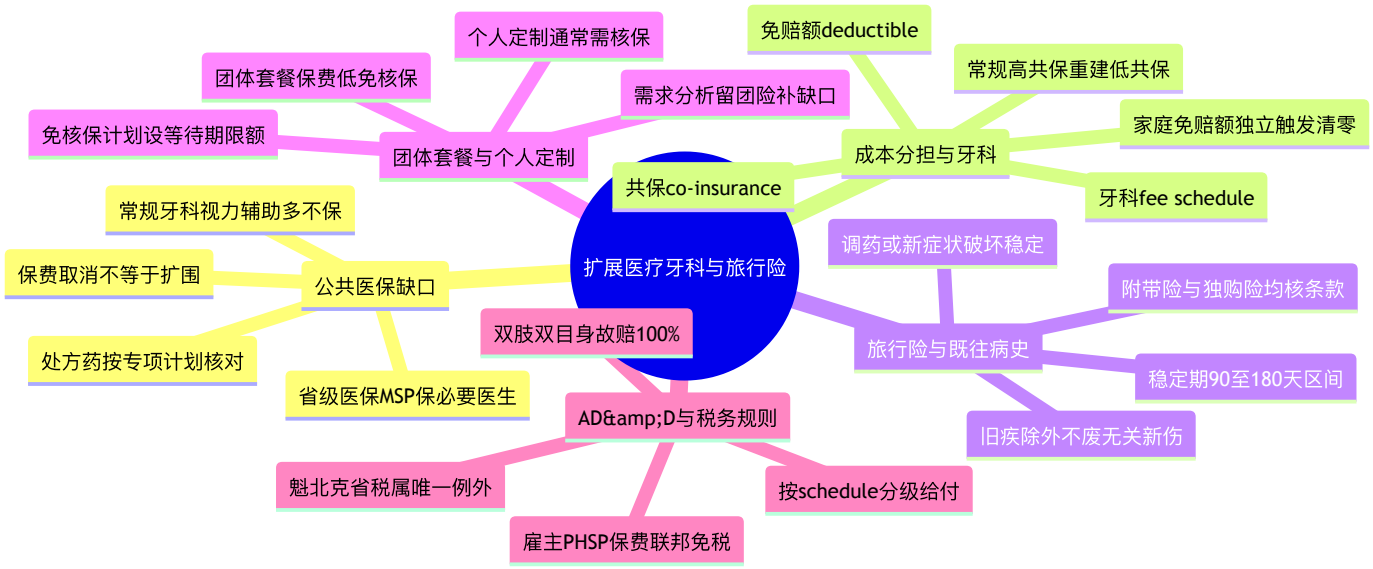
退团险换个人险补缺口 / Replacing group benefits with individual insurance to fill gaps：题干询问当雇主团体扩展医疗福利存在特定保障短板时，应如何通过需求分析（needs analysis）处理缺口。 / The question stem asks how to address coverage shortfalls through needs analysis when an employer group extended health plan lacks specific benefits.

AD&D全额赔付或跨省税混淆 / Assuming full AD&D payouts or confusing interprovincial tax rules：题干出现单肢、单眼、单耳等具体意外损失部位，或询问 BC 省雇主缴付合资格 PHSP 保费的税务后果。 / The question stem specifies accidental loss of a single limb, one eye, or one ear, or asks about the tax consequences of employer-paid PHSP premiums in British Columbia.

and dismemberment (AD&D), or out-of-country travel, testing how to retain the existing group plan while precisely filling identified gaps with individual coverage.

- 税务处理与省际例外题：对比雇主为合资格私人健康服务计划（PHSP）缴付保费在联邦税下的非应税福利待遇，测试魁北克省税例外不可误套用于其他省份或联邦税。 / Tax treatment and interprovincial exception questions: Evaluating the non-taxable employment benefit treatment under federal tax law for employer-paid premiums toward a qualifying private health services plan (PHSP), testing that Quebec's provincial tax exception must not be erroneously applied to other provinces or federal taxation.

导图



第 16 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
省级医保与扩展医疗定位 / Scope of provincial healthcare and extended health coverage	provincial health care plans / extended health insurance	省级医保主要覆盖医疗必要的医生与医院服务，常规牙科、19至64岁常规验光、辅助医疗及境外差额须经公共与既有私人计划核算后由扩展医疗险补充。 / Provincial healthcare plans primarily cover medically necessary physician and hospital services; routine dental care, routine eye exams for adults aged 19 to 64, paramedical services, and out-of-country balances must be evaluated against public and existing private plans and supplemented through extended health insurance.
免赔额与共保比例计算顺序 / Calculation sequence for deductible and co-insurance	deductible and co-insurance factor	核算合资格医疗或牙科账单时，必须先扣除当年未用完的免赔额，再对剩余金额乘以共保比例计算保险公司报销额。 / When adjudicating eligible medical or dental claims, the unused annual deductible must be subtracted first before multiplying the remaining balance by the co-insurance factor to determine the insurer's reimbursement.
个人与家庭免赔额联动 / Coordination between individual and family deductibles	individual deductible and family deductible	家庭成员各自累计个人免赔额，但一旦全家合资格免赔额支出合计达到家庭免赔额上限，全家所有成员当年的免赔额即一并清零。 / Family members accumulate their own individual deductibles, but once the eligible deductible expenses incurred across all family members reach the family deductible cap, the deductible requirement is satisfied and cleared for all family members for the remainder of the year.
牙科分级与费用标准表 / Dental tiers and fee schedules	fee schedule / routine maintenance vs. major restorative	常规维护共保常见为 75%–80%，重建类常见降至 50%；报销以合同采用的费用标准表为上限，牙医超表收费的差额由受保人自付而非拒赔。 / Co-insurance for routine maintenance is commonly 75% to 80%, while major restorative work typically drops to 50%; reimbursement is capped by the fee schedule adopted in the contract, and any excess charged by the dentist above the fee schedule is an out-of-pocket expense for the insured rather than a claim denial.
旅行险既往病史与稳定期 / Travel insurance pre-existing conditions and stability periods	pre-existing condition and stability period	考试口径下既往病史回溯稳定期常见为出发前 90–180 天（慢性病需连续无症状满 1 年才可能获全额覆盖），稳定期内调药会导致相关旧疾索赔被拒，但不影响无重大误述下的不相关意外理赔。 / Under exam rules, the look-back stability period for pre-existing conditions is typically 90 to 180 days prior to departure (chronic conditions may require a full year of continuous stability for full coverage); medication adjustments during the stability period result in denial of claims related to that pre-existing condition, but do not affect unrelated accidental injury claims provided there was no material misrepresentation.
信用卡附带旅行险核查 / Verification of credit card travel insurance	credit card travel insurance	信用卡附带旅行险与单独旅行险均须核实持卡状态、年龄、行程天数、稳定期及保险证明条款，免填长问卷不代表免除理赔时的病历核查。 / Both credit card travel insurance and standalone travel policies require verifying cardholder status, age limits, trip duration caps, stability periods, and certificate of insurance terms; the absence of a lengthy medical questionnaire at purchase does not waive medical record verification at the time of claim.
团体套餐缺口与个人定制 / Group package gaps and individual customization	group package vs. individual customization / needs analysis	团体计划属一刀切套餐但具保费与免核保优势，面对缺少 AD&D、视力额度低（如每 24 个月 $100）或正畸限额低等缺口时，应保留团体计划并用个人计划精准补齐。 / Group plans provide one-size-fits-all packages with the advantages of lower premiums and non-underwritten coverage; when addressing shortfalls such as missing AD&D, low vision limits (e.g., $100 every 24 months), or low orthodontic maximums, advisors should retain the group plan and precisely supplement the gaps using individual plans.
免核保个人健康险机制 / Mechanics of guaranteed issue personal health plans	guaranteed acceptance / guaranteed issue plan	免核保承保计划不要求投保时回答医疗问卷，适合核保受阻人群，但通常保费更高且对处方药、医疗器械和旅行天数设置更严格的等待期与分项限额。 / Guaranteed acceptance or guaranteed issue plans require no medical questionnaire at application and accommodate individuals who face underwriting hurdles, but they typically carry higher premiums and impose separate waiting periods and tighter sub-limits on prescription drugs, medical equipment, and travel durations.
意外身故与伤残分级给付 / Accidental death and dismemberment	accidental death and dismemberment (AD&D) / schedule of loss	AD&D 按给付比例表分级赔付而非出事即赔全额：双肢缺失、双目失明或身故赔 100%，单肢或单眼常见示例为 75% 或 67%、失语 50%、单耳 33%，且须在约定时限（考试示例 365 天）内发生。 / AD&D benefits are paid according to a graduated schedule of loss rather than paying the full principal sum for every event: loss of two limbs, sight

graduated schedule of loss		in both eyes, or death pays 100%, while loss of one limb or sight in one eye is commonly illustrated at 75% or 67%, speech at 50%, and hearing in one ear at 33%, provided the loss occurs within the contractual time limit (illustrated as 365 days on the exam).
雇主 PHSP 保费税务待遇 / Tax treatment of employer PHSP premiums	private health services plan (PHSP) taxable benefit	联邦税下雇主为合资格 PHSP 缴付的医疗或牙科保费一般不构成员工应税福利，仅魁北克省税将其作为应税福利处理，BC 省遵循联邦通则。 / Under federal income tax rules, employer-paid premiums for a qualifying private health services plan (PHSP) generally do not constitute a taxable benefit to employees; Quebec provincial tax is the sole exception treating employer contributions as taxable, while British Columbia follows the general federal rule.

自测提问（康奈尔左栏）

1. 为什么省级医保不赔的项目，不能直接等同于政府完全不管？ / Why does a service being excluded from provincial health care not equate to zero government support?
2. 同时存在免赔额与共保比例时，理赔计算的两步顺序是什么？ / What is the two-step sequence for calculating a claim payout when both a deductible and a co-insurance factor apply?
3. 牙医收费高于费用标准表导致少赔，为什么不属于保险公司拒赔？ / Why is a reduced payout due to dental charges exceeding the fee schedule not considered a claim denial by the insurer?
4. 出发前稳定期内调整心脏病药量，旅途中摔断腿还能申请理赔吗？ / If a traveller adjusts their heart medication dosage during the stability period, can they still claim for a broken leg suffered on the trip?
5. 雇主团体医疗计划存在保障缺口时，需求分析的标准动作是什么？ / What is the standard procedure in needs analysis when an employer group extended health plan has coverage gaps?

总结：请用三句话总结：公共医保与扩展医疗的边界、免赔额与共保比例及费用标准表的理赔扣减顺序、以及旅行险稳定期与团体缺口补齐的核心规则。 / Summarize in three sentences: the boundary between public healthcare and private extended health coverage, the sequential deduction rules for deductibles, co-insurance, and fee schedules during claim settlement, and the core rules governing travel insurance stability periods and supplementing group benefit gaps.

第 17 章 · 企业伤残险 / Business Disability Insurance: BOE, Key Person Disability, and Disability Buyout

意外与疾病 / Accident & Sickness　P3 过一遍 / Skim　Business A&S · 模考 1 题

带着这几道题读：企业主暂时失能，哪笔开支绝不能用营业费用险（BOE）报销？ / When a business owner is temporarily disabled, which expense can never be reimbursed under business overhead expense (BOE) insurance?；营业费用险与商业贷款保护伤残险的保费抵税和给付征税有何相反规则？ / What inverse rules govern premium deductibility and benefit taxation between business overhead expense (BOE) and business loan protection disability insurance?；关键人伤残险的理赔金付给谁？给付期通常最长多久？ / To whom are key person disability insurance benefits paid, and what is the typical maximum benefit period?；当62岁合伙人触发伤残买断险时，60岁后每年递减20%如何影响保额？ / When a 62-year-old partner triggers disability buyout insurance, how does the 20% annual post-age-60 reduction affect the available coverage?

怎么考

- 场景匹配题：给出独资、合伙或紧密控股公司面临的伤残冲击（固定开支断流、核心骨干失能、残疾合伙人退出），考你精准区分营业费用险（business overhead expense insurance, BOE）、关键人伤残险（key person disability insurance）和买卖协议伤残买断险（disability buyout insurance）的功能边界。 / Scenario-matching questions: Given the disability impacts faced by a sole proprietorship, partnership, or closely held corporation (disrupted fixed operating expenses, disability of a key employee, or exit of a disabled partner), test your ability to precisely distinguish the functional boundaries of business overhead expense (BOE) insurance, key person disability insurance, and buy-sell disability buyout insurance.
- BOE可报销清单与结转计算题：给出一组企业月度账单（房租、员工薪资、业主个人薪水、商业贷款本金与利息、新设备采购）及月度封顶，考你剔除不可报销项并运用结转条款（carryover provision）计算当月实际报销额。 / BOE eligible expense filtering and carryover calculation questions: Given a set of monthly business expenses (rent, employee wages, owner's personal salary, commercial loan principal and interest, new equipment purchases) and a monthly benefit cap, test your ability to exclude ineligible items and apply the carryover provision to calculate the actual reimbursement for the month.
- 税务处理正反对比题：将营业费用险（BOE）与商业贷款保护伤残险（business loan protection DI）并列，考你判断哪一种保费可抵税且给付应税、哪一种保费不可抵税但给付免税，以及两者能否就同一笔贷款重复理赔。 / Tax treatment contrast questions: Juxtaposing business overhead expense (BOE) insurance with business loan protection disability insurance, test your ability to determine which policy has tax-deductible premiums and taxable benefits versus non-deductible premiums and tax-free benefits, and whether both policies can claim against the same loan.
- 伤残买断与年龄递减题：给出年满60岁后的合伙人长期完全失能场景，考你识别12至24个月长等待期、严格失能定义

高频陷阱（看到信号就警觉）

BOE范围混淆陷阱 / BOE Eligible Expense Scope Confusion Trap：题干账单中混入业主个人薪资（owner's salary）、商业贷款本金（loan principal）或新购设备（new equipment purchase）。 / The question stem mingles the owner's personal salary, commercial loan principal, or new equipment purchases into a list of monthly business expenses.

税务正反颠倒陷阱 / Tax Treatment Reversal Trap：题干同时出现商业贷款保护险与BOE，询问保费可否抵税（tax-deductible）或理赔金是否免税（tax-free）。 / The question stem presents both business loan protection disability insurance and BOE, asking whether premiums are tax-deductible or benefits are tax-free.

受益人与用途错配陷阱 / Beneficiary and Purpose Mismatch Trap：题干问关键人伤残险的受益人（beneficiary）是谁，或如何估算招聘与培训替代窗口期的保额。 / The question stem asks who the beneficiary of a key person disability policy is, or how to calculate the benefit amount needed for the replacement recruitment and training window.

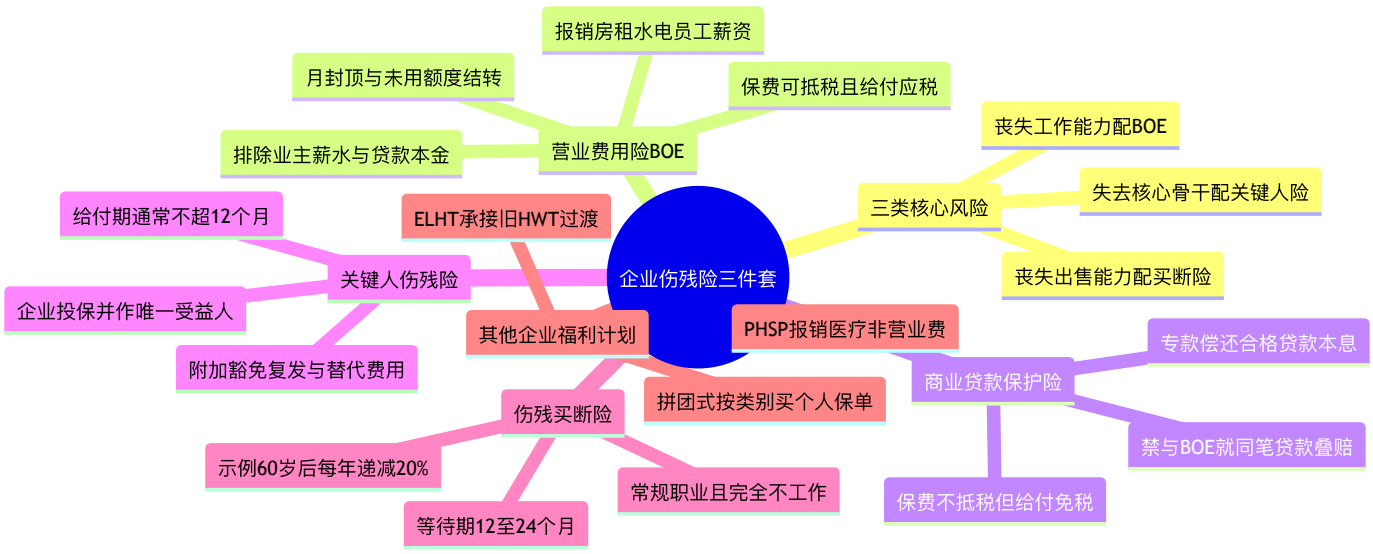
忽略60岁龄减陷阱 / Overlooking Post-Age-60 Reduction Trap：题干出现60岁以上（如62岁）的合伙人触发买卖协议伤残买断条款，并给出初始保额。 / The question stem describes a partner over age 60 (such as age 62) triggering a buy-sell disability buyout provision and provides an initial policy face amount.

失能定义与无资金空文陷阱 / Disability Definition and Unfunded Agreement Trap：题干描述伤残合伙人转做兼职仍想触发买断，或两位合伙人仅签署法律协议却未安排保险资金。 / The question stem describes a disabled partner working part-time while seeking to trigger a buyout payout, or co-owners executing a legal agreement without arranging insurance funding.

（regular occupation且完全不工作）以及60岁后保额每年递减20%对实际买断资金缺口的影响。 / Disability buyout and age reduction questions: Given a scenario involving a partner over age 60 who suffers a long-term total disability, test your ability to recognize the 12-to-24-month long waiting period, the strict disability definition (unable to perform regular occupation and not working at all), and the impact of a 20% annual benefit reduction after age 60 on the resulting buyout funding shortfall.

- 企业附加福利与双口径辨析题：考你区分私人健康服务计划（Private Health Services Plan, PHSP）按自雇或雇员分支的扣除规则、雇员生命与健康信托（Employee Life and Health Trust, ELHT）对旧健康福利信托（Health and Welfare Trust, HWT）的制度过渡，以及考场1985年精算表数据与实务核保的区别。 / Corporate supplementary benefits and dual-perspective analysis questions: Test your ability to distinguish the Private Health Services Plan (PHSP) deduction rules across self-employed versus employee branches, the transition from legacy Health and Welfare Trusts (HWT) to Employee Life and Health Trusts (ELHT), and the distinction between the exam's cited 1985 actuarial table data and modern underwriting practices.

导图



第 17 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
企业三类伤残风险与产品对应 / Three Core Business Disability Risks and Policy Matching	inability to work / loss of key employee / inability to sell	业主暂时丧失工作能力配营业费用险（BOE），失去核心骨干配关键人伤残险，合伙人伤残退出需变现股权配买卖协议伤残买断险，三者互不替代。 / An owner's temporary inability to work is covered by business overhead expense (BOE) insurance, the loss of a key employee is covered by key person disability insurance, and a disabled partner's exit requiring share monetization is covered by buy-sell disability buyout insurance; the three products cannot substitute for one another.
伤残不触发所得税法视同处置 / Disability Does Not Trigger Deemed Disposition Under Income Tax Act	deemed disposition on disability	被保险人伤残时人仍健在且股权未自动转移，不触发死亡式的视同处置（deemed disposition），但后续股份出售或赎回仍需核实税务与现金流。 / When an insured becomes disabled, the individual remains living and equity does not automatically transfer, so disability does not trigger a death-related deemed disposition under the Income Tax Act; however, subsequent share sale or redemption still requires verifying tax liabilities and cash flow.
业主伤残风险1985年统计口径 / Business Owner Disability Risk Statistics from 1985 Table	1985 Commissioner's Disability Table statistics	考试口径引述45岁业主至65岁前发生90天以上伤残概率约40%、两位共同业主至少一人约62.5%、平均持续3.2年，考场按此作答而实务不用作个案概率承诺。 / Under exam conventions, the probability of a 45-year-old owner suffering a disability lasting over 90 days before age 65 is approximately 40%, the probability for at least one of two co-owners is approximately 62.5%, and the average duration is 3.2 years; candidates must answer based on these exam figures, though in practice they are never used as individual probability commitments.
BOE可报销与不可报销费用边界 / Eligible vs. Ineligible Overhead Expenses for BOE	eligible vs. ineligible overhead expenses	BOE可报销房租、水电、员工薪资、商业贷款利息、固定专业服务费及企业保单保费；绝不报销业主本人薪水、贷款本金、新设备资本支出及库存采购。 / Business overhead expense (BOE) insurance reimburses rent, utilities, employee wages, commercial loan interest, regular professional fees, and corporate insurance premiums; it strictly excludes the owner's personal salary, commercial loan principal repayments, capital expenditures for new equipment, and inventory purchases.
BOE结转条款与资金池上限 / BOE Carryover Provision and Maximum Benefit Pool	carryover provision and maximum benefit pool	总资金池按月度封顶乘最长给付月数（常见15至24个月）计算，未用月度额度可结转（carryover）弥补后续超支月份，但不可提前透支未来未累积额度。 / The total benefit pool equals the monthly limit multiplied by the maximum benefit period (commonly 15 to 24 months); unused monthly benefit amounts can carry over to reimburse eligible expenses in subsequent months exceeding the monthly limit, but unearned future limits cannot be borrowed in advance.
BOE与商业贷款保护险税务反转 / Tax Treatment Reversal of BOE vs. Business Loan Protection DI	tax treatment of BOE vs. business loan protection DI	BOE保费可作为营业费用抵税、给付应税；商业贷款保护伤残险保费不可抵税、给付免税，且两者不得就同一笔商业贷款利息重复理赔。 / Business overhead expense (BOE) premiums are tax-deductible as business operating expenses and benefits are taxable; business loan protection disability insurance premiums are non-deductible and benefits are tax-free, and both policies cannot duplicate claims on the interest of the same commercial loan.
关键人伤残险参数与附加险 / Key Person Disability Insurance Parameters and Riders	key person disability insurance parameters and riders	由企业投保并作受益人，考试口径常见持股阈值区间10%–50%、等待期30–90天、给付期不超12个月、月封顶约$15,000（或年薪100%），常配保费豁免、复发条款及替代招聘费用附加险（replacement expense rider）。 / Owned by and payable to the business, exam conventions cite common shareholding limits in the 10% to 50% range, waiting periods of 30 to 90 days, benefit periods generally not exceeding 12 months, and monthly caps around $15,000 (or 100% of annual salary); policies frequently include waiver of premium, recurrent disability clauses, and a replacement expense rider.
买卖协议伤残买断险核心机制 / Core Mechanics of Buy-Sell Disability Buyout Insurance	disability buyout insurance provisions	要求满足常规职业（regular occupation）且完全不工作的严格定义，等待期长达12–24个月（现行产品常见360天），给付可一次性或分期，考试口径示例中60岁后保额每年递减20%。 / Requires satisfying a strict composite definition of being unable to perform one's regular occupation and not working at all, features an extended elimination period of 12 to 24 months (commonly 360 days in current contracts), offers lump-sum or instalment payouts, and in exam examples reduces coverage by 20% per year after age 60.
PHSP扣除限额与ELHT税务过渡 / PHSP	PHSP deduction limits and ELHT	私人健康服务计划（PHSP）报销医疗开支并在符合联邦税法第20.01条特定分支时按成人$1,500、未满18岁$750折算自雇扣除限额；旧健康福利信托（HWT）行政待遇已于2021年底

Deduction Limits and ELHT Tax Transition	transition	终止，未转入ELHT者按普通信托征税而非强制解散。 / Private Health Services Plans (PHSP) reimburse eligible medical expenses and, under specific self-employed provisions of Income Tax Act s.20.01, apply period-prorated deduction limits of $1,500 per adult and $750 per child under age 18; the administrative regime for legacy Health and Welfare Trusts (HWT) ended after 2021, and trusts not transitioned to ELHTs are taxed as ordinary trusts rather than forcibly dissolved.
企业主三层完整保障拼图 / Three-Layer Protection Framework for Business Owners	three-layer business owner protection	完整方案由BOE（保企业固定运营开支）、个人DI或拼团式计划（保业主个人收入替代）与PHSP（保日常自付医疗费用）三层叠加，缺一不可。 / A comprehensive plan stacks three indispensable layers: business overhead expense (BOE) insurance to protect fixed business overhead, individual disability insurance or a grouped plan to replace the owner's personal income, and a Private Health Services Plan (PHSP) to cover routine out-of-pocket medical costs.

自测提问（康奈尔左栏）

1. 企业面临的三类伤残风险分别对应哪三种商业伤残保险？ / Which three commercial disability insurance policies correspond to the three distinct disability risks faced by a business?
2. 营业费用险（BOE）的报销清单中，哪些项目能报、哪四类典型支出绝对不能报？ / On a business overhead expense (BOE) reimbursement schedule, which items are eligible and which four typical expenses are strictly excluded?
3. 为什么营业费用险（BOE）与商业贷款保护伤残险的税务处理正好相反？ / Why is the income tax treatment of business overhead expense (BOE) insurance the exact inverse of business loan protection disability insurance?
4. 关键人伤残险在受益人、给付期限和保额估算逻辑上与关键人寿险有何本质区别？ / How does key person disability insurance fundamentally differ from key person life insurance regarding beneficiary designation, benefit period, and coverage valuation logic?
5. 买卖协议伤残买断险在等待期、失能定义和60岁后保额变化上有哪些独特规则？ / What unique rules apply to buy-sell disability buyout insurance concerning waiting periods, disability definitions, and post-age-60 coverage reductions?

总结：请用三句话总结企业伤残险三件套（BOE、关键人伤残险、伤残买断险）各自解决的现金流痛点、受益人归属以及税务或保额递减的核心红线。 / In three sentences, summarize the specific cash-flow pain points resolved by the business disability trio (BOE, key person disability, and disability buyout insurance), their respective beneficiary designations, and their core boundaries regarding tax treatment or age-related benefit reductions.

第 18 章 · A&S 客户画像 / Client Profile: Income, Assets, Existing Coverage, and Gap Analysis

意外与疾病 / Accident & Sickness　P1 必拿分 / Must score　Client Profile · 模考 7 题

带着这几道题读：自雇客户刚注册EI未满12个月受伤能否申领？租金能计入可保劳动收入吗？ / If a self-employed client registered for EI special benefits less than 12 months ago is injured, can they claim? Can rental income count toward insurable earned income?；按考试口径，EI病假福利最长付几周？替代比例与RDSP供款上限怎么考？ / Under the exam benchmark, what is the maximum number of weeks of EI sickness benefits? How are the replacement rate and the RDSP contribution limit tested?；免税团体LTD逐元直接抵消应税CPP-D时，获批后税后缺口变大还是变小？ / When tax-free group LTD is offset dollar-for-dollar by taxable CPP-D, does the after-tax gap grow or shrink once CPP-D is approved?；双职家庭测算伤残险缺口时，为什么不能直接照抄扣减配偶收入后的理论差额？ / When sizing the disability gap for a dual-earner household, why can't you simply copy the theoretical difference left after subtracting the spouse's income?

怎么考

- 情景缺口计算题：给定税前月薪、团体长期伤残险（Group LTD）比例、保费缴纳方与有效税率，结合政府给付直接抵消（Direct Offset），要求算出真实税后收入替代率或每月保障缺口。 / Scenario-based gap calculation questions: Given gross monthly earnings, group long-term disability (LTD) replacement percentage, premium payor, and effective tax rate, combined with government benefit direct offsets, calculate the true after-tax income replacement rate or the net monthly coverage gap.
- 雇员与自雇者对比题：给出自由职业者或小企业主的收入结构（含营业开支、股息或租金）与申请就业保险特别福利（EI Special Benefits）的意向，考查可保劳动收入核定、12个月注册等待期及双风险敞口。 / Employee versus self-employed comparison questions: Given the income structure of a freelancer or small business owner (including business operating expenses, dividends, or rental income) and an intent to apply for Employment Insurance (EI) special benefits, evaluate insurable earned income, the 12-month registration waiting period, and dual risk exposures.
- 财务工具与测算方法辨析题：客户面临保费预算受限或需要评估等待期自我承担能力，要求在收入法（Income Approach）与支出法（Expense Approach）、净资产表（Net Worth Statement）与现金流量表（Cash Flow Statement）之间做出正确匹配。 / Financial tool and calculation methodology distinction questions: When a client faces premium budget constraints or needs to evaluate self-insurance capacity during an elimination period, correctly match between the income approach and expense approach, and between the net worth statement and cash flow statement.
- 双口径与政府福利规则题：考查就业保险病假福利（EI Sickness Benefits）考试口径（15周）与现行法规（26周）的差异、加拿大退休金计划伤残给付（CPP-D）的「严重且持久」判定及起付月份，以及注册残疾储蓄计划（RDSP）的终身供款上限与配款追回机制。 / Dual-standard and

高频陷阱（看到信号就警觉）

净收入与毛收入口径混淆 / Net Versus Gross Income Confusion Trap：题干同时出现税前收入（Gross Income）、有效税率（25%）以及雇主全额支付保费（Employer-paid premiums）或应税的 CPP-D。 / The question stem simultaneously mentions gross income, an effective tax rate (e.g., 25%), and employer-paid premiums or taxable CPP-D benefits.

自雇总营收当成可保收入 / Mistaking Gross Business Revenue for Insurable Income Trap：题干出现自雇者（Self-employed）、营业总收入、经营开支、被动投资收入，或刚在 MSCA 注册未满 12 个月。 / The question stem mentions a self-employed individual, gross business revenue, operating expenses, passive investment income, or an MSCA registration under 12 months.

漏算政府给付抵消与假设必批 / Overlooking Government Benefit Offsets and Assuming Guaranteed Approval Trap：题干提到团体主合同含直接抵消条款（Direct Offset）、85% 全来源上限，或客户刚提交 CPP-D 申请尚未获批。 / The question stem mentions that the group master contract contains a direct offset clause, an 85% all-source maximum, or a newly submitted CPP-D application that has not yet been approved.

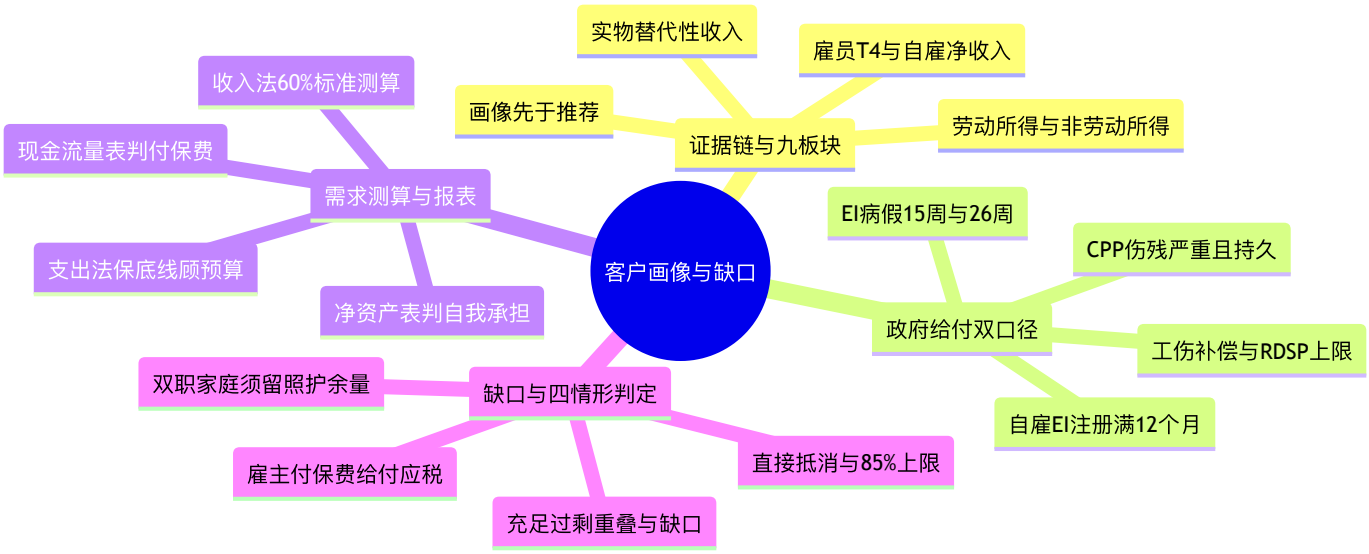
测算尺子与财务报表错配 / Mismatching Calculation Methodologies and Financial Statements Trap：题干强调保费超出当前预算（Affordability constraint）、询问能否自我承担等待期，或询问每月可削减哪项开支来付保费。 / The question stem highlights an affordability constraint, asks whether the client can self-insure through the elimination period, or asks which monthly expenses can be trimmed to afford premiums.

government benefit rule questions: Test the differences between the exam benchmark (15 weeks) and current legislation (26 weeks) for Employment Insurance (EI) sickness benefits, the severe and prolonged disability criteria and benefit start month for Canada Pension Plan disability (CPP-D), and the lifetime contribution limit and grant repayment clawback rules for the Registered Disability Savings Plan (RDSP).

- 保障充足性四情形判定题：汇总客户现有团体险、个人险与政府给付后，对照全来源上限（All-Source Maximum，常为85%），判断属于充足、过剩、重叠超上限还是存在缺口，并选出合规的下一步行动。 / Coverage adequacy four-scenario determination questions: After aggregating a client's existing group coverage, individual policies, and government benefits, compare against an all-source maximum (typically 85% of pre-disability gross income) to determine whether coverage is adequate, excessive, overlapping above the cap, or deficient, and select the compliant next step.

考试口径与现行政策张冠李戴 / Conflating Exam Benchmarks with Current Legislation Trap：题干询问标准考试口径下的 EI 病假给付周数（15 weeks vs 26 weeks）、600 小时门槛，或客户准备辞职创业仍指望原有团体 LTD。 / The question stem asks for the standard exam benchmark duration of EI sickness benefits (15 weeks vs. 26 weeks) or the 600-hour threshold, or involves a client resigning to start a business while expecting group LTD to continue.

导图



第 18 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
客户画像与先画像后推荐纪律 / Client Profile and the Fact-Finding Discipline	Client profile & Fact-finding interview	画像先于推荐、推荐先于合同，所有收入、负债与既有保障必须基于报税表、工资单、团体福利手册等可验证证据。 / Profiling must precede product recommendations and recommendations must precede contracts; all income, debts, and existing coverages must be verified using objective documentation such as tax returns, pay stubs, and group benefits booklets.
实物收入（居家照护替代价值） / In-Kind Income and Household Replacement Value	In-kind income	全职照护家庭的配偶或社区互助虽不直接产生现金，但失能后家庭须另花钱雇人顶替，需求测算时必须计入这类替代价值。 / Contributions from a stay-at-home caregiving spouse or community support do not generate direct cash flow, but their disability forces the household to incur replacement costs for outside caregiving; needs analyses must account for this economic value.
自雇者可保收入与 EI 注册规则 / Self-Employed Insurable Income and EI Registration Rules	Self-employed insurable income & EI special benefits	自雇者按近两三年报税表核定劳动性净经营收入（不直接叠加租金股息），且须自愿注册满 12 个月、满足上一年净自雇收入门槛（2025年为$9,254）才可申领 EI 特别福利，注册后 60 天内可无条件撤回。 / A self-employed client's insurable earned income is verified from the net business income on the past two to three years of tax returns (excluding passive rent or dividends); furthermore, claiming EI special benefits requires voluntary registration for at least 12 months and meeting the prior year's net earnings threshold ($9,254 in 2025), with an unconditional withdrawal window within 60 days of registration.
EI 病假给付双口径与家庭补充 / EI Sickness Benefits Dual Benchmarks and Family Supplement	EI sickness benefits & Family Supplement	考试口径（2022版）规定 EI 病假最长给付 15 周（周上限约$638、旧门槛420小时），而 2026 现行法规为最长 26 周、55% 替代率（周上限$729、需600受保小时且周收入减损超40%）；家庭年净收入不超过 $25,921 且有 18 岁以下子女领 CCB 可获家庭补充。 / The 2022 exam benchmark sets EI sickness benefits at a maximum of 15 weeks (weekly maximum around $638, former 420-hour threshold), whereas current 2026 legislation provides up to 26 weeks at a 55% earnings replacement rate (weekly maximum $729, requiring 600 insurable hours and a weekly earnings reduction over 40%); families with net income up to $25,921 receiving the CCB for children under 18 receive an added Family Supplement.
CPP 伤残给付判定与起付时间 / CPP Disability Benefit Criteria and Waiting Period	CPP disability benefit (CPP-D) — Severe and prolonged	申请人须同时满足年龄、缴费及「严重且持久」医学标准（经常不能从事实质有收益工作，且长期、期限不确定或很可能致死），通常从认定严重且持久伤残后的第四个月起付，且给付属于应税收入。 / Applicants must satisfy age, contribution history, and the medical threshold of severe and prolonged disability (regularly incapable of pursuing any substantially gainful occupation, with an indefinite duration or likely fatal prognosis); benefits are taxable and typically begin in the fourth month following the month disability is determined.
RDSP 供款、配款与追回机制 / RDSP Contribution, Grant Matching, and Clawback Rules	Registered Disability Savings Plan (RDSP)	RDSP 面向符合残疾税收抵免（DTC）者，终身私人供款上限 $200,000（无年度上限，可供至 59 岁当年末），CDSG 终身最高 $70,000、CDSB 终身最高 $20,000（只配至 49 岁当年），普通提款按每取 $1 追回最多 $3 政府配款并以协助保留金额（AHA）为限。 / The RDSP is available to individuals eligible for the Disability Tax Credit (DTC), featuring a $200,000 lifetime private contribution limit (no annual limit, contributions permitted until December 31 of the year the beneficiary turns 59), lifetime maximums of $70,000 for CDSG and $20,000 for CDSB (matching grants available until age 49), and an assistance holdback amount (AHA) repayment rule that claws back up to $3 in grants for every $1 withdrawn.
收入法与支出法的选择标准 / Selection Criteria for Income Approach Versus Expense Approach	Income approach vs. Expense approach	收入法按税前收入固定比例（常为 60%）测算维持原生活水准所需保额，支出法按实际必要开支测算底线需求；当收入法保费超出客户预算时，应先按支出法投保并配合未来购买权（FPO）日后补足。 / The income approach calculates the benefit required to maintain lifestyle as a fixed percentage of gross earnings (typically 60%), while the expense approach tallies essential outlays to establish a baseline survival budget; if the income approach premium exceeds client affordability, the agent should structure coverage using the expense approach supplemented with a future purchase option (FPO) rider.
团体 LTD 税务处理与直接抵消计算 / Group LTD Taxation and Direct Offset Calculations	Taxability of benefits & Direct offset	雇主支付保费则团体 LTD 给付应税，员工全额自付保费则给付免税；当合同约定直接抵消 CPP-D 时，先从 LTD 名义给付中逐元扣减 CPP-D 税前额，再将扣税后的 CPP-D 净额与剩余 LTD 相加算出真实到手收入。 / Group LTD benefits are taxable if the employer pays any portion of the premium and tax-free if the employee pays 100% of the premium; under a direct offset clause, pre-tax CPP-D is subtracted dollar-for-dollar from the nominal LTD benefit, and after-tax CPP-D is added to the remaining LTD to determine net take-home income.

净资产表与现金流量表的分工 / Roles of the Net Worth Statement and Cash Flow Statement	Net worth statement vs. Cash flow statement	净资产表用公允市值资产减负债，评估客户能否靠自有储备扛过等待期；现金流量表按月追踪净收入减支出，评估客户每月是否有结余支付保费。 / The net worth statement (assets at fair market value minus liabilities) determines whether a client has sufficient liquid reserves to self-insure through an elimination period; the cash flow statement (tracking monthly net income minus expenditures) verifies whether discretionary cash flow exists to afford insurance premiums.
保障充足性四情形与全来源上限 / Four Coverage Adequacy Scenarios and the All-Source Maximum	Coverage adequacy & All-source maximum	比对现有保障到手净额与测算需求后分为充足、过剩、重叠超全来源上限（常见为失能前税前收入的 85%，触发后团体给付被削减）和存在缺口四类，存在缺口时须按时间轴上最大的那段缺口核定保额。 / Comparing net available benefits against calculated needs classifies coverage into adequate, excessive, overlapping above the all-source maximum (commonly 85% of pre-disability gross income, which triggers a reduction in group benefits), or deficient; when a gap exists, coverage must be sized to cover the largest gap across the disability timeline.

自测提问（康奈尔左栏）

1. 为什么自雇者和雇员填同一张客户画像清单，可保收入基数、证明文件、EI资格与等待期选择会完全不同？ / Why do self-employed individuals and salaried employees have systematically different insurable income bases, verification documents, EI eligibility, and elimination periods despite completing the same profiling questionnaire?
2. EI病假福利在考试口径与2026现行规则下的周数、工时门槛分别是什么？为什么不能把EI直接当成团体险之外白拿的收入？ / What are the benefit durations and qualifying hour thresholds for EI sickness benefits under the exam benchmark versus current 2026 legislation, and why cannot EI benefits be treated as automatic extra income on top of group coverage?
3. 当雇主付保费或员工自付保费时，团体LTD搭配应税的CPP-D直接抵消，怎样一步步算出税后到手金额与每月缺口？ / Under employer-paid versus employee-paid premium arrangements, how do direct offsets of taxable CPP-D against group LTD benefits impact net take-home income and the resulting monthly coverage gap step by step?
4. 收入法与支出法、净资产表与现金流量表各自回答什么问题？客户预算不够时代理人该如何处理？ / What distinct questions do the income approach versus expense approach and the net worth statement versus cash flow statement answer, and how should an agent structure coverage when the client faces premium budget constraints?
5. 双职家庭测算缺口为什么要留照护余量？画像收尾时的「充足、过剩、重叠超85%上限、缺口」四种情形分别该怎么应对？ / Why must a caregiving cushion be built into the disability needs analysis for a dual-earner household, and what compliant actions correspond to the four coverage adequacy scenarios (adequate, excessive, overlapping above the 85% cap, and deficient)?

总结：请用三句话总结：从收集九板块证据、区分雇员与自雇口径、核清政府与团体给付的税务及抵消规则，到最终用净资产表和现金流量表落地缺口方案的完整逻辑。 / In three sentences, summarize the complete diagnostic progression: gathering objective evidence across the nine profiling blocks, distinguishing employee versus self-employed rules, clarifying the taxation and direct offsets of government and group benefits, and deploying the net worth and cash flow statements to structure a viable gap solution.

第 19 章 · A&S 推荐、合同与服务 / A&S Recommendation, Contract and Service: Statutory Conditions, Claims and Renewability

意外与疾病 / Accident & Sickness　P1 必拿分 / Must score　Recommendation, Contract & Service · 模考 9 题

带着这几道题读：客户预算超支想降保费，四个修改杠杆里哪一个会让保司随时能收回保障？ / When a client exceeds their budget and seeks to reduce premiums, which of the four adjustment levers restores the insurer's unilateral right to revoke coverage?；伤残发生后因住院昏迷超过 30 天才报案，按考试口径和 BC 法条还能理赔吗？ / If an insured is comatose in the hospital and reports a disability claim after more than 30 days, is the claim still payable under the exam benchmark and BC statutory rules?；被保险人投保后改做高风险工作未通知保司，受伤索赔时保司能直接拒赔吗？ / If an insured switches to a higher-risk occupation without notifying the insurer, can the insurer deny the claim outright when an injury occurs?；个人 A&S 保单已经交付给客户但首期保费还没扣款，此时合同对保司有约束力吗？ / When an individual accident and sickness policy has been delivered to the client but the initial premium has not yet cleared, is the contract binding on the insurer?

怎么考

- 预算受限时的保费调整杠杆题：给出客户觉得保费过高的情境，考延长等待期、缩短给付期、降低保额、改换续保性质四个杠杆各自牺牲什么保障，以及为什么改换为可撤销续保代价最大。 / Premium adjustment levers under budget constraints questions: Given a scenario where a client finds premiums unaffordable, test what coverage is sacrificed under each of the four levers (extending the elimination period, shortening the benefit period, reducing the benefit amount, or changing the renewability tier), and why switching to a cancellable policy carries the highest cost.
- 法定条款时限辨析题：在理赔场景中混排 30 天书面通知、90 天提交理赔证明、考试口径 6 个月（BC 现行法 1 年）迟延豁免上限，测试能否区分通知期与交证期以及客观无法按期报案时的救济规则。 / Statutory condition time limits discrimination questions: In a claims scenario mixing the 30-day written notice, 90-day proof of claim, and exam-benchmark 6-month (BC current statute 1-year) late notice relief limit, test whether candidates can distinguish notice from proof deadlines and apply relief rules when timely reporting is objectively impossible.
- 续保等级对比题：给出不可撤销、保证续保、可撤销或有条件续保合同，测试保司在服务期内能否单方终止合同、能否针对个人或按同一费率分类整批上调保费，以及终止通知的法定天数（15 天挂号信或 5 天亲送）。 / Renewability tiers comparison questions: Given non-cancellable, guaranteed renewable, cancellable, or conditionally renewable contracts, test whether an insurer can unilaterally terminate the policy during the service period, whether it can adjust premiums individually or en masse by rate class, and the statutory notice period for termination (15 days by registered mail or 5 days personal delivery).
- 跨险种规则防混题：在保单交付未付首期保费、保单失效复效、职业变更至高风险工种、不可撤销受益人指定等场景中，测试能否避开人寿险规则干扰，按 A&S 合同的法定条款（如比例折算给付、已交付即约束保司）作答。 / Cross-product

高频陷阱（看到信号就警觉）

理赔三时限张冠李戴 / Confusing the Three Claim Time Limits Trap：题干出现事故或伤残发生后的天数（如第 45 天）、住院无法理事、提交收据或医疗证明的期限。 / The question stem mentions days elapsed following an accident or disability (e.g., day 45), hospitalization preventing management of affairs, or deadlines for submitting receipts or medical proof.

保证续保等同不可撤销 / Equating Guaranteed Renewable with Non-Cancellable Trap：题干问保司在服务期内能否调整保费、能否拒绝续保，或对比 non-cancellable 与 guaranteed renewable 的区别。 / The question stem asks whether the insurer can adjust premiums or refuse renewal during the service period, or contrasts non-cancellable with guaranteed renewable provisions.

职业变更高风险即拒赔 / Assuming Claim Denial for High-Risk Change of Occupation Trap：题干描述被保险人投保后转入更高风险职业（change of occupation）并在新职业工作或生活中出险。 / The question stem describes an insured switching to a higher-risk occupation (change of occupation) after policy issuance and suffering a loss during work or everyday life.

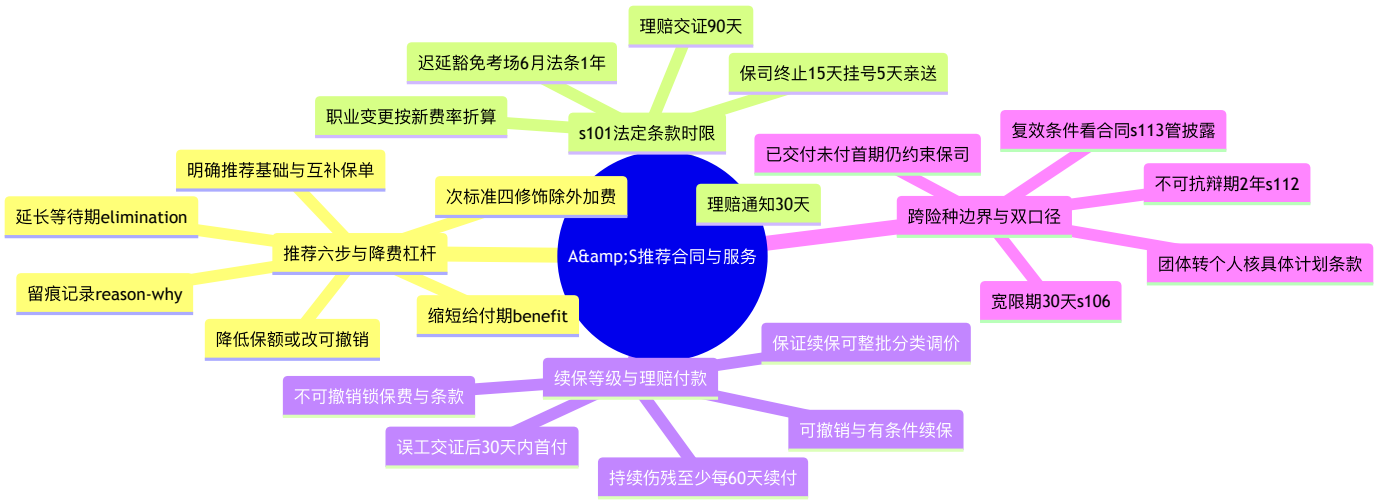
跨险种套用寿险生效与复效规则 / Transposing Life Insurance Issue and Reinstatement Rules Trap：题干出现 A&S 保单已交付但首期保费未付、交付前健康变化，或询问 A&S 保单断缴后的复效期限。 / The question stem presents an A&S policy delivered without initial premium payment, a change in health prior to delivery, or asks for the reinstatement deadline following policy lapse.

line boundary questions: In scenarios involving delivery without initial premium payment, lapse and reinstatement, change of occupation to a higher-risk role, or irrevocable beneficiary designation, test whether candidates can avoid conflation with life insurance rules and correctly apply accident and sickness statutory conditions (such as pro-rata benefit adjustments and the binding nature of delivery upon the insurer).

- 理赔给付节奏与团体转换实务题：考收到理赔证明后误工首笔给付（30 天内）与持续给付（至少每 60 天一次）的法定时限，以及离职时团体 A&S 转个人险须核对具体计划文件而非盲目套用寿险惯例。 / Claims payment schedule and group conversion practical questions: Test statutory deadlines for the initial loss-of-income payment (within 30 days) and ongoing payments (at least every 60 days) after receiving proof of claim, and the requirement to verify specific plan documents when converting group A&S to individual coverage upon employment termination rather than blindly applying group life conventions.

理赔须等结案才首付或盲套转换天数 / Expecting Deferred First Claim Payment or Blindly Applying Group Conversion Days Trap：题干涉及长期伤残给付的付款节奏（payment of claims），或员工离职申请将团体 A&S 转为个人保单的窗口期。 / The question stem involves the claims payment schedule for long-term disability, or an employee applying to convert group A&S coverage to an individual policy upon termination.

导图



第 19 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
理赔通知与理赔交证时限 / Notice of Claim and Proof of Claim Time Limits	notice of claim / proof of claim	索赔发生后须在 30 天内书面通知保司（Condition 5(1)(a)），并在索赔发生后 90 天内提交书面理赔证明（Condition 5(1)(b)），两项均从索赔产生日起算。 / Written notice of claim must be given to the insurer within 30 days from the date the claim arose (Condition 5(1)(a)), and written proof of claim must be submitted within 90 days from the date the claim arose (Condition 5(1)(b)); both periods run concurrently from the onset of the claim.
迟延报案豁免与双口径上限 / Late Notice Relief and Dual Benchmark Upper Limits	late notice relief	若原定 30/90 天内办理在客观上不合理可行且之后尽快补办，理赔不因逾期直接失效；考试口径写最长不超 6 个月，BC 现行 s.101 Condition 5 法定上限为最迟不超过 1 年。 / If giving notice or proof within the standard 30 or 90 days is not reasonably possible and is completed as soon as reasonably possible thereafter, the claim is not invalidated; the exam benchmark specifies a maximum late window of 6 months, whereas current BC statutory Condition 5 sets the absolute limit at no later than 1 year.
保司单方终止通知期与续保等级 / Insurer Unilateral Termination Notice and Renewability Tiers	termination of insurance / non-cancellable / guaranteed renewable	法定默认保司终止个人合同须至少 15 天挂号信或 5 天亲自送达通知（Condition 4）；不可撤销合同完全锁定保费与条款，保证续保合同不能终止但可按同一费率分类整批调价。 / By statutory default, insurer termination of an individual policy requires at least 15 days notice by registered mail or 5 days notice personally delivered (Condition 4); non-cancellable contracts fully lock in both premiums and provisions, whereas guaranteed renewable contracts cannot be terminated but permit class-wide premium adjustments by rate classification.
职业变更条款的比例折算机制 / Change of Occupation Clause and Pro-Rata Benefit Reduction	change of occupation clause	被保险人转入更高风险职业后出险，保司不直接拒赔，而是按原保费在新职业费率下能买到的保额比例折算给付（s.101 Condition 3）。 / If an insured suffers a loss after engaging in an occupation classified as higher risk than that stated in the policy, the insurer does not deny the claim, but pays the reduced benefit that the premium paid would have purchased under the new occupational rate (s.101 Condition 3).
四种保费调整杠杆与代价 / Four Premium Adjustment Levers and Trade-Off Costs	managing premiums	客户预算不足时可通过延长等待期、缩短给付期、降低保额或改换合同性质（如改为可撤销）降费，其中改换为可撤销会让保司恢复单方终止权，代价最大。 / When client budget constraints arise, premiums can be managed by lengthening the elimination period, shortening the benefit period, reducing the benefit amount, or modifying policy renewability (such as switching to cancellable); switching to cancellable carries the highest sacrifice because it restores the insurer's unilateral right to terminate coverage.
次标准风险的四种承保修饰 / Four Underwriting Modifications for Substandard Risks	exclusion / limitation / rating / deductible	客户健康或职业属次标准风险时，保司常用除外条款、限制、加费、免赔额四种方式之一或组合承保，而非直接拒保。 / When an applicant presents substandard medical or occupational risk, insurers frequently issue coverage using one or a combination of four modifications: exclusions, limitations, ratings (extra premiums), or deductibles, rather than outright declining the application.
理赔款首付、续付及非误工给付时限 / Initial Claim Payment, Ongoing Payouts, and Non-Income Benefits	payment of claims	保司收到通知后 15 天内须提供交证表格（Condition 6）；误工给付在收到证明后 30 天内首付，持续伤残期间至少每 60 天续付一次（Condition 9），其他保险金在收到证明后 60 天内支付（Condition 8）。 / The insurer must furnish proof of claim forms within 15 days of receiving notice (Condition 6); loss-of-income benefits must have their initial payment made within 30 days after receiving proof of claim and ongoing payments made at least every 60 days during continuous disability (Condition 9), while non-income benefits must be paid within 60 days of proof (Condition 8).
A&S 已交付保单效力与宽限期 / Delivered Policy Enforceability and Statutory Grace Period	grace period	A&S 保单已交付时，即使首期保费未付，合同也约束保司（保费仍可追偿，s.106(1)）；首期之后的续期保费享有至少 30 天（或合同约定更长）的宽限期（s.106）。 / Once an accident and sickness policy is delivered, it is binding on the insurer even if the initial premium remains unpaid (with the insurer retaining the right to recover the premium, s.106(1)); renewal premiums following the initial premium receive a statutory grace period of at least 30 days (or longer if contractually specified, s.106).

A&S 复效与不可抗辩期 / A&S Policy Reinstatement and Incontestability Clock	reinstatement / incontestability period	A&S 法律未规定与寿险相同的统一法定复效窗口，恢复条件看合同，但复效时的不告知受 s.113 约束且两年不可抗辩期（s.112）从复效日起重新起算。 / Accident and sickness legislation does not establish a universal statutory reinstatement window like life insurance, leaving reinstatement conditions to the contract; however, disclosures upon reinstatement are subject to section 113, and the two-year incontestability period (s.112) runs afresh from the reinstatement date.
不可撤销受益人指定与团体转个人窗口 / Irrevocable Beneficiary Designation and Group Conversion Windows	irrevocable beneficiary	A&S 不可撤销受益人指定须在被保险人生存期间向保司加拿大总部或主要办事处提交才生效（s.118）；团体 A&S 转个人险窗口在考试口径中有 30 天与 31 天两处表述，实务须核对具体计划文件。 / An irrevocable beneficiary designation under an accident and sickness policy must be made by non-testamentary instrument during the insured's lifetime and delivered to the insurer's Canadian head office or chief agency to take effect (s.118); the group A&S conversion window appears as both 30 days and 31 days in exam materials, requiring advisors in practice to verify specific group plan documents.

自测提问（康奈尔左栏）

1. 客户嫌个人伤残险保费太贵时，哪四个合同杠杆可以降费？为什么把保证续保改为可撤销续保应当放在最后考虑？ / When a client finds individual disability insurance premiums unaffordable, which four contractual levers can reduce cost, and why should converting guaranteed renewable to cancellable coverage be the absolute last resort?
2. s.101 法定条款中，理赔通知、理赔交证、迟延豁免上限分别是多少天？考试口径与 BC 现行法条在迟延豁免上有什么差异？ / Under section 101 statutory conditions, what are the exact deadlines for notice of claim, proof of claim, and late notice relief, and what is the key distinction between the exam benchmark and current BC legislation regarding late relief limits?
3. 不可撤销（non-cancellable）、保证续保（guaranteed renewable）、可撤销（cancellable）三种合同在服务期内的终止权和调价权有什么区别？ / What are the precise operational differences among non-cancellable, guaranteed renewable, and cancellable contracts regarding the insurer's unilateral rights to terminate coverage or increase premiums during the policy term?
4. 被保险人投保后换了更高风险的职业却未告知保司，出险时根据 s.101 Condition 3 会怎么处理？ / If an insured switches to a higher-risk occupation after policy inception without notifying the insurer, how is a subsequent disability claim handled under statutory Condition 3?
5. A&S 保单在“交付但未付首期保费”以及“断缴后申请复效”这两件事上，和人寿险的法律规则有什么本质不同？ / How do legal rules governing accident and sickness policies fundamentally differ from life insurance regarding policy delivery without initial premium payment and reinstatement following policy lapse?

总结：用三句话总结：A&S 推荐留痕与四个降费杠杆的取舍逻辑、s.101 法定条款中的核心时限数字（30/90/6个月或1年/15或5天/30与60天），以及 A&S 与寿险在生效、复效和转换窗口上的关键边界。 / In three sentences, summarize: the trade-off logic among the reason-why documentation and four premium reduction levers, the critical statutory time limits under section 101 (30 days, 90 days, 6 months or 1 year, 15 or 5 days, and 30 or 60 days), and the essential legal boundaries separating accident and sickness insurance from life insurance regarding policy formation, reinstatement, and conversion windows.

第 20 章 · 团体福利计划 / Group Benefit Plans: Eligibility, Rating, Co-ordination of Benefits, and ASO

意外与疾病 / Accident & Sickness　P3 过一遍 / Skim　Group Plans · 模考 1 题

带着这几道题读：企业现金流稳但只有40人，想省钱且自定义目录，该选哪种资金方式？ / If a company has stable cash flow but only 40 employees, wants to reduce costs, and desires a custom formulary, which funding method should it choose?；EI病假延到26周后，雇主STD申请保费减免的最低周数门槛变了吗？ / After EI sickness benefits were extended to 26 weeks, did the minimum benefit duration requirement change for employers applying for an STD premium reduction?；已知团体信度30%、经验费率$45、手册费率$60，混合费率是多少？ / Given a group credibility of 30%, an experience rate of $45, and a manual rate of $60, what is the blended rate?；夫妻分别在3月和7月过生日，孩子$600牙科账单两份计划怎么协调赔付？ / When spouses have birthdays in March and July, how do their two plans co-ordinate payment for their child's $600 dental bill?

怎么考

- 企业画像配资金方式题：给出雇主规模、现金流状况、理赔历史稳定性及条款自主权诉求，考你判断该选不返还式记账（non-refund accounting）、返还式记账（refund accounting）还是纯行政服务型（Administrative Services Only, ASO）。 / Matching employer profile to funding method: Given an employer's group size, cash flow condition, stability of claims history, and demand for plan design autonomy, test your ability to determine whether to select non-refund accounting, refund accounting, or Administrative Services Only (ASO).
- 混合费率与信度判定题：给出团体人数（如25人分水岭）、流动率（5–10%/年为低）与历史理赔年限，考你判断信度（credibility）高低，或用信度加权经验费率（experience rating）与手册费率（manual rating）算出混合费率（blended rating）。 / Blended rating and credibility determination: Given group size (e.g., the 25-employee threshold), annual employee turnover rate (5–10% per year is considered low), and years of claims history, test your ability to assess credibility levels or calculate a blended rate by weighting experience rating and manual rating by credibility.
- 双职家庭协调给付（COB）计算题：给出夫妻双方各自雇主计划的报销比例及父母生日月份，考你按生日规则（birthday rule）判断首付方，再按「较小者」原则算出次付方补差金额与家庭自付额。 / Dual-income family coordination of benefits (COB) calculation: Given the reimbursement percentages under both spouses' employer plans and the parents' birth months, test your ability to identify the primary payer using the birthday rule, and calculate the secondary payer's top-up amount and the out-of-pocket family cost using the lesser-of rule.
- 团体伤残给付税务与累计缴费抵减题：给出雇主与员工共同分摊保费（如各付50%）的长期伤残（LTD）计划，考你按累计未抵减员工缴费额（而非当年保费分摊比例）扣减当年应税给付。 / Taxation of group disability benefits and cumulative contribution deductions: Given a long-term disability (LTD) plan where the employer and employee

高频陷阱（看到信号就警觉）

保费比例当应税比例 / Treating premium sharing percentage as taxable benefit percentage：题干同时出现雇主与员工分摊保费百分比（如50%）以及员工历年累计未抵减缴费金额（如$3,600）。 / The question stem simultaneously provides an employer-employee premium split percentage (e.g., 50%) and the employee's cumulative unapplied contribution amount (e.g., $3,600).

混合费率信度权重套反 / Reversing credibility weighting in blended rating：题干给出信度百分比（如30%）及经验费率、手册费率两个数字，或询问新成立/25人以下小团体的信度评级。 / The question stem gives a credibility percentage (e.g., 30%) alongside both experience and manual rates, or asks for the credibility rating of a newly formed group or one with fewer than 25 employees.

生日规则看错判据与次付漏比大小 / Misjudging birthday rule criteria and omitting the lesser-of comparison for secondary payer：题干出现夫妻双方生日月份、子女医疗或牙科账单金额，以及两份团体计划不同的报销比例（如80%与100%）。 / The question stem provides both spouses' birth months, an eligible medical or dental bill for a dependent child, and differing reimbursement percentages under two group plans (e.g., 80% and 100%).

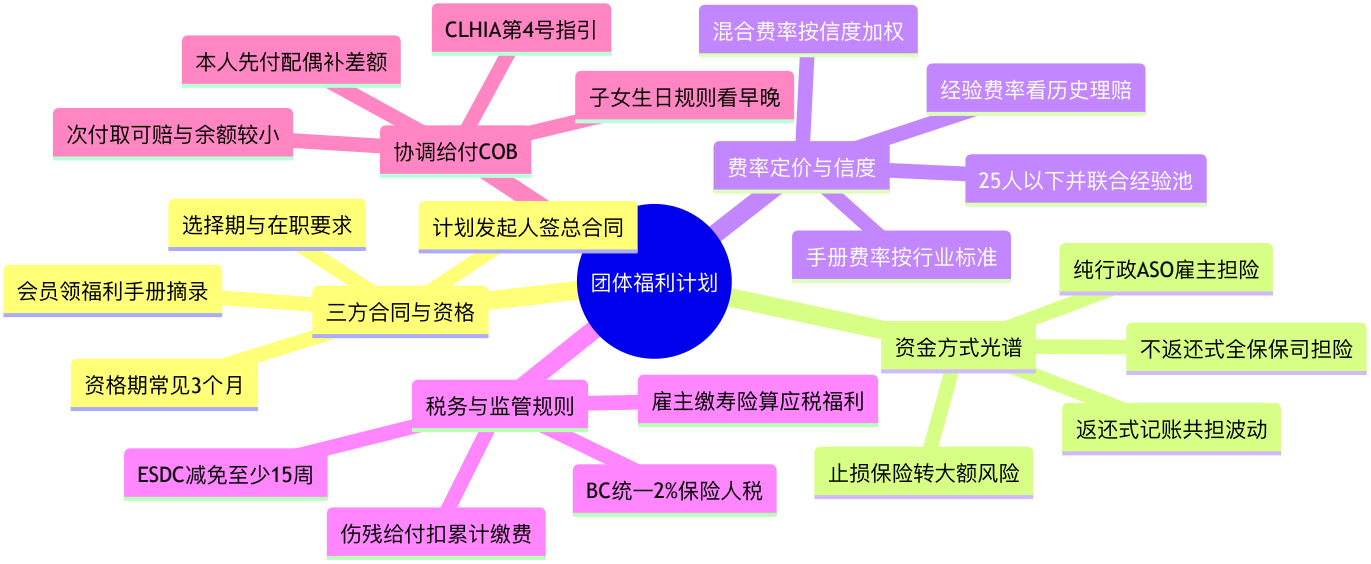
EI周数延长与ESDC门槛混淆 / Confusing extended EI duration with the ESDC reduction threshold：题干询问雇主STD计划申请EI保费减免（EI Premium Reduction Program）的最低给付周数要求（至少15周）或EI病假福利周数。 / The question stem asks for the minimum benefit duration requirement (at least 15 weeks) for an employer STD plan to qualify for the EI Premium Reduction Program, or asks about EI sickness benefit duration.

share premium costs (e.g., 50% each), test your ability to deduct cumulative unapplied employee contributions (rather than applying the annual premium split percentage) from the current year's taxable disability benefits.

- EI病假福利与ESDC保费减免资格题：给出雇主短期伤残（STD）计划的给付周数（15周）与替代比例（55%），考你区分EI病假福利周数双口径（考试口径15周 vs 现行26周）以及ESDC保费减免计划的资格门槛。 / EI sickness benefits and ESDC premium reduction eligibility: Given an employer's short-term disability (STD) benefit duration (15 weeks) and income replacement ratio (55%), test your ability to distinguish the dual benchmarks for EI sickness benefit duration (15 weeks for exam purposes vs. 26 weeks under current law) and the eligibility thresholds for the ESDC EI Premium Reduction Program.

ASO误当无保险或全保无视风险 / Misunderstanding ASO as unmanaged self-insurance or ignoring risk volatility：题干描述雇主希望省保费或自定义福利清单，同时交代其员工人数（如25人以下或40人）、现金流状况及风险承受能力。 / The question stem describes an employer seeking to reduce premium costs or customize its benefit formulary, while noting its headcount (e.g., fewer than 25 or 40 employees), cash flow condition, and risk tolerance.

导图



第 20 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
团体合同三方关系与法定权利 / Three-party relationship and statutory rights under group contracts	plan sponsor / master contract / benefit booklet	总合同由计划发起人（雇主）与保险公司签署，会员只拿福利手册摘录而非合同当事方，但依BC省法s.96享有取得相关保单副本等权利，s.99另管证书。 / The master contract is executed between the plan sponsor (the employer) and the insurer; plan members receive only a benefit booklet summary and are not contracting parties, but under BC Insurance Act s. 96 they retain statutory rights to obtain policy copies, while s. 99 governs certificates.
大数法则与25人规模门槛 / Law of large numbers and the 25-employee threshold	law of large numbers / pooled experience / turnover rate	25人以下的团体历史数据不足以单独支撑精算定价，须并入同类小团体的联合经验池定价；年流动率5—10%视为低，对定价有利。 / Groups with fewer than 25 employees lack sufficient claims data to support independent actuarial pricing and must be pooled into an experience pool of similar small groups; an annual employee turnover rate of 5–10% is considered low and favourable for pricing.
三种资金方式的风险转移光谱 / Risk-transfer spectrum across three funding methods	non-refund accounting / refund accounting / Administrative Services Only (ASO)	从不返还式记账（全保，保司担全部风险享结余）、返还式记账（共担波动、优于预期返还部分保费）到ASO（雇主自担理赔风险并享全部结余，可配止损保险），雇主承担的波动逐级增加。 / Across the spectrum from non-refund accounting (fully insured: insurer bears all claims risk and keeps surpluses), to refund accounting (shared claims volatility: partial premium refund when claims are lower than expected), to Administrative Services Only (ASO: employer bears claims risk and keeps all surpluses, optionally paired with stop-loss insurance), the employer assumes progressively higher volatility.
团体保费与给付的联邦税务处理 / Federal tax treatment of group premiums and benefit payments	taxable benefit / cumulative employee contributions	雇主缴付的团体定期寿险与定额AD&D保费构成员工应税福利；雇主参与缴费的STD/LTD计划在缴费时不计福利，但给付须依ITA s.6(1)(f)扣除员工历年尚未用于抵减的累计缴费后计入应税收入。 / Employer-paid premiums for group term life and scheduled AD&D constitute a taxable benefit to employees; employer-contributed STD and LTD plans generate no taxable benefit when premiums are paid, but periodic benefits received are taxable under ITA s. 6(1)(f) after deducting the employee's cumulative unapplied premium contributions.
EI病假福利与ESDC保费减免双口径 / Dual benchmarks for EI sickness benefits and ESDC premium reduction	ESDC EI Premium Reduction Program	考试口径EI病假福利为15周、55%、上限$638/周（现行已延至26周、上限$729/周），但雇主STD计划向ESDC登记保费减免的最低周数门槛现行仍为至少15周，金额门槛则随当年EI上限同步调整。 / The exam benchmark for EI sickness benefits is 15 weeks at 55% capped at $638 per week (under current law extended to 26 weeks capped at $729 per week), but the minimum benefit duration requirement for an employer STD plan to register for an ESDC premium reduction remains at least 15 weeks, while the weekly dollar cap adjusts annually to match the prevailing EI maximum.
新员工入职的三道保障门槛 / Three coverage eligibility hurdles for new employees	qualification period / enrolment window / actively-at-work requirement	新员工通常须先满资格期（常见3个月），再在30—60天选择期内完成加入手续，且须满足合同约定的实际或视同在职要求。 / New employees typically must satisfy a qualification period (commonly 3 months), complete enrolment within a 30–60 day enrolment window, and meet the contract's actively-at-work requirement (or deemed actively-at-work status).
三种团体费率方法与混合费率公式 / Three group rating methods and the blended rating formula	manual rating / experience rating / blended rating / credibility	混合费率 = 信度 × 经验费率 + (1 — 信度) × 手册费率；规模越大、流动率越低、历史年限越长则信度越高，无历史数据的新团体信度为零。 / Blended rate = (credibility * experience rate) + ((1 – credibility) * manual rate); larger group size, lower employee turnover, and longer claims history increase credibility, while new groups with no claims history have zero credibility.
协调给付（COB）与子女生日规则 / Co-ordination of benefits (COB) and the birthday rule for dependent children	co-ordination of benefits (COB) / birthday rule / CLHIA Guideline G4	依CLHIA Guideline G4，子女理赔由父母中生日在日历年内更早者的计划作首付方（继父母排在亲生父母之后），次付方赔付「若作首付本可赔金额」与「首付未覆盖余额」中的较小者。 / Under CLHIA Guideline G4, dependent child claims are paid first by the plan of the parent whose birthday falls earlier in the calendar year (stepparent plans rank behind natural parents); the secondary payer pays the lesser of the benefit it would have paid as primary and the unpaid balance left by the primary plan.
省级团体保费税与BC省口径 / Provincial group	group premium tax	各省对保费征收2—3%通用保费税（安省、魁省、曼省另有团体专属零售销售税），而BC省依《Insurance Premium Tax Act》统一征收2%保险人税，不区分团体与个人保单。 / Provinces levy a general premium tax of 2–3% on insurance premiums (Ontario,

premium taxes and the BC standard	Quebec, and Manitoba also levy separate retail sales taxes on group benefits), whereas BC levies a uniform 2% insurer tax under the Insurance Premium Tax Act without distinguishing between group and individual policies.

自测提问（康奈尔左栏）

1. 为什么团体计划的员工拿不到总合同原件，这决定了雇主换保司时员工处于什么地位？ / Why do group plan employees not receive the original master contract, and what status does this give employees when an employer changes insurers?
2. 全保、返还式记账、ASO三种资金方式下，理赔风险与结余分别归谁？ / Under fully insured (non-refund), refund accounting, and ASO arrangements, who bears the claims risk and who keeps any claims surplus?
3. 团体规模25人门槛、流动率与历史年限如何影响信度（credibility）及混合费率计算？ / How do the 25-employee group threshold, turnover rate, and claims history length affect credibility and blended rating calculations?
4. 雇主与员工各付50%保费的LTD计划，理赔给付为什么不能按50%算应税收入？ / In an LTD plan where employer and employee each pay 50% of the premium, why are disability benefits not taxed at 50%?
5. 双职家庭给孩子报销牙科账单时，首付方怎么定、次付方赔多少？ / When a dual-income family claims dental expenses for a child, how is the primary payer determined and how much does the secondary payer pay?

总结：用一句话总结团体计划中「雇主选资金方式担多少风险、精算按信度怎么算保费、税局按累计缴费怎么收税、多份计划按生日规则谁先赔」这四条核心规则。 / In one sentence, summarize the four core rules of group plans: how much risk the employer bears across funding methods, how actuaries calculate premiums using credibility, how CRA taxes benefits based on cumulative employee contributions, and who pays first under the birthday rule when multiple plans apply.

第 21 章 · 投资与储蓄基础 / Investment and Savings Basics: Compounding, Registered Accounts, and the FHSA Missing from the Exam Manual

分离基金与年金 / Segregated Funds & Annuities | P2 稳住 / Hold steady | Investment Basics · 模考 3 题

带着这几道题读：名义回报为正但通胀更高时，客户的实际回报是多少？ / When the nominal return is positive but inflation is higher, what is the client's real return?；从已满额的 TFSA 提款后，最早什么时候能把这笔额度存回而不受罚？ / After withdrawing from a fully maximized TFSA, what is the earliest date the client can re-contribute that withdrawn amount without penalty?；股票经纪、共同基金交易商与分离基金销售分别受哪个机构监管与保护？ / Which regulatory and protection bodies oversee stock brokers, mutual fund dealers, and segregated fund sales, respectively?；客户净值表显示资产 60 万且全部存 GIC，代理人该如何评估其风险属性？ / When a client's net worth statement shows $600,000 in assets held entirely in GICs, how should the agent evaluate their risk profile?

怎么考

- 时间价值与通胀算例题：给出本金、名义回报率（nominal return）、通胀率与年限，考复利（compounding）终值计算、72 法则（Rule of 72）估算翻倍时间，或区分名义回报与实际回报（real return）的正负。 / Time value of money and inflation calculation questions: Given principal, nominal return, inflation rate, and time horizon, testing compounding future value calculations, estimating doubling time using the Rule of 72, or distinguishing between positive and negative real returns versus nominal returns.
- 注册账户规则与税务后果辨析题：设定客户供款、提款或超额情景，测试 RRSP、TFSA、RESP、RDSP、RRIF 及 FHSA 的供款上限、抵税属性、提款课税规则、每月 1% 超额惩罚税与 TFSA 次年恢复空间规则。 / Registered account rules and tax consequence questions: Setting client contribution, withdrawal, or over-contribution scenarios to test RRSP, TFSA, RESP, RDSP, RRIF, and FHSA contribution limits, tax deductibility, withdrawal taxation rules, the 1% per month over-contribution penalty tax, and TFSA room restoration the following year.
- 投资者保护与监管归属匹配题：给出客户持有的具体投资工具（GIC、股票、共同基金、分离基金、年金），考察发生机构破产时由 CDIC、CIPF 还是 Assuris 兜底，以及分离基金归省级保险监管而非证券自律组织监管。 / Investor protection and regulatory jurisdiction matching questions: Given specific investment vehicles held by a client (GICs, stocks, mutual funds, segregated funds, annuities), testing whether CDIC, CIPF, or Assuris provides protection in the event of institutional insolvency, and verifying that segregated funds fall under provincial insurance regulation rather than securities self-regulatory organizations.
- 双口径与政策演进识别题：针对考试资料成文（2022 年）与现行制度的差异（如 IIROC/MFDA 合并为 CIRO、CIPF 与 IPC 合并、新增 FHSA 与 CPP2），按题干问法区分考试口径答案与现行实务规则。 / Dual benchmark and regulatory evolution questions: Addressing differences between the exam reference manual (written in 2022) and current

高频陷阱（看到信号就警觉）

TFSA 当年回存超额陷阱 / TFSA same-year re-contribution over-contribution trap：题干出现客户在当年已用满 TFSA 额度后提款，并计划在同一年底前把资金重新存回 TFSA。 / The question stem features a client who has already maximized their TFSA contribution room for the year, withdraws funds, and plans to deposit funds back into the TFSA before the end of the same year.

RRSP 供款基数与上限遗漏陷阱 / RRSP contribution base year and dollar limit omission trap：题干同时给出客户上一年与当年的收入，或给出极高收入要求计算当年新增 RRSP 供款空间。 / The question stem provides both previous-year and current-year income, or gives a very high income and asks for new RRSP contribution room generated for the current year.

分离基金监管与保护错配陷阱 / Segregated fund regulation and protection mismatch trap：题干问分离基金销售受哪个机构监管、破产由谁保护，或问市场大跌 20% 时保护基金赔多少。 / The question stem asks which regulator oversees segregated fund sales, which entity protects against insolvency, or asks how much a protection fund pays during a 20% market decline.

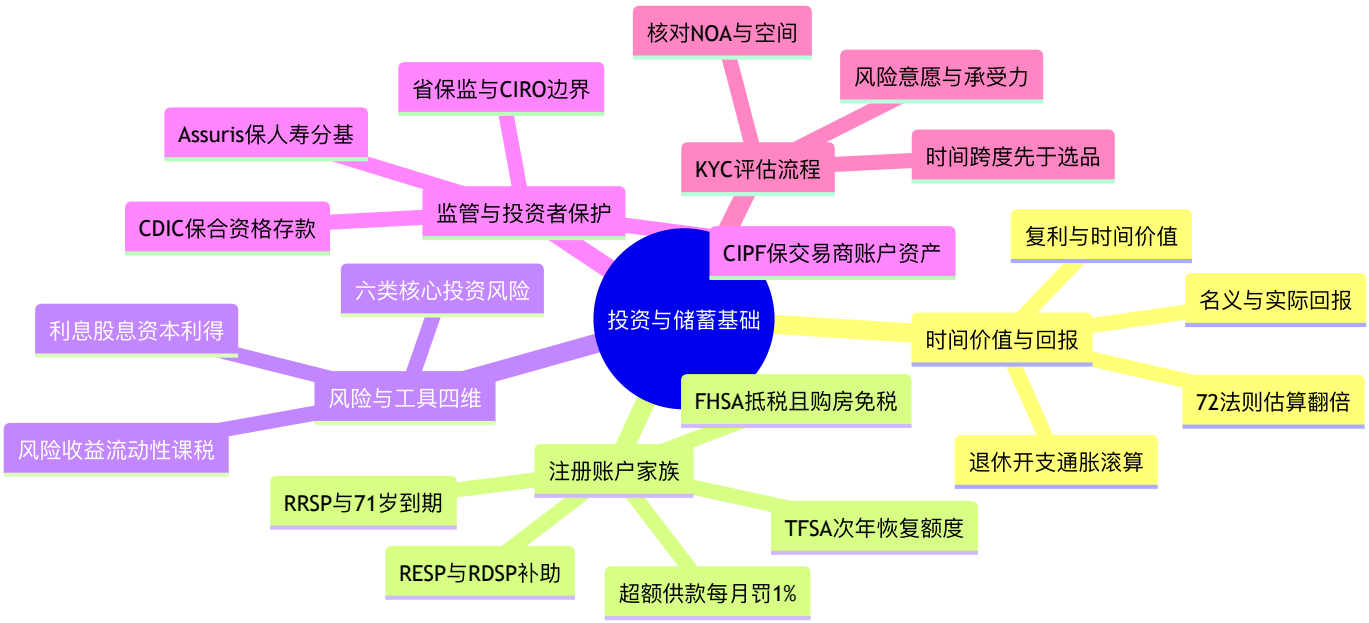
名义回报掩盖负实际回报陷阱 / Nominal return masking negative real return trap：题干同时给出产品名义回报率与当年通胀率，且通胀率接近或高于名义回报率，问客户的实际购买力变化。 / The question stem provides both a product's nominal return and the annual inflation rate, where inflation is close to or higher than the return, asking how the client's actual purchasing power changes.

净值高等于风险承受力高陷阱 / High net worth equating to high risk capacity trap：题干强调客户净值表（net worth statement）资产丰厚但全部存放在 GIC 或储蓄账户，问代理人在评估阶段能得出什么结论。 / The question stem emphasizes that the client's net worth statement shows substantial assets held entirely in GICs or savings accounts, asking what conclusion the agent can draw during the assessment phase.

rules (such as IIROC and MFDA merging into CIRO, CIPF and IPC merging, and the introduction of the FHSA and CPP2), distinguishing between exam benchmark answers and current practical rules based on how the question stem is phrased.

- KYC 评估与四维选品情景题：结合客户的投资时间跨度、风险承受意愿（risk tolerance）与风险承受能力（risk capacity），从风险、收益、流动性（liquidity）与课税四个维度判断某类投资工具或账户安排是否匹配。 / KYC assessment and four-dimensional product suitability scenario questions: Combining a client's investment time horizon, risk tolerance, and risk capacity to evaluate whether an investment vehicle or account structure matches across four dimensions: risk, return, liquidity, and taxation.

导图



第 21 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
复利与单利差距及 72 法则 / Difference between compound and simple interest and the Rule of 72	compounding / Rule of 72	复利将利息滚入本金再生息（FV = PV × (1 + r)^n），随期限拉长加速放大；用 72 除以年化回报率整数百分比可估算本金翻倍年数（6%–10% 区间最准）。 / Compounding reinvests earned interest back into principal to earn additional interest (FV = PV * (1 + r)^n), accelerating exponentially over longer horizons; dividing 72 by the annual return percentage estimates the years required for principal to double (most accurate between 6% and 10%).
名义回报与实际回报换算 / Converting between nominal return and real return	nominal return / real return	精确实际回报 = (1 + 名义回报) / (1 + 通胀率) – 1（小数值可用名义回报减通胀率近似）；当通胀率高于名义回报时，实际回报为负，购买力下降。 / Exact real return = (1 + nominal return) / (1 + inflation rate) – 1 (for small values, nominal return minus inflation provides an approximation); when inflation exceeds nominal return, real return is negative and purchasing power declines.
RRSP 供款空间与 71 岁到期转换 / RRSP contribution room and age 71 maturity options	Registered Retirement Savings Plan (RRSP)	RRSP 新增额度取上一年收入的 18% 与年度 Dollar Limit（2026 年 $33,810）中的较小值；最迟在满 71 岁当年年底前须提款、转入 RRIF 或购买合资格年金。 / New RRSP contribution room is the lesser of 18% of the previous year's earned income and the annual dollar limit ($33,810 for 2026); an individual RRSP must mature by December 31 of the year the plan holder turns 71 via lump-sum withdrawal, transfer to a RRIF, or purchasing an eligible annuity.
TFSA 提款免税与次年额度恢复 / TFSA tax-free withdrawals and next-year room restoration	Tax-Free Savings Account (TFSA)	TFSA 供款税后、提款免税且不影响 OAS/GIS 等福利（2026 年度限额 $7,000）；提取的额度须等到次年 1 月 1 日才恢复，当年无剩余额度时存回会触发超额部分每月 1% 惩罚税。 / TFSA contributions are after-tax, withdrawals are tax-free and do not affect income-tested benefits like OAS or GIS ($7,000 annual limit for 2026); withdrawn amounts are not restored until January 1 of the following calendar year, and re-contributing without available room triggers a 1% per month penalty tax on the excess amount.
FHSA 双重税务优惠与限额 / FHSA dual tax advantages and contribution limits	First Home Savings Account (FHSA)	2023 年上线的 FHSA 兼具供款税前抵税与合规首次购房提款免税双重优惠，年度参与额度 $8,000、终身上限 $40,000、单年结转上限 $8,000（考试口径因 2022 年成文未收录）。 / Introduced in 2023, the FHSA combines tax-deductible contributions with tax-free withdrawals for a qualifying first home purchase, with an $8,000 annual participation limit, $40,000 lifetime limit, and up to $8,000 in unused room carryforward per year (unmentioned in the exam manual due to its 2022 publication date).
RESP 与 RDSP 终身限额及补助课税 / RESP and RDSP lifetime limits and grant taxation	Registered Education Savings Plan (RESP) / Registered Disability Savings Plan (RDSP)	RESP 与 RDSP 供款均不抵税且无年度上限（终身上限分别为每受益人 $50,000 与 $200,000），提取时本金免税，政府补助（CESG/CDSG 等）与累积收益计入受益人当年收入课税。 / Contributions to RESPs and RDSPs are non-deductible with no annual contribution limits (lifetime limits are $50,000 and $200,000 per beneficiary, respectively); on withdrawal, original contributions return tax-free, while government grants (CESG/CDSG, etc.) and accumulated earnings are taxed as income in the hands of the beneficiary.
三类投资者保护机构的保障边界 / Protection boundaries of three investor protection organizations	CDIC / CIPF / Assuris	CDIC 保护会员机构合资格存款（每机构每类别 $100,000 含本息），CIPF 保护证券与共同基金交易商账户资产，Assuris 保护人寿保险公司保单（含分离基金与年金）；三者只保机构破产，不保市场下跌损失。 / CDIC protects eligible deposits at member institutions ($100,000 principal and interest per category per institution), CIPF protects client property held by investment and mutual fund dealers, and Assuris protects life insurance policies (including segregated funds and annuities); all three protect solely against member insolvency, never against market downturn losses.
监管机构双口径与分离基金归属 / Dual regulatory benchmarks and segregated fund jurisdiction	CIRO (formerly IIROC and MFDA)	考试口径将证券与共同基金自律机构分别称为 IIROC 与 MFDA（保护基金为 CIPF 与 IPC），现行已合并为 CIRO 与单一 CIPF；但分离基金属保险合同，归省级保险监管机构监管。 / The exam manual refers to securities and mutual fund self-regulatory bodies as IIROC and the MFDA (with protection funds CIPF and IPC), which merged in current practice into CIRO and a single CIPF; however, segregated funds are insurance contracts regulated exclusively by provincial insurance regulators.

三类非注册投资收益的课税方式 / Taxation of three types of non-registered investment income	capital gains inclusion rate	非注册账户中利息 100% 按边际税率课税，合格加拿大股息适用总计还原与股息税抵免，资本利得按 50% 应税比例（inclusion rate）计入当年应税收入。 / In non-registered accounts, interest is 100% taxable at the marginal rate, eligible Canadian dividends receive a gross-up and dividend tax credit, and capital gains are included in taxable income at a 50% inclusion rate.
KYC 风险三要素与先画像后选品 / Three KYC risk dimensions and client profiling before product selection	risk tolerance / risk capacity / risk perception	评估阶段须分别记录主观风险承受意愿、客观风险承受能力与风险感知，核对 NOA 账户空间与时间跨度，不能仅凭净值表充裕就推断风险承受能力高。 / During the assessment phase, agents must document subjective risk tolerance, objective risk capacity, and risk perception separately, verify NOA contribution room and time horizon, and never infer high risk capacity solely from a high net worth on a balance sheet.

自测提问（康奈尔左栏）

1. 为什么说注册账户只是"购物袋"？超额供款的法律后果是什么？ / Why are registered accounts considered merely shopping bags, and what are the legal consequences of an over-contribution?
2. 名义回报率与实际回报率怎么换算？72 法则怎么用、有什么局限？ / How do you convert between nominal and real returns, and how is the Rule of 72 applied along with its limitations?
3. RRSP、TFSA、FHSA、RESP、RDSP 在供款抵税、提款课税和额度恢复上各有什么核心区别？ / What are the core differences among RRSPs, TFSAs, FHSAs, RESPs, and RDSPs regarding contribution deductibility, withdrawal taxation, and room restoration?
4. CDIC、CIPF、Assuris 各自保什么？IIROC/MFDA 与现行 CIRO、分离基金监管有什么双口径差异？ / What do CDIC, CIPF, and Assuris protect, and what dual benchmark differences exist between IIROC/MFDA and CIRO, as well as segregated fund regulation?
5. KYC 评估阶段为什么要区分风险意愿与风险承受能力？为什么净值高不代表风险承受力高？ / Why must risk tolerance and risk capacity be distinguished during KYC assessment, and why does high net worth not imply high risk capacity?

总结：用三句话总结本章核心：第一句说明时间价值（复利与实际回报）如何决定投资起点，第二句对比五大注册账户的税务外壳规则，第三句划清三大保护机构（CDIC/CIPF/Assuris）与监管体系的边界。 / In three sentences, summarize the core rules of this chapter: first, explain how the time value of money (compounding and real return) determines the investment starting point; second, contrast the tax-shelter rules across the five major registered accounts; third, delineate the protection boundaries of CDIC, CIPF, and Assuris alongside the regulatory framework.

第 22 章 · 分离基金 / Segregated Funds: Guarantees, Protection, and How They Really Differ from Mutual Funds

分离基金与年金 / Segregated Funds & Annuities　P1 必拿分 / Must score　Segregated Funds · 模考 5 题

带着这几道题读：分离基金凭什么能绕开遗嘱认证并防范债权人？两者受益人条件有何不同？ / How do segregated funds bypass probate and protect against creditors, and how do the beneficiary requirements differ between the two?；遇到Assuris破产保护或DSC销售费题目时，考试口径与现行规则怎么答？ / How should questions on Assuris insolvency protection or the DSC ban be answered under the exam benchmark versus current rules?；客户分批存款、中途取款或重置保证时，到期日与保证基数如何调整？ / How are the maturity date and guarantee base adjusted when a client makes subsequent deposits, takes partial withdrawals, or resets guarantees?；合同未到期就赎回，或受保人在到期前身故，保证补足款能不能触发？ / Can an insurer top-up trigger if a contract is surrendered before maturity, or if the annuitant dies before the maturity date?

怎么考

- 保证触发与结算金额计算题：给定初始存款、保证比例（如 75%/75% 或 75%/100%）和不同时点的市值，考察到期、身故或中途提前赎回时实际可领取的金额及保险公司补足款（top-up）。 / Guarantee trigger and settlement calculation questions: Given initial deposit, guarantee percentages (such as 75%/75% or 75%/100%), and market values at different points in time, test the actual payout amount and insurer top-up upon maturity, death, or early partial or full surrender.
- 受益人指定与双重保护辨析题：通过客户希望规避遗嘱认证（probate）或防范债权人追索（creditor protection）的情景，测试非遗产受益人直接给付条件与 BC《Insurance Act》s.65(2) 家庭成员范围的区分。 / Beneficiary designation and dual-protection analysis questions: Using scenarios where a client wishes to bypass probate or protect against creditor claims, test the distinction between direct payment conditions for a named non-estate beneficiary and the family member class under BC Insurance Act s. 65(2).
- 合同操作后果判断（分批注资、重置、提取与转换）：考察按存款日逐笔起算 10 年到期日、重置（reset）锁高保证基数并顺延到期日、部分提取按比例永久下调保证基数，以及基金转换（switch）触发资本利得或损失。 / Contract transaction consequence assessment questions (subsequent deposits, resets, withdrawals, and switches): Test deposit date-based 10-year maturity calculations, resets locking in higher guarantee bases and extending the maturity date, proportional permanent reductions of guarantee bases upon partial withdrawals, and capital gains or losses triggered by fund switches.
- 分离基金与共同基金多维对比题：聚焦 IVIC 保险合同法律性质、省级保险监管（Insurance Council of BC / BCFSA）与证券监管（CIRO）的分界、MER 含保险成本及年龄限制（非注册 90 岁、RRSP 71 岁）。 / Multidimensional segregated fund versus mutual fund comparison questions: Focus on the legal nature of an IVIC insurance contract, the regulatory boundary between provincial

高频陷阱（看到信号就警觉）

到期保证与身故保证混淆 / Confusing maturity guarantee with death benefit guarantee：题干出现两个斜杠数字（如 75/100）、受保人在合同未满 10 年时身故，或询问“担心自己活着时本金亏损”应看哪项保证。 / The question stem displays two slash-separated figures (e.g., 75/100), the annuitant dies before the 10-year term matures, or the scenario asks which guarantee protects an investor who fears losing principal during their lifetime.

中途赎回误算保证补足 / Erroneously applying guarantee top-ups to early redemptions：题干出现“第 6 年或第 7 年急需资金全部赎回”“到期前提前退保”且当时市值低于初始存款的 75%。 / The question stem mentions an urgent need for funds requiring full surrender in year 6 or 7, or early redemption before maturity while market value is below 75% of the original deposit.

分批注资合并到期日 / Consolidating maturity dates for subsequent deposits：题干描述客户在合同成立后连续数年分批追加存款（deposit date-based），询问第 2 笔或第 3 笔存款的到期时间与累计到期保证额。 / The question stem describes a client making subsequent deposits in successive years under a deposit date-based contract, asking for the maturity date or cumulative maturity guarantee of the second or third deposit.

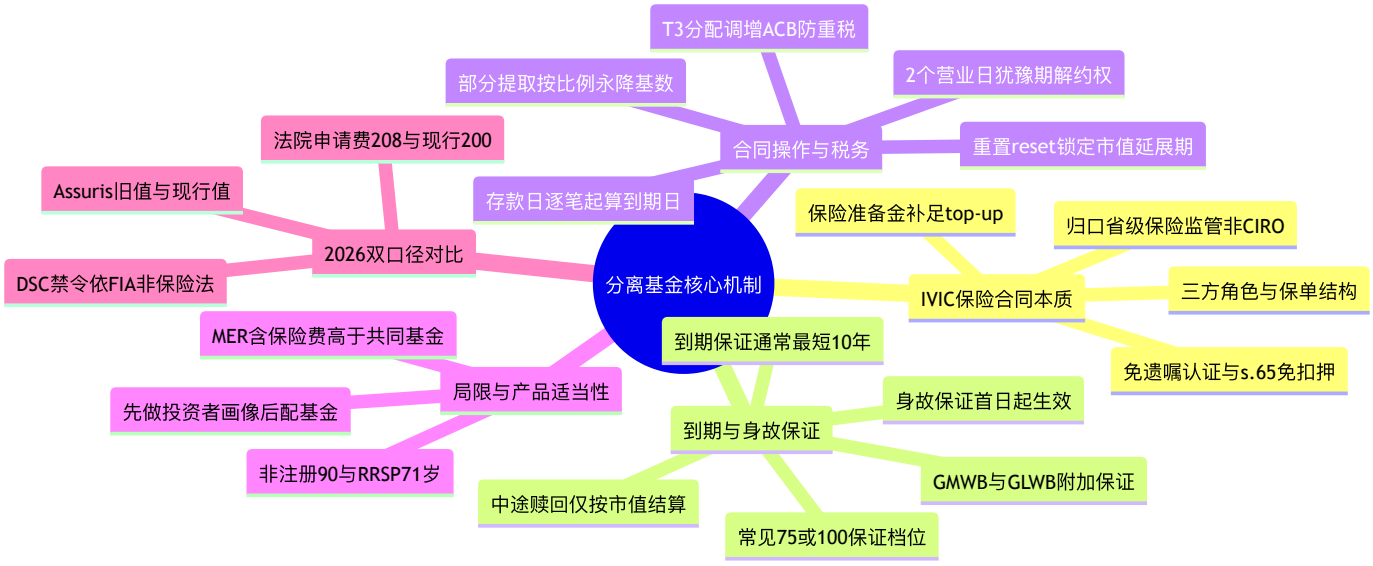
遗嘱认证与免扣押条件混同 / Conflating probate bypass with creditor protection requirements：题干指定朋友、兄弟姐妹或慈善机构为受益人并询问能否免遗嘱认证或防债权人，或询问配偶受益人是否必须不可撤销才能抗衡债权人。 / The question stem names a friend, sibling, or charity as beneficiary and asks whether the contract bypasses probate or protects against creditors, or asks if a spouse must be named irrevocably to resist creditors.

insurance regulators (Insurance Council of BC and BCFSA) and securities regulation (CIRO), MER inclusive of insurance guarantee costs, and age limits (non-registered up to age 90, RRSP to age 71).

- 考试口径（2022）与现行规则（2026）双口径题：考察 Assuris 破产保护上限（旧值 $60,000 或 85% vs 现行 $100,000 或 90%）、DSC 递延销售费禁令依据（BC《Financial Institutions Act》）及法院一般申请费（$208 vs $200）。 / Exam benchmark (2022) versus current rules (2026) dual-standard questions: Test Assuris insolvency protection limits (exam benchmark $60,000 or 85% versus current $100,000 or 90%), the legal basis for the deferred sales charge (DSC) ban (BC Financial Institutions Act), and the court probate application fee ($208 versus $200).

双口径数字与监管归属错位 / Misaligning dual-benchmark figures with regulatory bodies：题干涉及保险公司破产时的 Assuris 保底计算、DSC 递延销售费的监管状态与立法依据，或比较分离基金与共同基金的监管机构。 / The question stem involves Assuris protection calculations upon insurer insolvency, the regulatory status and legislative authority for the DSC ban, or comparisons between segregated fund and mutual fund regulators.

导图



第 22 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
个人可变保险合同的法律性质与三方角色 / Legal nature of an Individual Variable Insurance Contract (IVIC) and three-party roles	Individual Variable Insurance Contract (IVIC)	分离基金本质是保险合同而非共同基金份额，由持有人出资决策、受保人作为到期与身故保证的锚点、受益人领取身故给付；注册账户内持有人与受保人必须为同一人。 / A segregated fund is legally an insurance contract rather than mutual fund units, structured around a policy owner who funds the contract and makes investment decisions, an annuitant whose survival or death anchors the maturity and death guarantees, and a beneficiary who receives death benefits; in registered accounts, the owner and annuitant must be the same person.
免遗嘱认证与债权人保护的受益人区分 / Distinction of beneficiary designations for probate bypass and creditor protection	probate bypass and creditor protection	指定有效非遗产受益人即可绕开遗嘱认证（BC 遗产认证费在 $25,000 以下免征，$25,000—$50,000 每千元收 $6，超 $50,000 每千元收 $14）；而存续期免债权人扣押依 BC《Insurance Act》s.65(2) 须指定受保人的配偶、子女、孙辈或父母（无需同时不可撤销）。 / Naming a valid non-estate beneficiary bypasses probate (BC probate fees are 0 on estates up to $25,000, $6 per $1,000 on $25,000 to $50,000, and $14 per $1,000 over $50,000); in contrast, lifetime statutory protection against creditor seizure under BC Insurance Act s. 65(2) requires designating the annuitant's spouse, child, grandchild, or parent (without needing to be irrevocable).
监管归属与销售牌照分界 / Regulatory jurisdiction and licensing boundaries	regulatory jurisdiction and licensing	分离基金属保险产品，销售代表须持人寿保险牌照并受省级保险监管机构（BC 为 Insurance Council of BC 与 BCFSA）管辖，不受监管共同基金与证券交易商的 CIRO 管辖。 / Segregated funds are insurance products whose sales representatives must hold a life insurance licence and are governed by provincial insurance regulators (in BC, the Insurance Council of BC and BCFSA), entirely outside the jurisdiction of CIRO, which regulates mutual funds and investment dealers.
到期保证与身故保证的触发与补足 / Maturity guarantee, death benefit guarantee triggers, and insurer top-up	maturity guarantee, death benefit guarantee, and top-up	到期保证通常最短 10 年（常见 75% 或 100%），在到期日自动结算无需申请；身故保证从合同生效首日起适用；若触发时市值低于保证额，差额由保险公司自有资金补足（top-up），但中途赎回一律只按市值结算。 / Maturity guarantees generally require a minimum 10-year term (commonly 75% or 100%) and settle automatically on the maturity date without a claim; death benefit guarantees take effect on day one of the contract; if market value is below the guaranteed amount when triggered, the shortfall is topped up from the insurer's reserves, but early redemptions settle strictly at current market value.
递延销售费禁令与市场行为执法依据 / Deferred sales charge (DSC) ban and market conduct enforcement authority	deferred sales charge (DSC) ban	考试口径（2022）称分离基金 DSC 预期将被取消；BC 现行自 2023-06-01 起依据《Financial Institutions Act》s.244(2)(e)(ii) 禁止发行含 DSC 的新分离基金合同，旧合同可按原时间表走完。 / The exam benchmark (2022) states that segregated fund DSCs are expected to be banned; under current BC rules effective June 1, 2023, issuing new segregated fund contracts with DSCs is prohibited under the Financial Institutions Act s. 244(2)(e)(ii), while pre-existing contracts may run off according to their original redemption schedules.
Assuris 破产保护上限双口径 / Assuris insolvency protection limits under dual benchmarks	Assuris protection limits	保险公司破产时，分离基金保证利益在考试口径（2022）下受 $60,000 或原保证额 85%（取高，且不超过原保证额）保护；2023-05-29 起现行标准上调为 $100,000 或 90%（取高，不超过原保证额）。 / If a life insurer becomes insolvent, segregated fund guaranteed benefits are protected under the exam benchmark (2022) up to $60,000 or 85% of the guaranteed amount (whichever is higher, capped at the original guarantee); under current standards effective May 29, 2023, the limit was increased to $100,000 or 90% (whichever is higher, capped at the original guarantee).
分配、调整成本基础与转换的税务处理 / Tax treatment of allocations, adjusted cost base (ACB), and fund switches	allocation, adjusted cost base (ACB), and switch	非注册分离基金每年将内部实现的利息、股息和资本利得分配给持有人（申报于 T3 税表）并相应调增调整成本基础（ACB）以避免重复征税；赎回或转换基金（switch）均视为税务处置，按赎回价与 ACB 差额计算资本利得或损失（50% 计入应税所得）。 / Non-registered segregated funds allocate internally realized interest, dividends, and capital gains annually to policyholders (reported on a T3 slip), which increases the adjusted cost base (ACB) to avoid double taxation; a redemption or internal fund switch is treated as a taxable disposition, triggering a capital gain or loss based on the difference between proceeds and ACB (50% included in taxable income).
犹豫期解约权与五类须确认指令 / Right of rescission and five	right of rescission	交付合同前须提供信息文件夹（information folder）与 Fund Facts，购买确认发出后客户通常有 2 个营业日行使解约权，退还已投入金额与当日单位价值中较低者；完成购买、转换、重置、提款、终止五类动作均须取得投资者确认。 / An information folder and Fund Facts

client-confirmed transactions		must be delivered before entering into a contract; after the purchase confirmation is sent, the client generally has two business days to exercise the right of rescission, refunding the lesser of the amount invested or the current unit value; investor confirmation must be obtained for five transaction types: purchases, switches, resets, withdrawals, and terminations.
重置、部分提取与分批注资的保证计算 / Guarantee calculations for resets, partial withdrawals, and subsequent deposits	reset, partial withdrawal, and deposit date-based maturity	市场上涨时重置（reset）可将保证基数锁定至当前市值，但到期保证重置通常使到期日从重置日起再顺延 10 年；部分提取会按比例永久下调保证基数；按存款日逐笔起算的合同，每笔追加存款各自独立计算 10 年到期期。 / In rising markets, a reset locks in the guarantee base at the higher current market value, but a maturity guarantee reset typically resets the 10-year maturity clock from the reset date; partial withdrawals permanently reduce the guarantee base on a proportional basis; under deposit date-based contracts, each subsequent deposit runs its own independent 10-year maturity period.

自测提问（康奈尔左栏）

1. 为什么分离基金（IVIC）能提供到期保证、身故保证、绕开遗嘱认证和债权人保护，而普通共同基金没有？ / Why can an Individual Variable Insurance Contract (IVIC) offer maturity guarantees, death benefit guarantees, probate bypass, and creditor protection, whereas mutual funds cannot?
2. 绕开遗嘱认证与 BC《Insurance Act》s.65(2) 免于债权人扣押对受益人身份的要求有什么本质区别？ / What is the fundamental difference in beneficiary qualification between bypassing probate and achieving statutory creditor protection under BC Insurance Act s. 65(2)?
3. 合同存续第 7 年急用钱全部赎回、第 6 年受保人身故、以及第 10 年合同到期时，市值低于保证额分别怎么结算？ / How are payouts calculated when the market value is below the guaranteed amount if a client surrenders fully in year 7, the annuitant dies in year 6, or the contract matures at year 10?
4. 客户执行重置（reset）、部分提取或分批追加存款时，保证基数和 10 年到期日分别会发生什么变化？ / How do a contract's guarantee base and 10-year maturity date change when a client executes a reset, takes a partial withdrawal, or makes subsequent deposits?
5. 在 Assuris 保障上限、DSC 销售费状态及法院遗嘱认证一般申请费这三项上，考试口径（2022）与 BC 现行规定分别是什么？ / What are the exam benchmark (2022) and current BC rules regarding Assuris protection limits, the DSC sales charge status, and the court probate application fee?

总结：用三句话总结分离基金作为个人可变保险合同（IVIC）的核心法律优势、到期与身故保证的触发与基数调整规则，以及考场上必须区分的 2022 考试口径与 2026 现行数字差异。 / In three sentences, summarize the core legal advantages of segregated funds as Individual Variable Insurance Contracts (IVICs), the trigger and base adjustment rules for maturity and death benefit guarantees, and the differences between the 2022 exam benchmark and 2026 current figures that must be distinguished on the exam.

第 23 章 · 年金 / Annuities: Turning a Lump Sum into Lifetime Income, Annuity Classifications, and Prescribed Taxation

分离基金与年金 / Segregated Funds & Annuities　P1 必拿分 / Must score　Annuities · 模考 3 题

带着这几道题读：分批存钱买的年金，有可能是即期年金吗？ / Can an annuity funded through installment deposits ever be an immediate annuity?；非注册递延年金进入给付期后，还能转为规定式计税吗？ / Can a non-registered deferred annuity switch to prescribed taxation once it enters the payout phase?；联合末存年金带保证期，第一位配偶身故时受益人能立刻拿余款吗？ / Under a joint and last survivor annuity with a guaranteed period, can the beneficiary immediately collect remaining payments upon the first spouse's death?；不留遗产只想月收入最高，加 20 年保证期是更稳妥还是适得其反？ / If a client has no estate needs and wants maximum monthly income, does adding a 20-year guaranteed period provide extra security or defeat the purpose?

怎么考

- 客户焦虑匹配题：给出客户的退休顾虑（如害怕活得比钱久、看重本金流动性或希望保留遗产弹性），测试能否在生命年金（life annuity）、RRIF 与带保证终身提取收益（GLWB）的分离基金之间识别各自对应的风险机制。 / Client anxiety matching questions: Given a client's retirement concerns (such as fearing outliving their money, prioritizing capital liquidity, or wishing to preserve estate flexibility), test whether candidates can identify the corresponding risk mechanisms across life annuities, RRIFs, and segregated funds with a guaranteed lifetime withdrawal benefit (GLWB).
- 保证期与联合末存规则辨析题：设置夫妇无需留现金遗产却被加挂保证期、或联合末存年金第一位受领人身故后受益人要求领款的场景，测试保证期（guaranteed period）对月给付额的折减效应以及双生命受领的触发顺序。 / Guaranteed period and joint-and-last-survivor rule discrimination questions: Setting up scenarios where a couple with no need to leave a cash estate is given a guaranteed period, or where a beneficiary claims payments immediately after the first annuitant's death under a joint-and-last-survivor annuity, test the discounting effect of a guaranteed period on monthly payments and the sequential trigger order under joint lives.
- 即期与递延分类陷阱题：在题干中植入分批注资或一次性存入等存款方式描述，测试考生是否清楚即期年金（immediate annuity）与递延年金（deferred annuity）的唯一划分标准是给付何时开始而非注资方式。 / Immediate versus deferred classification trap questions: Embedding deposit methods such as periodic installments or lump-sum deposits in the question stem, test whether candidates understand that the sole criterion distinguishing an immediate annuity from a deferred annuity is when payments commence, not how deposits are funded.
- 非注册年金税务与双口径制度题：对比规定式年金（prescribed annuity）与权责发生制年金（accrual annuity）的年度应税节奏及起付年度资格重核，或考查 Assuris 付息年金保障上限、ALDA 与 VPLA 起付年龄限制的考试口径与现行规则差异。 / Non-registered annuity

高频陷阱（看到信号就警觉）

把递延等同于分期存钱 / Equating Deferred Annuities with Periodic Deposits Trap：题干强调客户分多次注资或整笔存入，并要求判断合同属于即期年金还是递延年金。 / The question stem emphasizes that a client deposits funds in multiple installments or as a single lump sum, asking candidates to classify the contract as an immediate or deferred annuity.

误以为加保证期对受领人更划算 / Assuming Adding a Guaranteed Period Benefits the Annuitant Trap：题干同时出现“不需要留遗产（子女已独立）”与“希望在世时月收入最大化”，选项却带有 10 年或 20 年保证期。 / The question stem mentions both 'no need to leave an estate (independent adult children)' and 'maximizing monthly income during lifetime,' yet answer choices include a 10-year or 20-year guaranteed period.

首位受领人身故即赔付受益人 / Paying Beneficiaries Immediately Upon the First Annuitant's Death Trap：题干为联合末存年金（joint and last survivor annuity）且附带保证期，描述第一位受领人刚身故、子女作为受益人前来索赔。 / The scenario involves a joint-and-last-survivor annuity with a guaranteed period, describing that the first annuitant has just passed away and children as designated beneficiaries come forward to claim benefits.

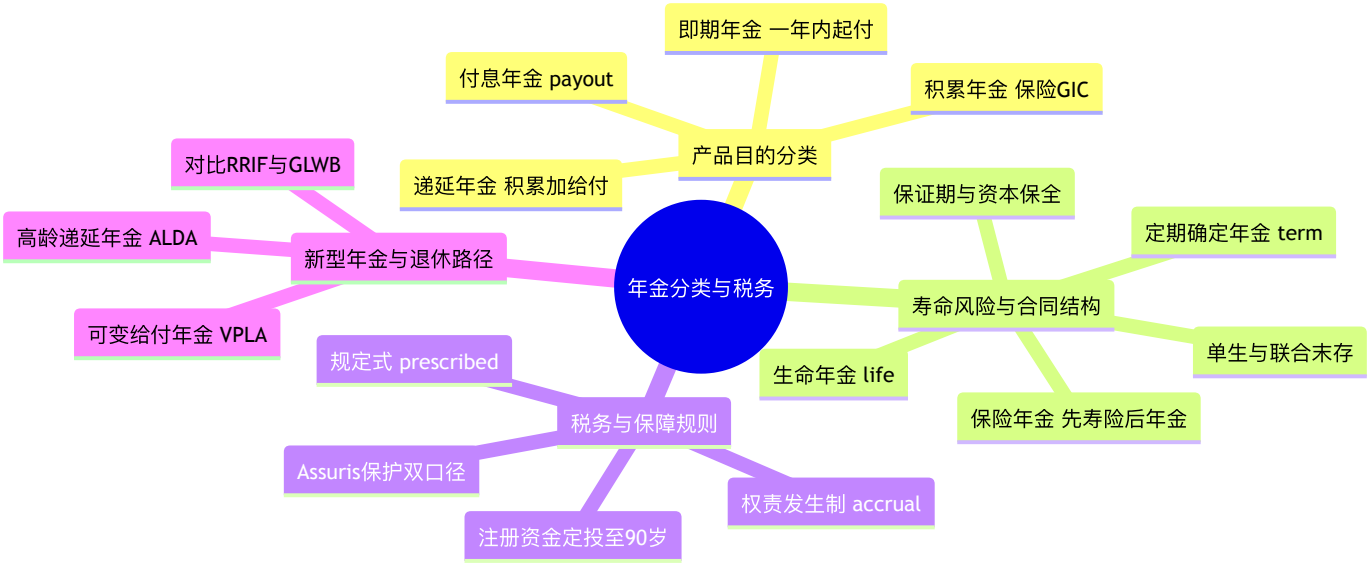
保险年金先买年金后核保寿险 / Purchasing the Annuity Before Underwriting the Life Insurance in an Insured Annuity Trap：题干询问搭建保险年金（insured annuity）策略的第一步，或描述客户已买好年金再去体检投保永久寿险。 / The question asks for the initial step in establishing an insured annuity strategy, or describes a client who bought an annuity first before undergoing medical exams for permanent life insurance.

taxation and dual-benchmark questions: Comparing the annual taxable progression of prescribed annuities versus accrual annuities and reassessing eligibility in the payout commencement year, or testing differences between exam benchmarks and current rules regarding Assuris payout annuity coverage limits and ALDA/VPLA commencement age limits.

- 保险年金组合操作顺序题：描述客户希望用年金现金流支付永久寿险保费以锁定免税死亡给付，测试保险年金（insured annuity）必须先通过寿险核保生效、再购买单生生命年金的先后顺序。 / Insured annuity operational sequence questions: Describing a client who intends to use annuity cash flow to pay permanent life insurance premiums to lock in a tax-free death benefit, test the mandatory operational sequence requiring life insurance underwriting approval and issuance before purchasing a single life annuity.

> **Assuris与ALDA新旧口径混用 / Conflating Old and Current Benchmarks for Assuris and ALDA Trap**：题干出现保险公司破产且承诺月给付 $5,000，或询问高龄递延生命年金（ALDA）的延期上限年龄与转入限额。 / The question stem features an insolvent insurer owing a promised monthly payout of $5,000, or inquires about the maximum deferral age and transfer limits for an Advanced Life Deferred Annuity (ALDA).

导图



第 23 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
付息年金与积累年金的本质区别 / Essential Distinction Between Payout and Accumulation Annuities	payout annuity vs. accumulation annuity	付息年金旨在把本息按期化为收入流，而积累年金（保险 GIC）不产生收入流、仅代为持有生息，到期可转付息年金或全额无罚金退保。 / A payout annuity is designed to convert principal and interest into a scheduled income stream, whereas an accumulation annuity (insurance GIC) generates no income stream and merely holds deposits to earn interest, allowing conversion to a payout annuity or penalty-free full surrender at maturity.
即期年金与递延年金的划分标准 / Classification Standard for Immediate and Deferred Annuities	immediate annuity vs. deferred annuity	唯一区分标准是给付何时开始：即期年金须整笔购买且在第一个付款周期（一年内）开始给付，递延年金在积累期结束后才开始给付，不存在分批注资的即期年金。 / The sole distinguishing criterion is when income payments begin: an immediate annuity must be purchased with a single lump sum and begin payments within the first payment interval (within one year), whereas a deferred annuity begins payments only after the accumulation phase ends; there is no such thing as an immediate annuity funded through periodic installment deposits.
寿命风险承担与保证期折价机制 / Longevity Risk Allocation and Guaranteed Period Discounting	life annuity, term-certain annuity & guaranteed period	生命年金将寿命风险转嫁给保险公司而定期确定年金不转移寿命风险；附加保证期（如 5/10/20 年）、资本保全保证或首付前身故保证会因为增加身故赔付责任而压低每期给付额。 / A life annuity transfers longevity risk to the insurer's risk pool, whereas a term-certain annuity does not transfer longevity risk; adding a guaranteed period (such as 5, 10, or 20 years), a capital protection guarantee, or a return-of-premium guarantee reduces the periodic payment amount because the insurer assumes additional death benefit liabilities.
保险年金的运作结构与先后顺序 / Operational Structure and Purchase Sequence of an Insured Annuity	insured annuity	保险年金用单生终身生命年金的给付支付永久人寿保险（如 T-100）保费并留出生活费，身故时寿险免税赔付受益人，操作上必须先通过寿险核保生效后再购买年金。 / An insured annuity uses payments from a single life annuity to pay premiums on a permanent life insurance policy (such as T-100) while providing disposable living income; upon death, the life insurance pays a tax-free benefit to beneficiaries. Operationally, the life insurance must be medically underwritten and issued before the annuity is purchased.
Assuris 对年金持有人的保护上限 / Assuris Protection Limits for Annuity Holders	Assuris protection limits	付息年金月收入保护在 2022 考试口径中为 $2,000/月或 85% 取高（2026 现行为 $5,000/月或 90% 取高），积累年金在考试口径中为 $100,000 全额保障（2026 现行为 $100,000 或 90% 取高）。 / Monthly income protection for payout annuities under the 2022 exam benchmark is the higher of $2,000 per month or 85% of promised payments (under the 2026 current rule, the higher of $5,000 per month or 90%); accumulation annuities are fully protected up to $100,000 under the exam benchmark (under the 2026 current rule, the higher of $100,000 or 90%).
非注册年金的规定式与权责发生制计税 / Prescribed and Accrual Taxation for Non-Registered Annuities	prescribed annuity vs. accrual annuity	非注册规定式年金（符合 ITR s.304 条件）在给付期内保持平稳的本金与应税利息拆分，权责发生制年金在积累期按年计入应计收益，且进入给付期当年可重新核定是否符合 prescribed 资格。 / A non-registered prescribed annuity (meeting ITR section 304 conditions) maintains a level split between non-taxable principal return and taxable interest throughout the payout period, whereas an accrual annuity reports accrued income annually during the accumulation phase and is reassessed for prescribed eligibility in the year payouts commence.
利率环境对固定年金给付的锁定效应 / Lock-In Effect of Prevailing Interest Rates at Issue	prevailing interest rates at issue	固定给付年金的费率取决于签发当天的长期债券收益率与精算假设并按合同锁定，加息周期签发的同等本金月给付通常高于低利率时期。 / Payment rates for fixed annuities depend on long-term bond yields and actuarial assumptions on the date of issuance and are locked into the contract; for the same principal, monthly income issued during a rate-hike cycle is generally higher than that issued during a low-interest-rate environment.
生命年金、RRIF 与分离基金 GLWB 的取舍 / Trade-Offs Among Life Annuities, RRIFs, and Segregated Fund GLWBs	life annuity vs. RRIF vs. GLWB	生命年金解决怕活得比钱久但几乎无本金流动性，RRIF 保留投资与提取灵活性但资产耗尽即停止，分离基金 GLWB 兼顾终身按比例提取保证与部分流动性但超提会永久下调保证基数。 / A life annuity eliminates the risk of outliving one's money but provides virtually no principal liquidity; an RRIF preserves investment growth and withdrawal flexibility but payments cease once assets are depleted; a segregated fund GLWB combines guaranteed lifetime proportional withdrawals with partial liquidity, though excess withdrawals permanently reduce the guaranteed base.
联合末存年金的身故给付触发时点 / Death	joint and last survivor annuity	联合末存年金第一位受领人身故后由第二位继续作为唯一受领人领款，附带保证期的剩余金额须等第二位受领人也在保证期内身故后才轮到受益人领取。 / Under a joint and last survivor

Benefit Trigger Sequence for Joint and Last Survivor Annuities	beneficiary trigger	annuity, upon the death of the first annuitant, the second annuitant continues receiving payments as the sole annuitant; any remaining balance under an attached guaranteed period becomes payable to designated beneficiaries only if the second annuitant also dies before the guaranteed period expires.
ALDA 与 VPLA 的税务与起付年龄限制 / Taxation and Age Restrictions for ALDA and VPLA	advanced life deferred annuity (ALDA) & VPLA	ALDA 允许将合资格计划最多 25%（考试口径提案总额 $150,000，2026 限额 $180,000）延至受领人满 85 岁当年年底前起付；VPLA 设立时须至少 10 名成员并预期持续达标，考试口径起付上限为 71 岁（现行税法取满 71 岁年末与转款取得权利年末较晚者）。 / An ALDA permits transferring up to 25% of a qualifying registered plan (proposed lifetime cap of $150,000 under the exam benchmark; $180,000 CRA limit in 2026) with payouts deferred up to the end of the year the annuitant turns age 85; a VPLA requires at least 10 members at establishment with an ongoing expectation to maintain that count, with an exam–benchmark payout commencement deadline of age 71 (current tax rules use the later of the end of the year turning 71 or the end of the year the right is acquired).

自测提问（康奈尔左栏）

1. 为什么区分即期年金和递延年金只看起付时间而不看存款方式？ / Why is the distinction between immediate and deferred annuities based solely on when payments begin rather than deposit methods?
2. 客户明确表示不留遗产且追求最高月收入时，为什么不该加保证期？ / When a client has no estate needs and seeks maximum monthly income, why should a guaranteed period be omitted?
3. 联合末存年金带 10 年保证期，第一位配偶在第 3 年身故时受益人能领钱吗？ / Under a joint and last survivor annuity with a 10–year guaranteed period, can the beneficiary claim funds if the first spouse dies in year 3?
4. 非注册递延年金在积累期按 accrual 报税后，进入给付期能否转为 prescribed？ / After reporting taxes on an accrual basis during accumulation, can a non–registered deferred annuity switch to prescribed taxation upon entering payout?
5. 搭建保险年金（insured annuity）为什么必须先核保人寿保险再买生命年金？ / Why must life insurance underwriting be completed before purchasing the annuity when structuring an insured annuity?

总结：用三句话总结生命年金如何通过风险池转移寿命风险、保证期与税务规则如何影响现金流，以及年金与 RRIF 如何在退休规划中配合使用。 / In three sentences, summarize how life annuities transfer longevity risk through mortality pooling, how guaranteed periods and tax rules impact cash flows, and how annuities and RRIFs complement each other in retirement planning.

第 24 章 · 投资者画像与适当性 / Investor Profile: KYC, Risk Tolerance, Risk Capacity, and Suitability, and Why It Carries 35% of This Module

分离基金与年金 / Segregated Funds & Annuities　P1 必拿分 / Must score　Investor Profile · 模考 7 题

带着这几道题读：客户自称不怕亏但财务脆弱，按意愿还是能力配产品？ / If a client claims to tolerate losses but has a fragile financial situation, does product allocation follow risk willingness or risk capacity?；计算高收入客户 CPP 供款时，考试口径与 2026 现行差在哪？ / When calculating CPP contributions for high-income earners, what is the difference between the exam syllabus and current 2026 rules?；持有财产授权书（POA）的代理人能否直接修改分离基金受益人？ / Can an attorney acting under a Power of Attorney (POA) directly alter the beneficiary designation on a segregated fund?；年轻客户存钱三年内买房或求学，时间跨度算长还是短？ / If a young client is saving money to buy a home or attend school within three years, is the time horizon considered long or short?；管"单次产品推荐是否匹配客户画像"的具体原则叫什么？ / What is the specific principle governing whether an individual product recommendation matches the client's profile?

怎么考

- 意愿与能力冲突题：题干给出一位主观上渴望高收益或自称不怕亏损、但客观财务状况脆弱（如唯一收入来源、短期内有刚性支出或仅靠政府养老金生活）的客户，测试考生能否识别风险承受意愿（risk tolerance）与风险承受能力（risk capacity）的独立性，并以较低者作为推荐的硬约束上限。 / Willingness versus capacity conflict questions: Scenarios present a client who subjectively desires high returns or claims to tolerate steep losses, but has a fragile objective financial position (such as being the sole household earner, facing nondiscretionary short-term expenses, or relying solely on government pensions), testing whether candidates can recognize the independence of risk tolerance and risk capacity and apply the lower of the two as the binding upper constraint for recommendations.
- 时间跨度与多目标拆解题：用客户的实际年龄（如二十多岁的年轻客户或接近七十岁的退休客户）作为干扰项，结合短期用款目标（如三年内使用）或长期跨代目标（如二十年后的孙辈教育），测试时间跨度（time horizon）必须按资金的具体目标而非客户年龄来判定，且同一客户的不同资金目标须分别建立画像。 / Time horizon and multi-goal separation questions: Scenarios use the client's chronological age (such as a client in their twenties or a retiree near age seventy) as a distractor, combined with short-term expenditure goals (such as funds needed within three years) or long-term intergenerational goals (such as grandchildren's education in twenty years), testing whether candidates determine the time horizon based on the specific goal of the funds rather than the client's age, and build separate investor profiles for different goals of the same client.
- 财务报表与负债性质判读题：给出客户的净资产表（net worth statement）、现金流量表（cash flow statement）及对账单细节，测试反向按揭（reverse mortgage）属于侵蚀遗产的负债而非资产、良性负债（good debt）仍须核实按期偿还能力、以及单月合理大额支出与持续性透支的区别。 /

高频陷阱（看到信号就警觉）

顺从客户主观偏好 / Deferring to client subjective preference：题干出现客户强烈要求购买高收益股票型基金、声称"能承受大跌"，但同时交代其应急资金不足、属于家庭唯一收入来源或仅靠养老金维持生活。 / The question stem shows a client insisting on high-yield equity funds and claiming comfort with sharp market drops, while simultaneously revealing an inadequate emergency fund, sole breadwinner status, or reliance solely on pensions for living expenses.

以年龄代替时间跨度 / Substituting age for time horizon：题干突出强调客户的年龄（如 28 岁或 68 岁），但紧接着说明该笔资金用于近期确定开支（如两年内办婚礼、三年后交学费）或远期传承目标（如 20 年后孙辈教育）。 / The question stem emphasizes the client's chronological age (such as 28 or 68), but immediately clarifies that the funds are allocated for a fixed near-term expenditure (such as a wedding in two years or tuition in three years) or a distant legacy goal (such as grandchildren's education in twenty years).

持仓结构外推财务结论 / Extrapolating financial conclusions from portfolio holdings：题干只给出一张净资产表或保守型持仓明细，未提供收入、支出、年龄或现有保障等完整信息，选项却出现"财务承受能力必定低下"或"无需保险保障"等绝对化结论。 / The question stem provides only a net worth statement or conservative holding breakdown without complete information on income, expenses, age, or existing coverage, while options offer definitive conclusions like financial capacity is definitely low or life insurance is unnecessary.

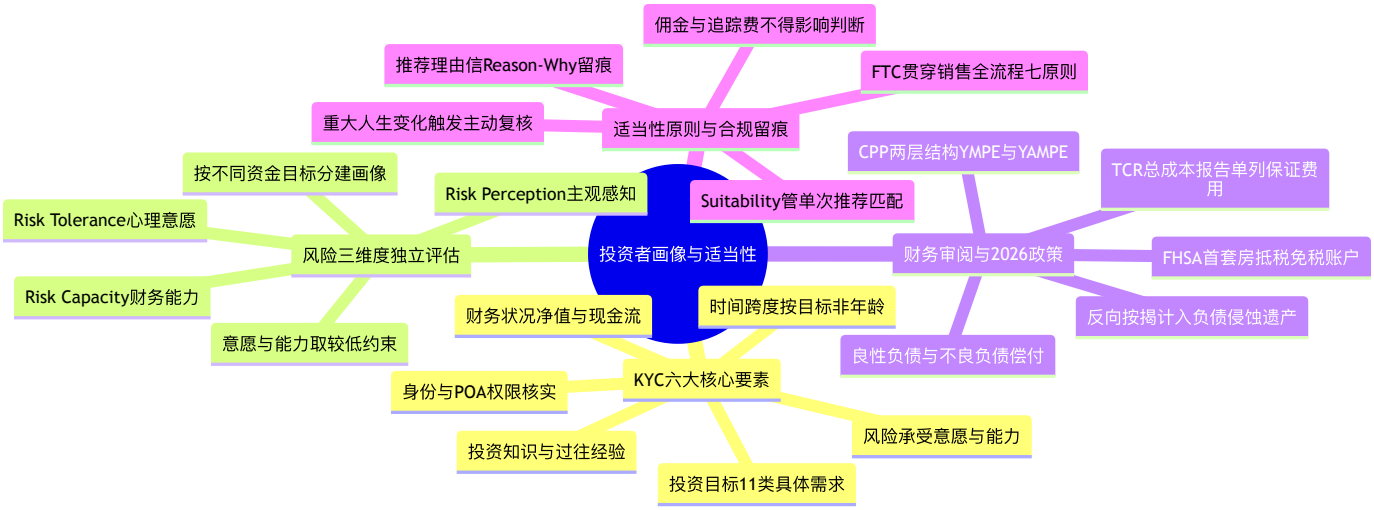
Financial statements and debt classification questions: Scenarios provide details from a client's net worth statement, cash flow statement, and account statements, testing whether candidates identify that a reverse mortgage is an estate-eroding liability rather than an asset, that good debt still requires verifying ongoing repayment ability, and how to distinguish an explainable single-month large expenditure from ongoing structural deficit.

- 持续适当性与留痕合规题：设定客户多年前完成过投资者画像（investor profile），期间发生离婚、失业或提前退休等重大变化但未主动联系代理人，或代理人受高佣金诱导推荐产品，测试适当性原则（suitability principle）的持续复核义务、推荐理由信（reason-why letter）的免责证据作用，以及适当性与公平对待客户原则（FTC）的层级区分。 / Ongoing suitability and compliance documentation questions: Scenarios involve a client who completed an investor profile years earlier and experienced major life events such as divorce, job loss, or early retirement without contacting the agent, or an agent tempted by higher commissions, testing the ongoing review obligation under the suitability principle, the evidential protection of a reason-why letter, and the hierarchical distinction between suitability and Fair Treatment of Customers (FTC).
- 政策规则与法律边界题：结合财产授权书（Power of Attorney, POA）代管人在分离基金（IVIC）上的受益人变更限制、CPP 起缴额与供款天花板、以及 RRSP/TFSA/FHSA 等注册账户的核验文件（如评税通知书 NOA），测试考试口径规则与 BC 现行法条（如《Power of Attorney Act》s.20）及 2026 现行数字的把握。 / Policy rules and legal boundary questions: Scenarios combine limitations on attorney authority under a Power of Attorney (POA) for property to change segregated fund (IVIC) beneficiary designations, CPP basic exemption and contribution ceilings, and verification documents for registered accounts such as RRSP, TFSA, and FHSA (like the Notice of Assessment, NOA), testing candidates' grasp of exam syllabus rules versus current BC statutory provisions (such as Power of Attorney Act s.20) and 2026 figures.

把画像当成一次性开户手续 / Treating the profile as a one-time onboarding formality：题干提及客户几年前做过画像评估，此后经历了退休、离婚、继承遗产或失业等重大生活事件，且期间未主动联系代理人更新资料。 / The question stem notes that the client completed a profile several years ago and subsequently experienced a major life event such as retirement, divorce, an inheritance, or unemployment, without reaching out to update their records.

夸大财产授权书（POA）权限 / Exaggerating Power of Attorney authority：题干出现客户因病失能，其授权代理人（attorney）出示 POA 要求将分离基金或保单的既有受益人直接改为自己或第三人，且未提及法院授权。 / The question stem features an incapacitated client whose attorney under a POA presents the document and requests changing the existing segregated fund or insurance beneficiary to themselves or a third party without court authorization.

导图


投资者画像与适当性
风险三维度独立评估
按不同资金目标分建画像
Risk Tolerance心理意愿
Risk Capacity财务能力
意愿与能力取较低约束
Risk Perception主观感知
适当性原则与合规留痕
佣金与追踪费不得影响判断
推荐理由信Reason-Why留痕
FTC贯穿销售全流程七原则
重大人生变化触发主动复核
Suitability管单次推荐匹配
财务审阅与2026政策
CPP两层结构YMPE与YAMPE
TCR总成本报告单列保证费用
FHSA首套房抵税免税账户
反向按揭计入负债侵蚀遗产
良性负债与不良负债偿付
时间跨度按目标非年龄
KYC六大核心要素
财务状况净值与现金流
身份与POA权限核实
投资知识与过往经验
风险承受意愿与能力
投资目标11类具体需求

第 24 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
评估客户需求与处境的考纲权重 / Syllabus Weight for Assessing Client Needs and Situation	Assess the client's needs and situation (c1)	该组件占分离基金模块考纲 35% 的权重，高于分析产品（30%）与落实推荐（25%），是全模块唯一超过三分之一分值的能力组件。 / This competency component accounts for 35% of the Segregated Funds module exam syllabus, higher than analyzing products (30%) and implementing recommendations (25%), making it the only component weighted at more than one-third of total marks.
KYC 必须分别核实的六个要素 / Six Core KYC Elements Requiring Independent Verification	Know Your Client (KYC)	代理人必须独立核实身份（identity）、财务状况（financial situation）、投资目标（investment objectives）、时间跨度（time horizon）、风险承受意愿与能力、以及投资知识与经验（investment knowledge）六项要素，不能互相替代。 / Agents must independently verify identity, financial situation, investment objectives, time horizon, risk tolerance and capacity, and investment knowledge and experience, as none of these six elements can substitute for another.
风险承受意愿与风险承受能力独立判定 / Independent Assessment of Risk Tolerance versus Risk Capacity	Risk tolerance vs. Risk capacity	风险承受意愿（risk tolerance）是心理上愿不愿意承受波动，风险承受能力（risk capacity）是财务上能不能承受损失而不影响生活目标，两者必须分开评估并以较低者作为推荐约束上限，风险感知（risk perception）仅作面谈线索。 / Risk tolerance is psychological willingness to endure volatility, while risk capacity is financial ability to absorb losses without compromising living goals; both must be evaluated separately, with the lower of the two acting as the binding upper limit for recommendations, whereas risk perception serves only as an interview clue.
时间跨度与目标导向画像原则 / Time Horizon and Goal-Oriented Profiling Principle	Time horizon & Investor profile	时间跨度（time horizon）取决于这笔钱多久后要用而非客户年龄，且同一个投资者对不同目标的资金可以有不同的风险承受意愿，画像必须按目标做而非按人做。 / Time horizon is determined by when the money will be spent rather than the client's age, and because the same investor can have different risk tolerances for different financial goals, profiles must be constructed per goal rather than per person.
CPP 供款结构的考试口径与 2026 双层标准 / CPP Contribution Structure Under Exam Syllabus versus Current 2026 Two-Tier Standards	YMPE & YAMPE (CPP / CPP2)	考试口径只讲起缴额 $3,500 至第一层上限 YMPE（2026 年为 $74,600，最大可计提收入 $71,100），而 2026 现行增加第二层上限 YAMPE（$85,000），对中间 $10,400 区间按 4% 计提 CPP2（劳资各自年度最高缴 $416）。 / The exam syllabus covers only a single tier from the $3,500 basic exemption to the Year's Maximum Pensionable Earnings (YMPE, $74,600 in 2026, maximum contributory earnings $71,100), whereas current 2026 rules add a second-tier ceiling, the Year's Additional Maximum Pensionable Earnings (YAMPE, $85,000), assessing CPP2 at 4% on the $10,400 band between YMPE and YAMPE (maximum annual contribution of $416 each for employee and employer).
注册账户 2026 关键限额与核验方式 / Key 2026 Registered Account Limits and Verification Methods	RRSP, TFSA & FHSA limits	2026 年 TFSA 年度限额为 $7,000（自 2009 年起均符合资格者累计 $109,000，需按实际供款提款记录核实），RRSP 年度 Dollar Limit 为 $33,810（按上年 earned income 的 18% 取小并核对 NOA，超额缓冲 $2,000），FHSA 年度额度 $8,000、单年含结转上限 $16,000、终身上限 $40,000。 / In 2026, the annual TFSA limit is $7,000 (cumulative room of $109,000 for individuals eligible since 2009, verified via actual contribution and withdrawal records across all institutions), the RRSP annual dollar limit is $33,810 (capped at 18% of prior year earned income and verified against the NOA, with a $2,000 lifetime non-deductible overcontribution buffer), and the FHSA annual limit is $8,000 (maximum single-year room of $16,000 including carry-forward, subject to a $40,000 lifetime cap).
总成本报告（TCR）对分离基金的专属披露 / Total Cost Reporting (TCR) Disclosure Requirements Specific to Segregated Funds	Total Cost Reporting (TCR) & IVIC	2026-01-01 生效并由 BC 采纳的指引将分离基金合同（IVIC）纳入总成本报告（TCR），除披露基金费用率（%）与全部基金费用合计（$）外，若保证费用未计入其他费用，须单列披露共同基金所没有的“保证费用合计（$）”，首份新格式年报最早于 2027 年初交付。 / Effective January 1, 2026 and adopted in British Columbia, Total Cost Reporting (TCR) rules incorporate individual variable insurance contracts (IVICs), requiring disclosure of the fund expense ratio (%) and total fund expenses ($), as well as separate line-item disclosure of total guarantee fees ($) if not embedded in other fees, with the first annual statements under the new format delivered in early 2027.

负债分类与反向按揭的财务归属 / Debt Classification and Accounting Treatment of Reverse Mortgages	Good debt, Bad debt & Reverse mortgage	良性负债（按揭、投资贷款）与不良负债（消费型信用卡债）均须以能否按期偿还为评估关键；反向按揭（reverse mortgage）在房主身故或卖房时须偿还并侵蚀遗产，KYC 时必须计入负债而非资产。 / Both good debt (mortgages, investment loans) and bad debt (consumer credit card balances) must be assessed on whether they can be serviced on schedule; a reverse mortgage must be repaid upon the homeowner's death or home sale and erodes estate equity, meaning it must be recorded as a liability rather than an asset during KYC.
财产授权书（POA）变更受益人的权限边界 / Authority Boundaries of a Power of Attorney (POA) for Property Regarding Beneficiaries	Power of Attorney (POA) for property	财产授权代理人（attorney）可代管、转换或出售投资，但通常无权变更人寿保单或分离基金（IVIC）的受益人；BC《Power of Attorney Act》s.20 规定变更既有指定须经法院授权，更新或替换类似文书可依条件沿用原受益人，另建新文书的新指定仅限本人遗产。 / An attorney under a Power of Attorney for property can manage, switch, or sell investments, but generally lacks authority to alter beneficiary designations on life insurance or segregated fund (IVIC) contracts; BC Power of Attorney Act s.20 mandates court authorization to change an existing designation, permits retaining the same beneficiary when renewing or replacing an instrument under specified conditions, and restricts new designations under fresh instruments to the grantor's estate.
适当性原则与公平对待客户原则的层级关系 / Hierarchical Relationship Between the Suitability Principle and Fair Treatment of Customers	Suitability principle vs. Fair Treatment of Customers (FTC)	适当性原则（suitability principle）专门管单次推荐中投资特征与客户目标、约束及风险画像的持续匹配（且不得受佣金或追踪费影响），而公平对待客户原则（FTC）是贯穿销售全流程 7 项要求的上位监管原则。 / The suitability principle specifically governs ongoing alignment between investment features and the client's goals, constraints, and risk profile in an individual recommendation (uninfluenced by commissions or trailer fees), whereas Fair Treatment of Customers (FTC) serves as the overarching regulatory doctrine spanning seven obligations across the entire client lifecycle.

自测提问（康奈尔左栏）

1. KYC 的六个核心要素分别核实什么？为什么不能只靠客户自填的风险数字？ / What do each of the six core KYC elements verify, and why must agents not rely solely on a client's self-selected risk score?
2. 当客户的风险承受意愿（risk tolerance）高于风险承受能力（risk capacity）时，推荐应以哪个为准？ / When a client's risk tolerance exceeds their risk capacity, which one governs product recommendations as the binding limit?
3. 2026 年的 CPP2（YAMPE）、FHSA 和总成本报告（TCR）相比 2022 考试口径有哪些关键增量？ / What key updates do 2026 CPP2 (YAMPE), FHSA, and Total Cost Reporting (TCR) introduce compared to the 2022 exam syllabus?
4. 在审阅净资产表与法律文件时，反向按揭（reverse mortgage）和财产授权书（POA）最容易踩什么坑？ / When reviewing net worth statements and legal documents, what common pitfalls arise regarding reverse mortgages and Powers of Attorney (POA)?
5. 适当性原则（suitability principle）与公平对待客户原则（FTC）有什么区别？何时必须触发画像复核？ / What is the distinction between the suitability principle and Fair Treatment of Customers (FTC), and what events mandate a profile review?

总结：用三句话总结：如何通过独立核实风险承受意愿与风险承受能力建立按目标区分的投资者画像，并利用推荐理由信与重大变化复核机制守住适当性底线。 / In three sentences, summarize: how to construct goal-based investor profiles by independently verifying risk tolerance and risk capacity, and how to uphold suitability standards through reason-why letters and mandatory reviews following material life changes.

第 25 章 · 分离基金与年金的推荐 / Segregated Fund and Annuity Recommendation: From Profile to Product, Application, and Reason-Why Letter

分离基金与年金 / Segregated Funds & Annuities　P1 必拿分 / Must score　Recommendation · 模考 7 题

带着这几道题读：跨类型比较分离基金或面对高佣金产品时，代理人须遵守什么纪律？ / When comparing segregated funds across categories or facing products with higher commissions, what disciplines must an advisor observe?；考场问销售费种类与现行新单DSC禁令、TCR保证成本披露有何区别？ / What is the difference between the sales charge options tested on the exam and the current ban on new DSC contracts and TCR guarantee cost disclosure?；注册账户与配偶RRSP中，持有人、受保人与受益人指定权归谁？ / In registered accounts and spousal RRSPs, who holds the contract owner, annuitant, and beneficiary designation rights?；持有财产授权书代签分离基金申请表时，能否顺便替客户变更受益人？ / When signing a segregated fund application form under a Power of Attorney for property, can the attorney also change the beneficiary on the client's behalf?

怎么考

- 画像到产品的决策树匹配题：给出客户的目标、时间跨度、风险承受力与账户类型，考察能否在给付型年金（payout annuity）、个人分离基金（individual segregated fund）、积累型年金（accumulation annuity）与团体分离基金（group segregated fund）之间做出合规选择，核心测试产品结构特征与客户真实处境的匹配度。 / Decision tree matching questions from profile to product: Given a client's objectives, time horizon, risk tolerance, and account type, scenarios test whether candidates can make compliant choices among payout annuities, individual segregated funds, accumulation annuities, and group segregated funds, focusing on matching product structural characteristics to the client's actual situation.
- 申请表角色与权限边界题：通过客户想把年轻配偶设为受保人、配偶 RRSP 出资方想指定受益人、或代理人替客户填表等场景，测试注册账户（registered account）与非注册账户（non-registered account）在合同持有人（contract owner）、受保人（annuitant）及受益人（beneficiary）上的法定限制。 / Application form roles and authority boundary questions: Through scenarios where a client wants to name a younger spouse as the annuitant, a contributing spouse to a spousal RRSP wants to designate the beneficiary, or an agent completes the form on behalf of a client, scenarios test the statutory restrictions in registered accounts versus non-registered accounts regarding the contract owner, annuitant, and beneficiary.
- 特殊签署与代理权限题：设置客户年迈患病或不在国内、由持有财产授权书（Power of Attorney for property）的人代签申请表的场景，测试代签申请表例外与指定或变更受益人权限的严格区分，以及考试口径与 BC 现行法律的差异。 / Special execution and representative authority questions: Scenarios involve an elderly, ill, or abroad client whose application form is signed by an attorney acting under a Power of Attorney (POA) for property, testing the strict

高频陷阱（看到信号就警觉）

代填等于代决陷阱 / Agent completion equated to agent decision trap：题干出现代理人帮客户填写分离基金申请表（application form）、客户未亲自提供某项信息或存在语言理解障碍仍继续推进签字。 / The question stem features an agent completing a segregated fund application form for a client, where the client has not personally provided certain information or where language and comprehension barriers exist, yet the agent proceeds toward signature.

注册账户分离角色陷阱 / Registered account role splitting trap：题干涉及注册账户（registered account）或配偶注册退休储蓄计划（spousal RRSP），且客户试图让持有人（owner）与受保人（annuitant）分离，或由出资方指定受益人。 / The question stem involves a registered account or a spousal Registered Retirement Savings Plan (spousal RRSP), and the client attempts to separate the contract owner from the annuitant, or have the contributing spouse designate the beneficiary.

授权书越权变更受益人陷阱 / Power of Attorney exceeding authority to alter beneficiaries trap：题干同时出现持有人因病、行为能力受限或不在国内由财产授权书（POA）持有人代签申请表，以及要求指定或修改受益人（beneficiary）。 / The question stem simultaneously features an owner who is ill, incapacitated, or abroad having an application form signed by an attorney under a Power of Attorney (POA), alongside a request to designate or change the beneficiary.

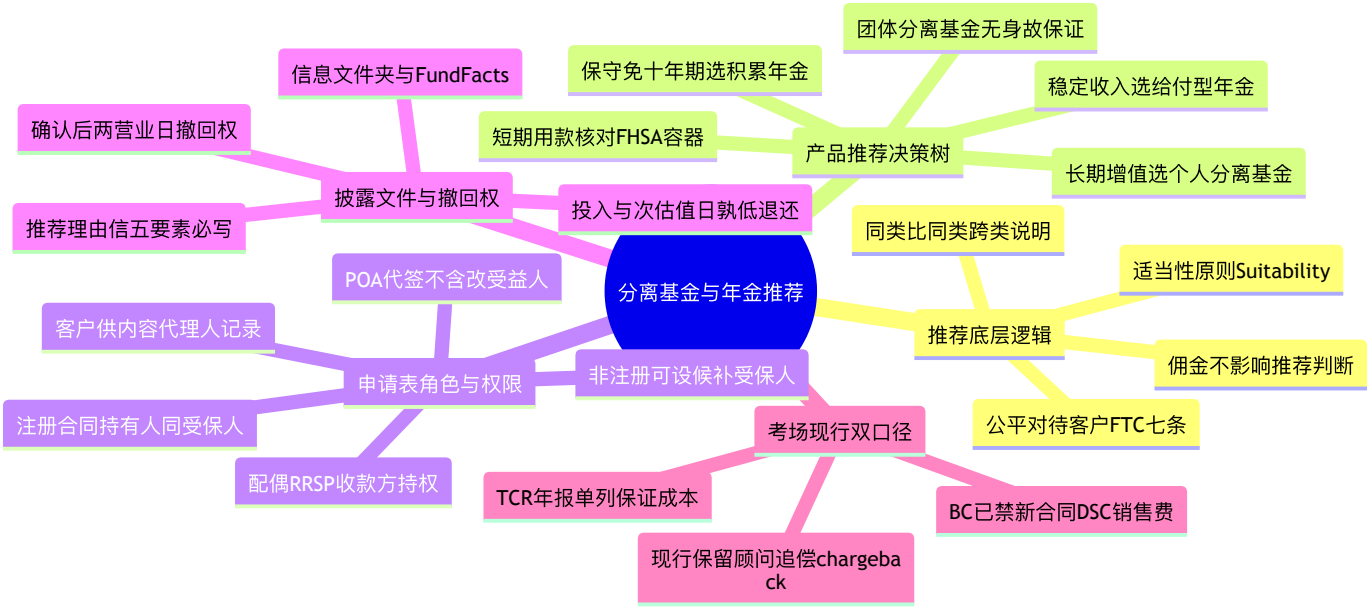
distinction between the exception allowing signing the application and the authority to designate or change beneficiaries, as well as the difference between exam standard rules and current British Columbia statutory law.

- 披露三件套与撤回权计算题：结合信息文件夹（information folder）、基金情况说明书（Fund Facts）与合同正本的交付节点，考察犹豫期撤回权（right of rescission）的 2 个营业日时限、视为收悉（deemed receipt）的 5 个营业日起算规则，以及撤回时按投入金额与次一估值日价值孰低退还的计算逻辑。 / Three disclosure documents and rescission calculation questions: Combining the delivery milestones of the information folder, Fund Facts, and the original contract, scenarios test the two-business-day time limit for the right of rescission, the five-business-day deemed receipt triggering rule, and the calculation logic of refunding the lesser of the amount invested or the value on the next valuation date upon rescission.
- 推荐理由信与双口径合规题：通过咖啡厅口头推荐、凭过往三年业绩推荐或询问销售费（sales charge）与年度成本披露的场景，测试推荐理由信（reason-why letter）的强制性五要素、同类比同类（like compared to like）原则，以及 DSC 禁令与总成本报告（TCR）的考场双口径。 / Reason-why letter and dual-standard compliance questions: Through scenarios involving verbal recommendations in a café, recommendations based solely on three-year past performance, or inquiries about sales charges and annual cost disclosure, scenarios test the five mandatory elements of a reason-why letter, the 'like' compared to 'like' principle, and the dual exam versus current regulatory standards for the DSC ban and Total Cost Reporting (TCR).

口头同意替代推荐理由信陷阱 / Verbal assent substituting for reason-why letter trap：题干出现非正式场合沟通、仅凭历史业绩（past performance）推荐、客户口头同意即签字而未留存书面推荐理由信。 / The question stem features informal communications, recommendations based solely on past performance, or a client verbally agreeing and signing without a written reason-why letter being documented and retained.

产品名称与双口径混淆陷阱 / Product naming and dual-standard confusion trap：题干出现团体分离基金（group segregated fund）要求身故本金保障，或询问考试口径下的销售费种类、撤回权（right of rescission）计算及时限。 / The question stem features a group segregated fund where the client requests death benefit principal protection, or asks about exam standard sales charge types or right of rescission calculations and deadlines.

导图



第 25 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
适当性与同类比同类纪律 / Suitability Principle and Like-Compared-to-Like Discipline	suitability principle & "like" compared to "like"	代理人推荐时佣金或追踪费不得影响判断，比较基金业绩或费用须选同类型基金，若跨类型比较必须向客户说明理由。 / Commissions or trailer fees must never influence an advisor's judgment when making recommendations; when comparing fund performance or expenses, funds of the same category must be selected, and any cross-category comparison requires explaining the rationale to the client.
分离基金销售费双口径 / Dual Standards for Segregated Fund Sales Charges	sales charge (FEL / DSC / advisor chargeback)	考试口径并列前收费（FEL）与递延销售费（DSC）且称 DSC 预期淘汰；2023-06-01 起 BC 依《金融机构法》禁止新分离基金合同含 DSC，市场保留顾问追偿式销售费（advisor chargeback）。 / The exam standard lists front-end load (FEL) and deferred sales charge (DSC) options side by side, noting that DSC is expected to be phased out; since June 1, 2023, British Columbia has prohibited new segregated fund contracts with DSC under the Financial Institutions Act, while the market retains advisor chargeback sales charge arrangements.
年度总成本报告保证成本披露 / Total Cost Reporting and Guarantee Cost Disclosure	Total Cost Reporting (TCR)	考试口径年报仅讲管理费比率（MER）与销售费；2026-01-01 生效的 TCR 新规要求年报以百分比披露基金费用率、以加元披露全部基金费用合计，且在保证成本尚未计入其他费用时单列保证成本合计（$）。 / The exam standard only covers disclosing the Management Expense Ratio (MER) and sales charges in annual statements; new Total Cost Reporting (TCR) rules effective January 1, 2026 require annual statements to disclose fund expense ratios as percentages, total fund expenses in Canadian dollars, and a separate dollar total for guarantee costs ($) if not already included in other fees.
画像四维度与推荐决策树 / Four Profile Dimensions and Recommendation Decision Tree	payout annuity / accumulation annuity / group segregated fund	低风险求退休稳定收入指向给付型年金，保守存钱且不想受 10 年到期或 MER 波动约束指向积累型年金，而团体分离基金默认不提供身故保证。 / Low risk tolerance seeking stable retirement income points to a payout annuity; saving conservatively without being constrained by a 10-year maturity or MER fluctuations points to an accumulation annuity; and group segregated funds provide no death benefit guarantee by default.
申请表信息提供与语言障碍处理 / Providing Application Information and Handling Language Barriers	application form completion	分离基金申请表由投资者或有效获授权者提供真实信息内容，代理人负责记录、核实与解释，若客户存在语言或理解障碍须等障碍消除后才能继续。 / The factual content of a segregated fund application form must be provided by the investor or a duly authorized person, while the advisor is responsible for recording, verifying, and explaining the information; if the client faces language or comprehension barriers, the advisor must wait until those barriers are resolved before proceeding.
注册与非注册合同的持有人限制 / Ownership Restrictions in Registered versus Non-Registered Contracts	contract owner & annuitant & contingent annuitant	个人退休类注册合同（如 RRSP）的持有人（owner）必须与受保人（annuitant）为同一人且不可转让或抵押；非注册合同两者可不同人，可转让、可抵押并可指定候补受保人（contingent annuitant）。 / In individual retirement registered contracts such as RRSPs, the contract owner and the annuitant must be the same person, and the contract cannot be transferred or pledged as collateral; in non-registered contracts, the owner and annuitant may be different individuals, and the contract may be transferred, pledged, or have a contingent annuitant designated.
配偶 RRSP 的所有权归属 / Ownership Attribution in Spousal RRSPs	spousal RRSP	配偶注册退休储蓄计划（spousal RRSP）中出资方没有任何所有权，接受存款的一方才是合同持有人（owner）兼受保人（annuitant），只有该方有权指定受益人。 / In a spousal Registered Retirement Savings Plan (spousal RRSP), the contributing spouse holds no ownership rights whatsoever; the spouse receiving the deposit is both the contract owner and the annuitant, and only that receiving spouse has the authority to designate beneficiaries.

财产授权书代签与受益人指定边界 / Power of Attorney Execution Boundaries and Beneficiary Designations	Power of Attorney (POA) for property	投资者因病、行为能力受限或长期不在国内时，持有财产授权书（POA for property）的人可代签申请表，但考试口径默认该例外不包括指定或变更受益人的权利（BC 现行依《Power of Attorney Act》s.20 变更既有指定须法院授权）。 / When an investor is ill, mentally incapacitated, or abroad, an attorney acting under a Power of Attorney (POA) for property may sign the application form on their behalf, but the exam standard defaults to excluding the authority to designate or change beneficiaries from this exception (under British Columbia's current Power of Attorney Act s.20, altering an existing designation requires court authorization).
披露文件三件套与犹豫期撤回权 / Three Disclosure Documents and Right of Rescission	information folder, Fund Facts & right of rescission	代理人须交付信息文件夹、与客户逐一过完所选基金的 Fund Facts 并交付合同；客户在收到购买确认后 2 个营业日内可书面行使撤回权，领回已投入金额与次一估值日基金价值中较低者。 / The advisor must deliver the information folder, review the Fund Facts for each chosen fund with the client, and deliver the contract; the client may exercise the right of rescission in writing within two business days of receiving the trade confirmation, receiving back the lesser of the amount invested or the fund value on the next valuation date.
推荐理由信的强制性与五项要素 / Mandatory Reason-Why Letter and Its Five Core Elements	reason-why letter	推荐理由信（reason-why letter）不是可选项，须在申请阶段准备并与客户共同审阅存档，内容必须包含确认事实、核实客户指示、点出已满足与未覆盖需求、说明适当性理由及证明客户理解。 / A reason-why letter is not optional; it must be prepared during the application stage, reviewed with the client, and retained on file, and must contain confirmed facts, verified client instructions, identified addressed and unaddressed needs, explained suitability rationale, and evidence of client comprehension.

自测提问（康奈尔左栏）

1. 为什么推荐理由信（reason-why letter）在合规调查中不可省略，它必须写明哪五件事？ / Why is a reason-why letter mandatory in compliance investigations, and what five specific elements must it include?
2. 在推荐决策树中，给付型年金、个人分离基金、积累型年金和团体分离基金各自对应什么客户画像？ / In the recommendation decision tree, what client profile corresponds to each of payout annuities, individual segregated funds, accumulation annuities, and group segregated funds?
3. 注册合同（如 RRSP）、配偶 RRSP 与非注册合同在持有人（owner）、受保人（annuitant）和受益人指定权上有何本质区别？ / What are the fundamental differences among registered contracts (such as RRSPs), spousal RRSPs, and non-registered contracts regarding the contract owner, annuitant, and beneficiary designation authority?
4. 持有财产授权书（POA for property）代签申请表时，为什么不能直接替客户变更既有受益人？ / When signing an application form under a Power of Attorney (POA) for property, why can the attorney not directly alter an existing beneficiary designation on the client's behalf?
5. 分离基金的犹豫期撤回权（right of rescission）如何计算时限与退还金额，DSC 与 TCR 的考试口径和 2026 现行规则有何差异？ / How are the time limit and refund amount calculated for the right of rescission in segregated funds, and how do exam standard rules differ from current 2026 standards regarding DSC and TCR?

总结：请用三句话总结：如何从投资者画像四维度推导出合规产品建议、在申请表上摆正持有人与受保人及 POA 的法定权限，并用披露文件三件套与推荐理由信完成执业留痕。 / Summarize in three sentences: How to derive compliant product recommendations from the four investor profile dimensions, correctly establish the statutory authorities of owners, annuitants, and attorneys under a POA on the application form, and create a solid audit trail using the three disclosure documents and the reason-why letter.

第 26 章 · 分离基金与年金合同 / Segregated Fund (IVIC) and Annuity Contracts: Clause-by-Clause Guarantees and Administration

分离基金与年金 / Segregated Funds & Annuities | P2 稳住 / Hold steady | IVIC & Annuity Contracts · 模考 4 题

带着这几道题读：注册分离基金合同能否指定候补受保人或用于银行抵押贷款？ / Can a registered segregated fund contract designate a contingent annuitant or be pledged as collateral for a bank loan?；哪些合同要素由法律或合同写死，哪些由保险公司自行规定？ / Which contract elements are legally mandated or contractually fixed, and which are set at the insurer's discretion?；非注册合同免费转换并触发重置时，税务和到期日会发生什么变化？ / What changes occur regarding taxation and the maturity date when a non-registered contract executes a free switch that triggers a reset?；合同到期时受保人失能但在世，POA代理人和受益人谁有权领款？ / When a contract matures while the annuitant is incapacitated but living, who is entitled to claim the funds between an attorney under a POA and the beneficiary?；联合末存年金第一位受领人身故时，指定受益人能否立即申领余额？ / Can the named beneficiary immediately claim remaining funds when the first annuitant of a joint and last survivor annuity dies?

怎么考

- 区分“合同写死/法律强制的保证条款”与“保险公司自定的行政规则”：题干给出免费转换次数、重置年龄上限或不可撤销受益人变更条件，要求判断哪一项属于法定或合同保证、哪一项因保险人而异。 / Distinguishing contractually fixed or statutory guarantees from insurer administrative rules: Scenarios present conditions such as annual free switch limits, reset age ceilings, or irrevocable beneficiary changes, requiring candidates to determine which provisions are legally binding guarantees versus insurer-discretionary rules.
- 注册账户与非注册账户的结构性限制：给出客户希望指定候补受保人（contingent annuitant）或将分离基金合同用于银行贷款抵押的场景，测试是否掌握只有非注册合同才允许三方分离、转让及设候补受保人。 / Structural limitations of registered versus non-registered contracts: Presenting scenarios where a client wishes to designate a contingent annuitant or pledge a segregated fund contract as bank collateral, testing whether candidates know that only non-registered contracts permit role separation, collateral assignment, and contingent annuitants.
- 转换（switch）与重置（reset）的叠加后果：以非注册合同的免手续费转换为切入点，同步考察资本利得税务处置（按 50% 计入率）以及触发到期重置后到期日重新顺延 10 年的连锁影响。 / Compounding consequences of switches and resets: Using fee-free switches in non-registered contracts as an entry point to evaluate capital gains tax dispositions (at a 50% inclusion rate) alongside the ripple effect of a 10-year maturity date extension triggered by a maturity reset.
- 到期理赔与身故理赔的申请人资格及文件边界：在受保人失能（由 POA 代管）但尚在世、或刚发生身故的不同时点，测试此刻谁有权申领、是否需要死亡证明或主治医生证明（APS），以及部分提款对保证基数的按比例下调。 / Applicant eligibility and documentation boundaries for maturity versus death claims: Testing who is entitled to claim, whether a death certificate or Attending

高频陷阱（看到信号就警觉）

免费Switch零后果陷阱 / The zero-consequence free switch trap：题干出现 non-registered contract、free switch、market value 高于原投入或 switch triggering a reset 等字眼。 / The question stem mentions a non-registered contract, free switch, market value exceeding original deposit, or a switch triggering a reset.

在世失能误走身故理赔陷阱 / Mistaking lifetime incapacity for a death claim trap：题干同时出现 contract maturing soon、incapacitated owner/annuitant、Power of Attorney (POA) 以及 named beneficiary。 / The question stem mentions contract maturing soon, incapacitated owner/annuitant, Power of Attorney (POA), and a named beneficiary.

注册合同设候补受保人陷阱 / Naming a contingent annuitant on a registered contract trap：题干出现 RRSP、RRIF 或 LIRA 等注册分离基金合同，并询问能否添加 contingent annuitant 或将合同质押（collateral）。 / The question stem presents a registered segregated fund contract such as an RRSP, RRIF, or LIRA and asks about adding a contingent annuitant or pledging the contract as collateral.

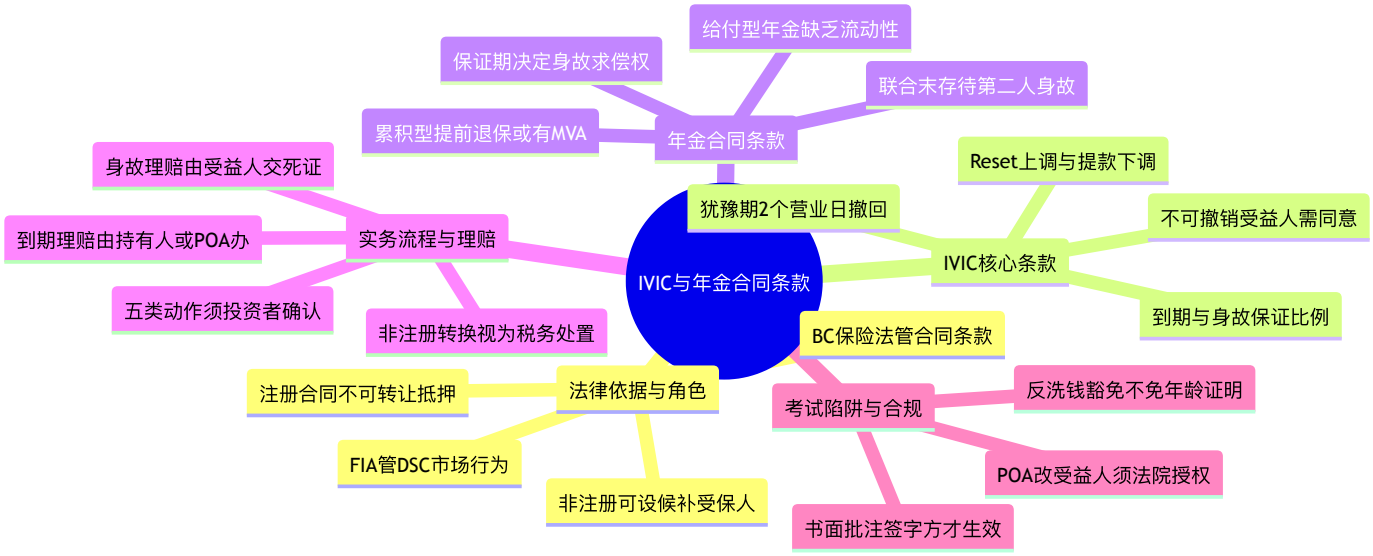
联合年金首位身故即赔受益人陷阱 / Paying the beneficiary upon the first death in a joint annuity trap：题干出现 joint and last survivor annuity、guarantee period，且时间点设在 the first annuitant dies while the co-annuitant is still alive。 / The question stem mentions a joint and last survivor annuity, a guarantee period, and specifies that the first annuitant dies while the co-annuitant is still alive.

Physician's Statement (APS) is required, and proportional guarantee base reductions from partial withdrawals across scenarios where an annuitant is incapacitated under a POA during their lifetime versus deceased.

- 年金合同的身故给付条件与反洗钱核实豁免：围绕联合末存年金（joint and last survivor annuity）首位受领人身故时的受益人权利、给付型年金的撤销限制，以及注册资金转入豁免身份识别但绝不豁免年龄证明的合规要求设题。 / Annuity contract death benefit terms and anti-money laundering verification exemptions: Framing questions around beneficiary rights upon the primary annuitant's death under a joint and last survivor annuity, cancellation restrictions on payout annuities, and the compliance rule that registered pension transfers exempt identity verification but never proof of age.

> **POA全权变更受益人与免年龄证明陷阱 / Broad POA beneficiary changes and age proof exemption trap**：题干出现 attorney under a POA wants to change the beneficiary，或 registered pension transfer exempt from identity verification。 / The question stem mentions an attorney under a POA wanting to change the beneficiary, or a registered pension transfer exempt from identity verification.

导图



第 26 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
合同条款与市场行为的法律分工 / Statutory Division Between Contract Provisions and Market Conduct	Insurance Act Part 3 vs. Financial Institutions Act (FIA)	分离基金合同条款本身（受益人指定、免受债权人追索、不可撤销受益人变更）受 BC《Insurance Act》第三部分约束，而停售 DSC 等市场行为监管走《Financial Institutions Act》。 / Segregated fund contract provisions themselves (beneficiary designation, creditor protection, and irrevocable beneficiary changes) are governed by Part 3 of the BC Insurance Act, whereas market conduct regulation such as ending DSC sales is enforced under the Financial Institutions Act (FIA).
注册与非注册合同的角色分离及转让限制 / Role Separation and Transfer Restrictions in Registered versus Non-Registered Contracts	Registered vs. Non-registered IVIC and Contingent Annuitant	注册合同强制要求持有人与受保人为同一人，不可转让、不可抵押且不可指定候补受保人；只有非注册合同才允许三方分离、转让抵押及指定候补受保人。 / Registered contracts legally require the contract owner and the annuitant to be the same person and cannot be assigned, pledged as collateral, or assigned a contingent annuitant; only non-registered contracts permit three-party separation, collateral assignment, and the naming of a contingent annuitant.
犹豫期解约权与退款计算公式 / Right of Rescission and Refund Calculation Formula	Right of Rescission	投资者从实际收到确认书与邮寄后第 5 个营业日两者较早者起算，在 2 个营业日内可书面撤回合同，退款金额为已投入本金与撤回请求次一估值日基金市值两者中的较低者。 / An investor may rescind the contract in writing within two business days calculated from the earlier of actual receipt of confirmation or five business days after mailing; the refund equals the lesser of the amount invested and the fund market value on the valuation day following the rescission request.
书面合同批注与五类须确认动作 / Written Contract Amendments and Five Core Actions Requiring Confirmation	Amendment / Addendum and Investor Confirmation	豁免条款或更正错漏的批注必须由保险公司书面制作并由投保人签字才生效，口头约定无效；购买、转换（switch）、重置（reset）、提款、终止五类动作均须取得投资者确认。 / Amendments or addenda to waive terms or correct errors must be prepared in writing by the insurer and signed by the policy owner to take effect, as verbal agreements are void; five core actions—purchase, switch, reset, withdrawal, and termination—strictly require investor confirmation.
DSC禁令的双口径与总成本披露（TCR） / Dual Benchmarks for the DSC Ban and Total Cost Reporting (TCR)	Deferred Sales Charge (DSC) and Total Cost Reporting (TCR)	考试口径称 DSC 预期将被淘汰，而现行规则自 2023-06-01 起禁止新发附 DSC 的分离基金合同（旧合同可按原表走完）；TCR 新规要求自 2027 年初起在年报中用百分比和加元同时披露含保证成本在内的费用。 / The exam benchmark states DSCs are expected to be banned, whereas current BC rules prohibited issuing new DSC segregated fund contracts effective June 1, 2023 (allowing legacy contracts to run their schedules); Total Cost Reporting (TCR) rules mandate disclosing all fees, including insurance guarantee costs, in both percentages and actual dollar amounts on annual statements starting early 2027.
转换（Switch）的费用、税务处置与重置（Reset）联动 / Switch Fees, Tax Dispositions, and Maturity Reset Extensions	Switch, Short-Term Trading Fee, and Reset	购买后 90 天内转换可能被收短线交易费（考试口径举例 2%），非注册合同转换无论是否免费均构成税务处置计算资本利得，若同步触发到期重置还会使 10 年到期日重新起算（保险公司常设 80 岁重置年龄上限）。 / Switches made within 90 days of deposit may incur a short-term trading fee (illustrated as 2% on the exam), non-registered switches constitute a taxable disposition calculating capital gains regardless of whether the transaction is free, and triggering a maturity reset restarts the 10-year maturity period from the reset date (insurers often set an age ceiling such as age 80).
10年到期续保规则与两类理赔手续差异 / Ten-Year Maturity Renewal Options and Claim Procedure Distinctions	Maturity Claim vs. Death Claim	10 年到期可领现、买年金或按市值与保证取高者续保；到期理赔由持有人或 POA 办理且无需死亡证明，身故理赔则由受益人或遗产代表提交死亡证明或主治医生证明（APS）申领。 / At 10-year maturity, the contract can be taken in cash, used to purchase an annuity, or renewed at the higher of market value or maturity guarantee; maturity claims are processed by the owner or attorney under a POA without a death certificate, whereas death claims require the beneficiary or estate representative to submit a death certificate or Attending Physician's Statement (APS).

财产授权书（POA）在申请与受益人变更中的边界 / Authority Boundaries for Attorneys Under a POA in Applications and Beneficiary Changes	Power of Attorney for Property (POA)	有效 POA 代理人虽可代签申请表及办理到期理赔，但能否代指定受益人需另寻法律意见；按 BC《Power of Attorney Act》s.20，持续授权代理人变更本人既有受益人指定必须取得法院授权。 / While an attorney under an enduring POA may sign applications and manage maturity claims, whether they may designate a beneficiary requires separate legal advice; under BC Power of Attorney Act s. 20, an attorney cannot alter the client's existing beneficiary designation without court authorization.
联合末存年金与保证期的身故给付顺序 / Death Benefit Payment Sequence for Joint and Last Survivor Annuities with Guarantee Periods	Joint and Last Survivor Annuity and Guarantee Period	联合末存年金第一位受领人身故后由联合受领人（co-annuitant）成为唯一受领人继续领款，只有待第二位受领人也在保证期内身故（或合同另有退款选项）时，受益人才有权申领余额。 / Upon the death of the primary annuitant in a joint and last survivor annuity, the surviving co-annuitant becomes the sole annuitant and continues receiving income; the named beneficiary is entitled to claim remaining payments only after the second annuitant dies within the guarantee period (or if the contract includes a specific refund option).
年金身份核实豁免与年龄证明强制要求 / AML Identity Verification Exceptions versus Mandatory Proof of Age for Annuities	FINTRAC Identity Verification Exception vs. Proof of Age	完全由合资格养老金直接转入、完全由团体寿险赔款购买或注册年金虽可适用反洗钱身份核实例外，但受保人的年龄证明（proof of age）属于合同事项，任何情况下均不可豁免。 / Although contracts funded directly and entirely by registered pension transfers, group life proceeds, or registered plans qualify for FINTRAC identity verification exceptions, proof of the annuitant's age is an essential contractual requirement and is never exempt under any circumstances.

自测提问（康奈尔左栏）

1. 分离基金合同条款本身与 DSC 禁令分别受 BC 哪两部法律管辖？ / Which two British Columbia statutes respectively govern segregated fund contract provisions and the enforcement of the DSC ban?
2. 哪些条款属于合同写死或法律强制的保证，哪些属于保险公司自定的行政规则？ / Which contract terms are legally mandated or contractually fixed guarantees, and which are administrative rules set at the insurer's discretion?
3. 为什么注册分离基金合同不能指定候补受保人（contingent annuitant）也不能用作贷款抵押？ / Why are registered segregated fund contracts prohibited from designating a contingent annuitant or being pledged as loan collateral?
4. 非注册合同在免费次数内办理 switch 并触发到期 reset，会产生哪两层连带后果？ / What two compounding consequences occur when a non-registered contract executes a fee-free switch that simultaneously triggers a maturity reset?
5. 到期理赔与身故理赔在申请人身份、POA 权限及所需证明文件上有什么核心区别？ / What are the core differences between maturity claims and death claims regarding claimant eligibility, POA authority, and required proof documents?

总结：用三句话总结：分离基金与年金合同中“法定/合同写死条款”与“保险人自定规则”的边界、非注册转换重置的双重后果，以及到期与身故理赔的申领资格判定。 / In three sentences, summarize: the boundaries between statutory or contractually fixed provisions versus insurer discretionary rules in segregated fund and annuity contracts; the dual tax and maturity date consequences of non-registered switches triggering resets; and the determination of claimant eligibility between maturity and death claims.

第 27 章 · 团体退休计划 / Group Retirement and Investment Plans: DB vs. DC Responsibilities and Post-CPP Enhancement Planning

分离基金与年金 / Segregated Funds & Annuities　P3 过一遍 / Skim　Group Retirement · 模考 1 题

带着这几道题读：发起方把养老金日常管理外包后，谁承担审慎人受托监督责任？ / When a plan sponsor outsources daily pension administration, who retains supervisory fiduciary responsibility under the prudent person rule?；哪三类团体计划会产生 PA 扣减次年 RRSP 额度，具体怎么算？ / Which three group plans generate a Pension Adjustment (PA) reducing next year's RRSP room, and how is it calculated?；代理人在团体计划里向谁履行披露义务？建设计划顺序是什么？ / To whom does the agent owe disclosure obligations in a group plan, and what is the sequence for setting up the plan?；初创公司想固定比例供款再加浮动利润分享，怎么组合计划？ / How can a startup combine plans if it wants fixed-percentage contributions supplemented by variable profit sharing?；团体分离基金有无身故保证？哪些计划属于资本积累计划？ / Do group segregated funds include death benefit guarantees, and which plans qualify as Capital Accumulation Plans?

怎么考

- 六类计划匹配题：题干给出雇主诉求（如“只想在有盈利的年份出资”“希望员工也能自己供款”“不想承担精算兜底责任”），考你用“谁供款”和“谁承担投资风险”两条独立分类线选出唯一匹配的计划类型。 / Matching six plan types to employer objectives: Scenarios present employer needs (such as contributing only in profitable years, allowing employees to make their own contributions, or avoiding actuarial funding liabilities), testing candidates on selecting the uniquely matching plan type using the two distinct criteria of contributor identity and bearer of investment risk.
- PA 与 RRSP 供款空间计算题：给出员工年收入及 DCPP 或 GRRSP 的劳资配比比例，考你区分哪些计划产生养老金调整额（PA）侵蚀次年额度、哪些计划直接占用当年个人 RRSP 供款空间。 / Calculating PA and RRSP contribution room: Given employee annual earnings and employer-employee matching contribution ratios in a DCPP or GRRSP, testing whether candidates distinguish which plans generate a Pension Adjustment (PA) reducing next year's RRSP room versus which plans directly consume current-year individual RRSP deduction limit.
- 离职资金去向与锁定规则题：员工在跳槽或退休时处理账户余额，考你区分锁定资金（转 LIRA/LIF）与非锁定资金（转个人 RRSP/RRIF 或提现），以及考试口径“两年归属”与 BC 现行 PBSA 即时归属的双口径差异。 / Termination fund transfers and locking-in rules: When employees handle account balances upon job change or retirement, testing the distinction between locked-in funds (transferred to a LIRA or LIF) and unlocked funds (transferred to an individual RRSP, RRIF, or cashed out), alongside the dual-benchmark differences between the exam standard of two-year vesting and current BC PBSA immediate vesting.
- 受托责任与实务流程题：考发起方外包管理后是否仍负监督受托责任、代理人向谁履行利益冲突披露义务，以及“发起方先申请、成员后加入”的两阶段建设计划流程。 / Fiduciary duty and practical operational workflows: Testing whether

高频陷阱（看到信号就警觉）

DPSP 缴费型陷阱 / The contributory DPSP trap：题干同时出现 profit sharing 与 employees also contribute / contributory plan。 / The question stem mentions profit sharing alongside employees also contribute or contributory plan.

PA 全覆盖错觉 / The universal PA coverage illusion：题干问哪些计划会产生 Pension Adjustment (PA) 减少次年 RRSP 空间，或直接给出 GRRSP 供款问次年 PA 是多少。 / The question stem asks which plans generate a Pension Adjustment (PA) reducing next year's RRSP room, or provides GRRSP contribution amounts and asks for the resulting PA.

雇主供款免税错觉 / The tax-free employer contribution illusion：题干问雇主配比供款（matching contribution）在当年报税时是否计入员工的 taxable income。 / The question stem asks whether employer matching contributions are included in the employee's taxable income for the current tax year.

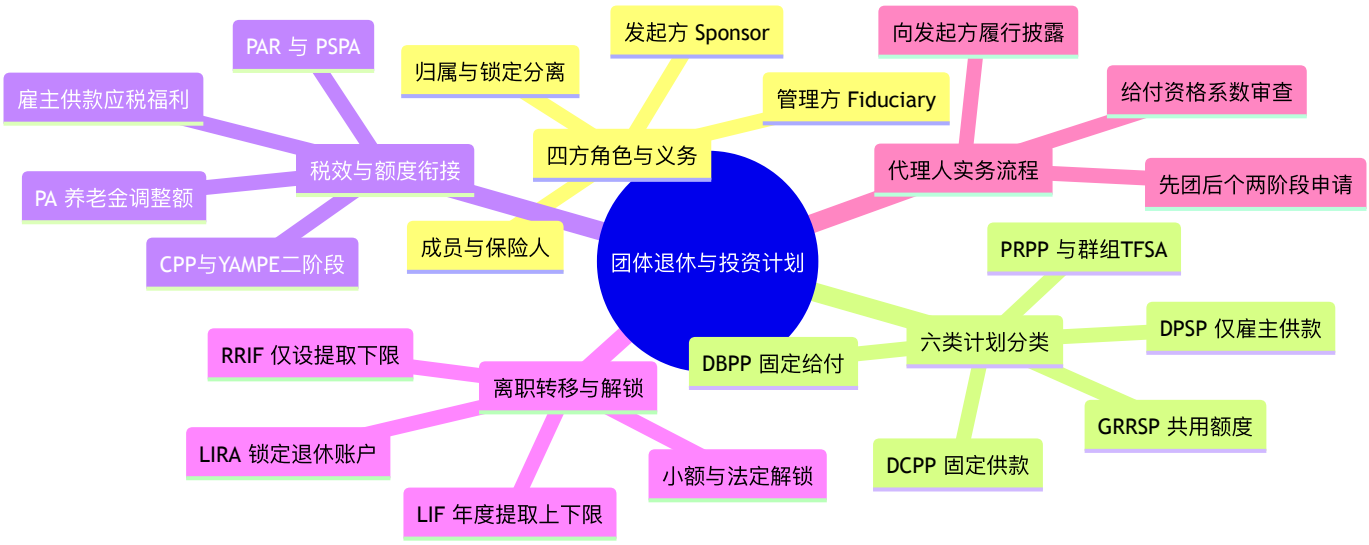
归属与锁定混同陷阱 / Confusing vesting with unlocking trap：题干描述员工离职时已满足归属条件，问能否直接把 DCPP 余额提现出来用。 / The question stem describes an employee meeting vesting conditions upon termination and asks whether DCPP account balances can be directly withdrawn in cash.

CAP 与保证条款错位 / Misaligning CAP definitions with guarantees trap：题干出现 Capital Accumulation Plan (CAP) 定义判断，或问团体分离基金（group segregated funds）是否默认提供 death benefit guarantee。 / The question stem asks to identify a Capital Accumulation Plan (CAP) definition, or asks whether group segregated funds provide an automatic death benefit guarantee.

a plan sponsor retains supervisory fiduciary duties under the prudent person rule after outsourcing administration, to whom an agent owes conflict-of-interest disclosure duties, and the two-stage plan implementation process where the sponsor applies first before individual members enrol.

- 税务待遇与资格红线题：考雇主向不同计划供款是否计入员工当期应税福利（GRRSP 与群组 TFSA 计入，DCPP/DPSP/PRPP 不计入），以及持股达 10% 的关联员工不得加入 DPSP 等硬性限制。 / Tax treatment and eligibility red lines: Testing whether employer contributions to different plans constitute current taxable benefits to employees (taxable under a GRRSP or Group TFSA; non-taxable under a DCPP, DPSP, or PRPP), alongside strict eligibility restrictions such as barring employees owning 10% or more of voting shares from participating in a DPSP.

导图



第 27 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
管理方的受托责任与审慎人原则 / Plan Administrator Fiduciary Duty and the Prudent Person Rule	Fiduciary duty & Prudent person rule	受 PBSA 规管的养老金法定管理方承担受托职责，须遵循审慎人原则以成员最佳利益行事，且不能因外包日常投资管理而免除监督责任。 / The legal plan administrator of a pension plan governed by the PBSA owes a fiduciary duty to act in the best interests of plan members and beneficiaries under the prudent person rule, and cannot be relieved of its supervisory duty by outsourcing day-to-day investment management.
缴费型与非缴费型分类线 / Contributory versus Non-Contributory Classification Boundary	Contributory vs. Non-contributory plan	发起方与成员共同出资为缴费型，仅发起方出资为非缴费型；六类计划中只有 DPSP 天生只能是非缴费型。 / Plans funded jointly by the sponsor and members are contributory, while plans funded solely by the sponsor are non-contributory; among the six group plans, only a DPSP is legally restricted to being non-contributory.
归属期与锁定的法律区分 / Legal Distinction Between Vesting and Locking-In	Vesting vs. Locking-in	归属决定员工对已赚取福利的权益归谁（BC PBSA 下即时归属，考试口径常举两年归属例子），锁定决定资金必须留作退休用途而不能自由提取现金。 / Vesting determines employee ownership of accrued benefits (immediate vesting under current BC PBSA, while exam questions often cite a legacy two-year vesting rule), whereas locking-in mandates that funds remain dedicated to retirement income and cannot be freely withdrawn in cash.
DPSP 关联员工禁入与供款规则 / DPSP Contribution Rules and Bar on Related Employees	Deferred Profit Sharing Plan (DPSP)	DPSP 仅由发起方以当年或未分配以前年度利润供款，不锁定，但持股达 10% 或以上及与雇主有关联关系的员工不得加入。 / A DPSP is funded solely by the sponsor out of current or retained profits and is not locked in, but employees holding 10% or more of voting shares and individuals related to the employer are strictly barred from participating.
雇主供款的当期应税福利属性 / Taxable Benefit Status of Employer Contributions	Taxable benefit of employer contributions	雇主向 GRRSP 和群组 TFSA 的供款计入员工当期应税收入，而向 DBPP、DCPP、DPSP、PRPP 的供款不算员工当期应税收入。 / Employer contributions to a GRRSP and a Group TFSA are included in the employee's current taxable employment income, whereas employer contributions to a DBPP, DCPP, DPSP, and PRPP are not considered current taxable income.
养老金调整额（PA）及调整机制 / Pension Adjustment (PA) and Rebalancing Mechanisms	Pension Adjustment (PA), PAR & PSPA	仅 DBPP、DCPP、DPSP 产生 PA 侵蚀次年 RRSP 供款空间；中途离职多算的 PA 通过 PAR 恢复空间，追溯提高福利则产生 PSPA 压缩空间。 / Only DBPP, DCPP, and DPSP generate a Pension Adjustment (PA) that reduces the employee's next year's RRSP contribution room; early termination forfeitures restore room via a Pension Adjustment Reversal (PAR), while retroactive benefit upgrades create a Past Service Pension Adjustment (PSPA) that reduces available room.
CPP 基础层与增强二阶段（YAMPE） / CPP Base Tier and Second-Tier Enhancement (YAMPE)	YMPE & YAMPE (CPP2)	考试口径只考以 YMPE（2026 年 $74,600，豁免额 $3,500）为上限的第一层；现行增加 YAMPE（2026 年 $85,000）第二层，区间 $10,400 劳资各按 4% 缴最高 $416。 / The exam standard tests only the first tier capped at the YMPE ($74,600 in 2026 with a $3,500 basic exemption); current rules add a second-tier YAMPE ($85,000 in 2026), where employer and employee each contribute 4% on the $10,400 band up to a maximum of $416.
锁定资金转入工具：LIRA 与 LIF / Locked-In Transfer Vehicles: LIRA and LIF versus RRIF	LIRA & LIF vs. RRIF	DCPP 与 PRPP 的锁定资金离职时转入 LIRA（暂不产收）或 LIF（有法定年度提取上下限，而 RRIF 只有提取下限没有上限）。 / Locked-in funds from a DCPP or PRPP upon termination transfer to a LIRA (for continued tax-sheltered growth without income) or a LIF (subject to statutory annual minimum and maximum withdrawal limits, unlike a RRIF which has only a minimum limit and no maximum).
代理人披露方向与两阶段建设计划流程 / Agent Disclosure Duties and Two-Stage Plan Implementation	Disclosure to sponsor & Two-stage enrolment	团体计划中代理人向发起方披露合作保险人、报酬方式与利益冲突；流程上由发起方先申请建设计划，保险人核保后成员再各自填表加入。 / In group plans, the agent discloses representing insurers, compensation methods, and conflicts of interest directly to the plan sponsor; implementation follows a two-stage process where the sponsor applies first to establish the master plan, and members enrol individually after insurer underwriting approval.
资本积累计划（CAP）与团体分离基金特征 / Capital	Capital Accumulation	成员可在两个或以上投资选项中自主选择即构成 CAP（DBPP 除外），且团体分离基金默认不提供身故保证。 / Any group retirement or savings plan where members

Accumulation Plan (CAP) Definition and Group Segregated Fund Features	Plan (CAP)	select among two or more investment options constitutes a CAP (excluding a DBPP), and group segregated funds offered within such plans generally carry no default death benefit guarantees.

自测提问（康奈尔左栏）

1. 发起方、管理方、成员、保险人四方的义务边界是什么？外包管理能否免除监督受托责任？ / What are the respective legal boundaries among the plan sponsor, administrator, member, and insurer, and can outsourcing daily management relieve the administrator of supervisory fiduciary duty?
2. DBPP、DCPP、DPSP、GRRSP、PRPP、群组 TFSA 在“谁供款”“是否锁定”“雇主供款是否当期应税”“是否产生 PA”四栏如何区分？ / How do DBPP, DCPP, DPSP, GRRSP, PRPP, and Group TFSA differ across the four core dimensions: who contributes, whether funds are locked in, whether employer contributions are taxable benefits, and whether a PA is generated?
3. DCPP 的 PA 怎么扣减次年 RRSP 空间？GRRSP 供款不产生 PA，它怎么影响个人 RRSP 额度？ / How does a DCPP Pension Adjustment (PA) reduce next year's RRSP room, and how do GRRSP contributions impact an individual's RRSP deduction limit without generating a PA?
4. 员工离职时 DCPP 与 DPSP/GRRSP 的资金去向有何不同？LIF 与 RRIF 的提取限制差在哪里？ / How do termination transfer destinations differ between locked-in DCPP funds and unlocked DPSP or GRRSP funds, and what is the distinction between LIF and RRIF withdrawal limits?
5. 考试口径的“两年归属、一层 CPP（YMPE）”与 BC 2026 现行的“即时归属、两层 CPP（YAMPE）”如何按题干切换作答？ / How should candidates switch between the exam standard (two-year vesting, single-tier CPP at YMPE) and current 2026 BC rules (immediate vesting, two-tier CPP with YAMPE) based on question stem cues?

总结：用自己的话写下：如何仅凭“员工能否供款、是否锁定、是否产生 PA”三个问题，把六类团体退休计划彻底分清。 / In your own words, summarize: how to definitively classify the six group retirement plans using only three core criteria: whether employees can contribute, whether funds are locked in, and whether a Pension Adjustment (PA) is generated.

第 28 章 · 寿险的法律框架 / Legal Framework Governing Life Insurance: Which Law BC Actually Uses

伦理与职业实践 / Ethics & Professional Practice　P1 必拿分 / Must score　Legal Framework · 模考 4 题

带着这几道题读：未持牌助理帮代理人打电话给潜在客户约时间谈保险，违法吗？ / Is it illegal for an unlicensed assistant to phone prospective clients to book insurance appointments on behalf of an agent?；100岁老人自己签投保单有效吗？17岁少年能自己买寿险吗？ / Is an application signed by a 100-year-old applicant legally valid, and can a 17-year-old purchase life insurance independently?；用两笔$9,000现金在24小时内交保费，代理人要向FINTRAC报告吗？ / Must an agent report to FINTRAC if a client pays premiums using two $9,000 cash payments within a 24-hour window?；母亲失能后，女儿拿着持续授权书复印件能直接把受益人改成自己吗？ / Can a daughter holding a photocopy of an Enduring Power of Attorney directly change the beneficiary to herself after her mother becomes incapacitated?；分居协议写了不准改受益人，前夫却偷改成再婚配偶，保险公司赔给谁？ / If a separation agreement bars beneficiary changes but an ex-husband secretly changes the beneficiary to his new spouse, to whom does the insurer pay the death benefit?

怎么考

- 情景定性题：给一段代理人或未持牌助理的日常动作（如代打电话约访、口头承诺核保必过），考你该行为属于哪一层法律管辖、是否构成越权或无牌招揽。 / Scenario characterization questions: Presenting daily actions of an agent or unlicensed assistant (such as phoning prospects to book appointments or verbally guaranteeing underwriting approval), testing which level of law governs the conduct and whether it constitutes ultra vires actions or unlicensed solicitation.
- 年龄与行为能力辨析题：混搭15岁、16岁、18岁、19岁与100岁高龄申请人，考你能否区分法定行为能力（Legal capacity）、自行投保最低年龄与受益人直接领款年龄。 / Age and legal capacity distinction questions: Combining 15-, 16-, 18-, 19-, and 100-year-old applicants, testing whether candidates can distinguish legal capacity, the minimum statutory age to contract for insurance on one's own life, and the age required for a beneficiary to receive proceeds directly.
- 文书权限与流程题：家属持普通授权书（Power of Attorney）或持续授权书（Enduring Power of Attorney）复印件要求变更受益人，考你四步实务流程、法院授权门槛及双口径差异。 / Legal documentation authority and procedural workflow questions: Presenting a family member holding an ordinary Power of Attorney or a photocopy of an Enduring Power of Attorney demanding a beneficiary change, testing the four-step practical workflow, court authorization thresholds, and dual-benchmark distinctions.
- 跨部门法冲突题：分居协议承诺保留前配偶为受益人但未办不可撤销指定（Irrevocable beneficiary designation），考你家庭法协议与保险法免责付款规则（s.77）谁在保单层面优先。 / Inter-statutory conflict questions: When a separation agreement promises to maintain an ex-spouse as beneficiary but no irrevocable beneficiary designation was filed, testing whether family law agreements or

高频陷阱（看到信号就警觉）

省管保险等于联邦无关 / Equating provincial insurance regulation with total federal irrelevance trap：题干或选项出现「寿险业务仅受省级立法管辖」或询问大额现金报告、基因检测禁令、跨省信息流适用哪一层法律。 / The question stem or options state that life insurance is governed solely by provincial legislation, or ask which level of law governs large cash reporting, genetic testing bans, or interprovincial data flows.

未持牌助理仅约见面不违规 / Assuming an unlicensed assistant only booking appointments commits no violation trap：题干出现未持牌雇员（unlicensed assistant）致电潜在客户约访、接收或转递申请、收取保费或制作寿险演示表。 / The question stem describes an unlicensed assistant telephoning prospects to book appointments, receiving or forwarding applications, collecting premiums, or preparing life insurance illustrations.

高龄老人推定无缔约能力 / Presuming elderly individuals lack contracting capacity trap：题干强调申请人年满100岁但神志清醒，或出现16岁、17岁未成年人为自己投保、18岁受益人领款等年龄数字。 / The question stem emphasizes that an applicant is 100 years old but mentally sharp, or presents ages such as a 16- or 17-year-old purchasing their own policy or an 18-year-old beneficiary collecting proceeds.

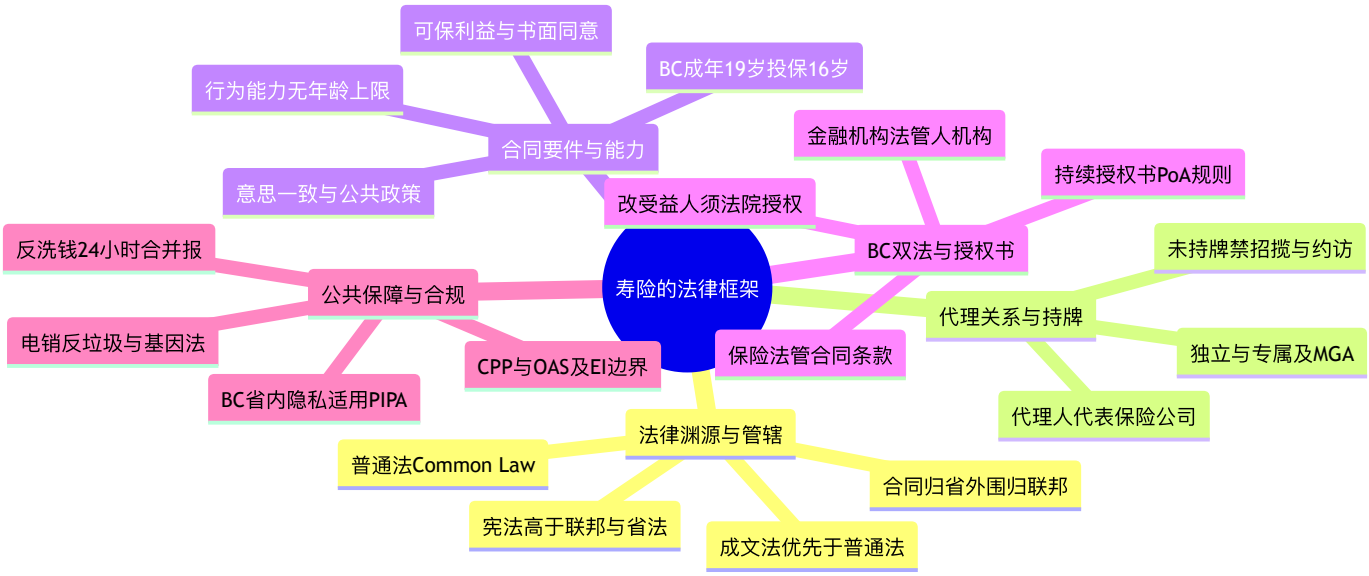
持授权书即可直接改受益人 / Assuming holding a Power of Attorney permits changing beneficiaries directly trap：题干出现授权人已因认知障碍失能、家属持普通授权书或持续授权书复印件要求将保单受益人改成自己。 / The question stem describes a donor who is incapacitated by cognitive impairment, with a family member presenting an ordinary PoA or a photocopy of an Enduring PoA demanding to change the policy beneficiary to themselves.

Insurance Act discharge of insurer rules (s.77) take priority at the policy level.

- 外围合规与公共保障筛查题：结合大额现金分拆交费、自雇客户申请就业保险（EI）病假给付或省内客户档案管理，考你PCMLTFA的24小时合并规则、PIPA适用边界及政府保障缺口。 / Perimeter compliance and public benefit screening questions: Combining split large cash premium payments, a self-employed client applying for Employment Insurance (EI) sickness benefits, or provincial client file management, testing the PCMLTFA 24-hour aggregation rule, PIPA jurisdictional boundaries, and public safety net gaps.

分居协议自动锁死保单受益人 / Assuming a separation agreement automatically locks policy beneficiaries trap：题干描述被保险人签有分居协议承诺不改受益人，但未向保险公司登记不可撤销指定，随后在线或书面改成了新配偶并身故。 / The question stem describes an insured who signed a separation agreement promising not to change the beneficiary, but never registered an irrevocable designation with the insurer, subsequently changing the beneficiary online or in writing to a new spouse before dying.

导图



第 28 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
法律渊源三层压制关系 / Three-Tier Hierarchy of Legal Sources	Constitution / Common law / Statute law	宪法压过联邦法与省法；普通法管合同与代理通则，但成文法（如各省保险法）一旦生效即在其管辖范围内优先于普通法。 / The Constitution overrides federal and provincial statutes; common law governs general contract and agency principles, but statute law (such as provincial insurance acts) prevails over common law within its scope once enacted.
代理关系与未持牌禁区 / Agency Relationship and Prohibited Unlicensed Activities	Principal / Agent / Unlicensed staff	寿险代理人代表委托人（保险公司）且权限受书面合同限制；代理行内凡涉及招揽、接收或转递申请、收保费、做演示表的雇员均须持牌。 / A life insurance agent represents the principal (the insurer) with authority circumscribed by the written agency contract; agency employees who solicit insurance, receive or forward applications, collect premiums, or prepare policy illustrations must be licensed.
法定行为能力与年龄界限 / Legal Capacity and Age Boundaries	Legal capacity / Age of majority	行为能力取决于缔约时能否理解条款与协议约束力，无最高年龄上限（100岁仍推定有能力）；BC成年年龄为19岁，但满16岁即可为自己投保。 / Legal capacity depends on whether an individual understands policy terms and the binding nature of the contract at execution, with no upper age limit (a 100-year-old is presumed capable); the BC age of majority is 19, but individuals aged 16 or older can contract for insurance on their own lives.
可保利益与书面同意例外 / Insurable Interest and the Written Consent Exception	Insurable interest	BC《Insurance Act》s.45(1)规定生效时缺乏可保利益的合同无效，但s.45(2)明确豁免团体保险及被保险人本人书面同意（未满16岁由父母同意）的情形。 / BC Insurance Act s.45(1) provides that a contract is void if insurable interest is lacking when it takes effect, but s.45(2) explicitly exempts group insurance and cases where the insured consents in writing (or parental consent if under age 16).
BC两部核心法的分工与监管机构 / Division Between BC Core Statutes and Regulatory Bodies	Insurance Act / Financial Institutions Act / BCFSA	《Insurance Act》管保险合同条款，《Financial Institutions Act》管人与机构行为；BC现行保险公司监管机构为BCFSA（取代旧称FICOM），代理人发牌机构为Insurance Council of BC。 / The Insurance Act governs contract terms, while the Financial Institutions Act governs market conduct and institutions; BC insurers are regulated by BCFSA (which replaced FICOM), and life agents are licensed by the Insurance Council of BC.
普通授权书与持续授权书及受益人限制 / Ordinary PoA versus Enduring PoA and Beneficiary Restrictions	Power of Attorney (PoA) / Enduring Power of Attorney	普通授权书在授权人丧失心智能力时终止，持续授权书须明写失能后继续有效；BC《Power of Attorney Act》s.20规定变更本人已有受益人指定须取得法院授权。 / An ordinary Power of Attorney terminates upon the donor's mental incapacity, whereas an Enduring Power of Attorney must explicitly state it continues after incapacity; BC Power of Attorney Act s.20 mandates court authorization to change the donor's existing beneficiary designations.
公共保障机制（CPP / OAS / GIS / EI） / Public Benefit Programs (CPP / OAS / GIS / EI)	CPP / OAS / GIS / Employment Insurance (EI)	CPP为劳资等额强制缴费型；OAS为非缴费型且应税，GIS为低收入OAS领取者的免税补充；EI病假最长26周按收入55%计（每周上限$729），自雇者不符合常规EI资格。 / The CPP is a mandatory contributory plan with equal employer-employee contributions; OAS is non-contributory and taxable, while GIS is a tax-free supplement for low-income OAS recipients; EI sickness benefits pay 55% of earnings up to 26 weeks (2026 weekly maximum $729), and self-employed individuals do not qualify for regular EI.
隐私法分工与反洗钱个人报告义务 / Privacy Law Division and Personal AML Reporting Duties	PIPEDA / PIPA / PCMLTFA / FINTRAC	BC省内私营商业活动适用实质相似的省法PIPA，跨省跨境或联邦企业适用PIPEDA；反洗钱报告义务主体是代理人本人，大额现金交易门槛$10,000含连续24小时合并规则。 / Intra-provincial private-sector commercial activity in BC is governed by the substantially similar provincial PIPA, while cross-border data flows or federal works fall under PIPEDA; under the PCMLTFA, reporting duties rest personally upon the agent, with a $10,000 large cash threshold subject to a 24-hour aggregation rule.
基因不歧视法与人权法边界 / Genetic Non-Discrimination and Human Rights Boundaries	Genetic Non-Discrimination Act (GNDA) / Bona fide grounds	GNDA禁止以接受基因检测或披露检测结果作为缔结或维持保险合同的前提；人权法下须对照具体受保护理由与法条核实善意且合理的依据（bona fide grounds）。 / The Genetic Non-Discrimination Act (GNDA) prohibits requiring genetic tests or disclosing test results as a condition of entering or maintaining an insurance

		contract; human rights legislation permits distinctions only where justified by bona fide and reasonable underwriting grounds.
受益人变更、免责付款与分居协议 / Beneficiary Revocation, Discharge of Insurer, and Separation Agreements	Irrevocable beneficiary / Discharge of insurer	未登记并送达不可撤销指定（s.60）时，后指定优先于先指定（s.61），保险人在主要办事处收到影响权利的书面文件前依现有记录付款即可免责（s.77）。 / Unless an irrevocable designation is recorded and delivered (s.60), a subsequent designation overrides an earlier one (s.61); an insurer is fully discharged (s.77) upon paying the recorded beneficiary before receiving written notice of competing claims at its principal office.

自测提问（康奈尔左栏）

1. 宪法、普通法与成文法在寿险业务里怎么分层？冲突时谁优先？ / How are the Constitution, common law, and statute law hierarchically structured in life insurance, and which takes precedence in a conflict?
2. 代理行里哪些具体动作必须持牌？寿险MGA和财险MGA有什么本质区别？ / Which specific activities in an insurance agency require a license, and what is the fundamental difference between a life MGA and a P&C MGA?
3. BC省15岁、16岁、18岁、19岁、100岁在投保、成年与领款上各怎么判？ / How do BC rules treat ages 15, 16, 18, 19, and 100 regarding purchasing insurance, reaching the age of majority, and collecting proceeds as a beneficiary?
4. 接到家属持授权书要求改受益人的电话，必须按哪四步走？BC省s.20怎么卡？ / What four practical steps must an agent follow when a family member presents a Power of Attorney to change a beneficiary, and how does BC s.20 restrict the change?
5. CPP、OAS、GIS、EI在缴费来源、应税性与自雇资格上如何区分？ / How do the CPP, OAS, GIS, and EI differ in terms of funding sources, taxability, and eligibility for self-employed individuals?

总结：用一句话总结BC寿险合同归哪部法管、人和机构归哪部法管，以及代理人碰到授权书改受益人与分居协议时的核心自保底线。 / In one sentence, summarize which statute governs BC life insurance contracts versus individuals and institutions, and state the agent's core compliance safeguards when handling Power of Attorney beneficiary changes and separation agreements.

第 29 章 · 保单条款与合同成立 / Insurance Policy Provisions

伦理与职业实践 / Ethics & Professional Practice　P1 必拿分 / Must score　Policy Provisions · 模考 4 题

带着这几道题读：保单已满2年但投保时故意隐瞒病史，保险公司还能拒赔撤单吗？ / Can an insurer still deny a claim and void the policy if the policy has been in force for over two years but medical history was deliberately concealed at application?；申请书上把年龄写小了三岁且漏报吸烟，理赔时这两项会怎么处理？ / How will an insurer handle a claim if the applicant understated their age by three years and also omitted their smoking status on the application?；保单因欠费失效后复效，复效后不到2年发生风险，限制期怎么算？ / If a policy lapses for non-payment and is reinstated, how are exclusionary periods calculated if an insured event occurs within two years of reinstatement?；离婚协议写明放弃对方保单权益，投保人能直接单方更换不可撤销受益人吗？ / Can a policyholder unilaterally change an irrevocable beneficiary if their separation agreement explicitly states that each spouse waives rights to the other's insurance policies?

怎么考

- 当事人身份与行权资格辨析题：给出投保人、被保险人、不可撤销受益人、雇主或持续授权书代理人等角色，考查谁有权变更受益人、申请保单贷款或变更保障额度。 / Distinction questions on party status and authority: Presenting roles such as policyholder, life insured, irrevocable beneficiary, employer, or attorney under an Enduring Power of Attorney, testing who has the authority to change beneficiaries, apply for policy loans, or modify coverage limits.
- 合同成立与生效节点判断：给出递交申请、缴纳首期保费、核保加费（反要约）、健康状况变化及交付保单等多个时间点，考查合同何时真正成立生效。 / Determining contract formation and effective dates: Presenting multiple milestones such as submitting the application, paying the initial premium, underwriting ratings (counter-offers), changes in health status, and policy delivery, testing when the contract actually takes legal effect.
- 时间轴与法定条款机制推演：将误报年龄、善意误述、故意隐瞒（欺诈）、自杀、宽限期身故及复效放到2年时间轴上，判断保险公司应当拒赔、退费还是调整保额。 / Timeline deduction on statutory provision mechanics: Placing misstatement of age, innocent misrepresentation, intentional non-disclosure (fraud), suicide, death during the grace period, and policy reinstatement onto a two-year timeline, testing whether the insurer must deny the claim, refund premiums, or adjust the face amount.
- 受益人指定与债权人保护情景题：结合离婚协议、未送达总部的变更表、同时死亡或将受益人指定为遗产，判断保险金归属及是否享有免于债权人扣押的保护。 / Scenario questions on beneficiary designations and creditor protection: Integrating separation agreements, change forms not delivered to head office, simultaneous death, or designating the estate as beneficiary, testing the entitlement to insurance proceeds and eligibility for statutory exemption from seizure by creditors.
- 全国考试口径与BC省成文法双口径对比：针对保单质押是否须不可撤销受益人同意、冷静期依据、替换披露及持续授权书变更受益人等考点，考查全国统一考试口径与BC现行法的差

高频陷阱（看到信号就警觉）

误把单一节点当生效日 / Mistaking a single milestone for the effective date trap：题干罗列申请日、核保日、交付日、补缴保费日，或提到核保后保单条件发生改变（加费、除外、降额）但客户尚未签字确认。 / The question stem lists application, approval, delivery, and premium payment dates, or notes that underwriting modified policy terms (ratings, exclusions, reduced face amount) without signed client acceptance.

混淆年龄误报与健康误述 / Confusing misstatement of age with health misrepresentation trap：题干同时出现出生年份写错与隐瞒吸烟或健康状况，询问保险公司在理赔调查发现后的处理方式。 / The question stem combines an erroneous birth year with non-disclosure of smoking or health conditions, asking how the insurer will handle the claim upon discovery during investigation.

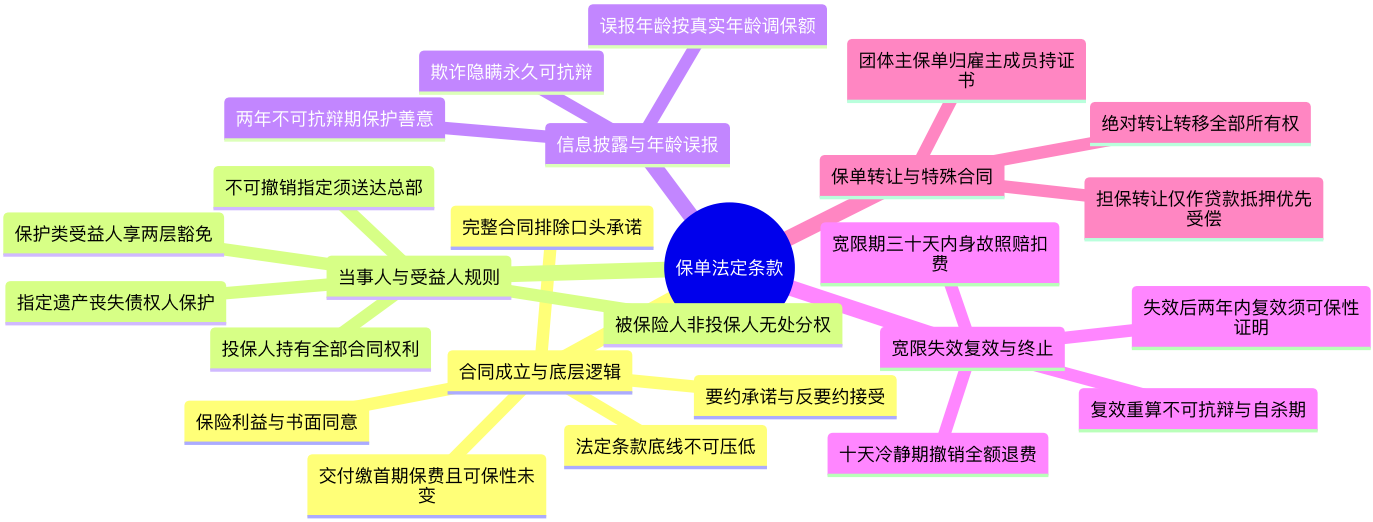
误认不可抗辩期保护欺诈 / Assuming the incontestability period protects fraud trap：题干一边强调保单已生效满2年以上，一边使用明知故犯、故意隐瞒（deliberately omit）等指向主观欺诈的措辞。 / The question stem emphasizes that the policy has been in force for over two years while using phrases indicating subjective fraud such as knowingly, deliberately omitted, or intentional concealment.

误以为离婚或交代理人即改受益人 / Assuming divorce or handing forms to an agent changes the beneficiary trap：题干出现离婚协议放弃保单权益、变更表留在代理人抽屉里未寄达保险公司总部，随后被保险人身故。 / The question stem features a divorce agreement waiving policy rights or a change form left in an agent's drawer without reaching the insurer's head office, followed by the death of the life insured.

异。 / Comparative questions on national exam standards versus BC statutory law: Testing distinctions between national uniform exam standards and current BC statutory law regarding whether collateral assignment requires irrevocable beneficiary consent, the legal basis of the rescission period, policy replacement disclosure, and beneficiary changes under an Enduring Power of Attorney.

忽视复效后限制期重新起算 / Overlooking that reinstatement restarts exclusionary periods trap：题干描述一份持有多年的老保单因欠费超过宽限期而失效，复效后不足2年内发生自杀或被发现复效申请存在重大误述。 / The question stem describes an older policy held for years that lapsed after missing the grace period, followed by suicide or discovery of material misrepresentation within two years of reinstatement.

导图



第 29 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
完整合同原则 / Entire Contract Principle	Entire contract	申请书、保单、附件及事后书面批注共同构成完整合同（BC s.41、s.42），代理人的任何口头承诺均不在合同内。 / The application, policy, attached documents, and subsequent written endorsements together constitute the entire contract (BC Insurance Act ss.41, 42); verbal promises made by an agent are excluded from the contract.
保险利益与同意 / Insurable Interest and Written Consent	Insurable interest	合同生效时原则上须有可保利益，但团体保险或成年被保险人书面同意的合同不因缺乏可保利益而无效（BC s.45），未满16岁可由父母同意。 / An insurable interest must generally exist when a contract takes effect, but group insurance or contracts where an adult life insured consents in writing are not void for lack of insurable interest (BC Insurance Act s.45); minors under 16 can be consented for by a parent.
合同生效与反要约 / Contract Formation and Counter-Offers	Counter-offer	默认须满足保单交付、缴纳首期保费且申请至交付期间可保性未变（BC s.48）；若核保改变条件（如加费、除外）则构成反要约，须客户重新接受方成立。 / By default, coverage requires policy delivery, initial premium payment, and unchanged insurability between application and delivery (BC Insurance Act s.48); if underwriting modifies terms (ratings or exclusions), it constitutes a counter-offer requiring client acceptance before taking effect.
不可抗辩期与欺诈例外 / Incontestability Period and Fraud Exception	Incontestability period	保单在被保险人在世期间生效满2年后，善意误述不再使合同可撤销，但欺诈（故意隐瞒）永远不受2年不可抗辩期保护（BC s.51、s.52）。 / After a policy has been in force during the lifetime of the insured for two years, innocent misrepresentation no longer renders the contract voidable, but fraud (intentional non-disclosure) is never protected by the two-year incontestability period (BC Insurance Act ss.51, 52).
误报年龄与误报吸烟对比 / Misstatement of Age versus Misrepresentation of Smoking	Misstatement of age	误报年龄通常不撤单，而是按同样保费在真实年龄下本可购得的保额调整给付（BC s.54）；误报吸烟属于核保实质性事实，走误述撤单与不可抗辩轨道。 / Misstating age generally does not void the contract, but adjusts the death benefit to what the premiums paid would have purchased at the true age (BC Insurance Act s.54); misrepresenting smoking status is a material fact subject to policy rescission and the incontestability rules.
宽限期与复效重算 / Grace Period and Reinstatement Timelines	Grace period & Reinstatement	保费逾期享有至少30天宽限期（工业险28天），期内身故照赔并扣未缴保费（BC s.50）；失效后2年内复效须补齐欠费利息并提供可保性证明，且不可抗辩期与自杀限制期均从复效日重新起算（BC s.56、s.57）。 / Overdue premiums enjoy a minimum 30-day grace period (28 days for industrial insurance), during which death claims are paid minus overdue premiums (BC Insurance Act s.50); reinstatement within two years of lapse requires paying overdue premiums with interest and providing evidence of insurability, restarting both the incontestability and suicide periods from the reinstatement date (BC Insurance Act ss.56, 57).
不可撤销受益人 / Irrevocable Beneficiary Designations	Irrevocable beneficiary	须在被保险人在世期间以书面指定送达保险公司总部方生效（BC s.60(1)），生效后变更受益人、退保或保单贷款均须其书面同意，且离婚不会自动解除该指定。 / An irrevocable designation takes effect only when filed in writing with the insurer's head office during the life insured's lifetime (BC Insurance Act s.60(1)); subsequent beneficiary changes, surrenders, or policy loans require the irrevocable beneficiary's written consent, and divorce does not automatically revoke the designation.
免于债权人追偿的两层保护 / Two-Tier Exemption from Creditor Seizure	Exemption from seizure	指定受益人可使身故保险金不入遗产并免于投保人债权人追偿（BC s.65(1)）；指定配偶、子女、孙辈或父母（保护类受益人）还可使保单在投保人在世期间免于扣押（BC s.65(2)）。 / Naming any beneficiary keeps death proceeds outside the estate and exempt from the policyholder's creditors (BC Insurance Act s.65(1)); naming a spouse, child, grandchild, or parent (preferred family class) also exempts the policy from seizure during the policyholder's lifetime (BC Insurance Act s.65(2)).
保险人付款免责与同时死亡 / Insurer Payment Discharge and Simultaneous Death	Payment discharge & Simultaneous death	保险公司在其主要办事处收到变更文件前按现有记录付款即可免责（BC s.77）；被保险人与受益人同时死亡且顺序不明时，推定受益人先于被保险人死亡（BC s.83）。 / An insurer is fully discharged by paying according to its records before receiving contrary documentation at its principal office (BC Insurance Act s.77); when the life insured and beneficiary die simultaneously and the order of death is uncertain, the beneficiary is presumed to have died first (BC Insurance Act s.83).

绝对转让与担保转让 / Absolute Assignment versus Collateral Assignment	Absolute assignment & Collateral assignment	绝对转让转移保单全部所有权并可能触发税务处置；担保转让仅将保单作为贷款抵押，不触发税务处置，身故时未偿贷款余额优先受偿（BC s.66）。 / An absolute assignment transfers all policy ownership rights and may trigger a taxable policy disposition; a collateral assignment merely pledges the policy as loan security without triggering a disposition, granting the lender priority repayment for the unpaid loan balance at death (BC Insurance Act s.66).

自测提问（康奈尔左栏）

1. 为什么保险公司在保单里写「宽限期15天」无效，写「宽限期31天」却有效？ / Why is a policy clause providing a 15-day grace period invalid, while a clause providing a 31-day grace period is legally valid?
2. 核保按原条件通过与核保要求加费，在合同成立的最后一步有什么本质区别？ / What is the fundamental difference in the final step of contract formation between an approval as applied for and an approval with a rating?
3. 同样是在申请书上填错，为什么写错年龄只是调保额，写错吸烟状态却可能导致拒赔撤单？ / Why does misstating age on an application result only in an adjusted face amount, whereas misstating smoking status can lead to claim denial and policy rescission?
4. 不可撤销受益人指定生效后，离婚协议、退保贷款和保单质押分别受什么限制？ / Once an irrevocable beneficiary designation takes effect, how are separation agreements, policy surrenders or loans, and collateral assignments restricted?
5. 保单因欠费失效后再复效，对不可抗辩期和自杀条款的起算点会产生什么影响？ / When a policy lapses for non-payment and is subsequently reinstated, what effect does this have on the start dates of the incontestability and suicide periods?

总结：用三句话总结：一份寿险保单从要约到生效要跨过哪几道门槛、出险理赔时如何按时间轴判断误述与自杀的后果、以及受益人指定与转让如何决定保险金最终流向谁。 / In three sentences, summarize the hurdles a life insurance policy must clear from offer to taking effect, how misrepresentation and suicide outcomes are evaluated along a timeline at claim time, and how beneficiary designations and assignments determine who ultimately receives policy proceeds.

第 30 章 · 理赔与给付 / Claims and Payment of Proceeds

伦理与职业实践 / Ethics & Professional Practice　P1 必拿分 / Must score　Claims & Payment · 模考 4 题

带着这几道题读：保险人收到死亡通知后有义务主动找受益人吗？何时必须在30天内付款？ / Is an insurer obligated to actively seek out beneficiaries after receiving notice of death, and when must payment be made within 30 days?；被保险人失踪后必须等满7年才能申请推定死亡吗？停缴保费有何后果？ / Must a family wait 7 years after an insured disappears before applying for a presumption of death, and what are the consequences of stopping premium payments?；同一事故中受益人与被保险人先后不明或晚死3天，保单和遗产怎么分？ / How are life insurance proceeds and estate assets distributed when an insured and beneficiary die in the same accident with sequence uncertain or 3 days apart?；个人A&S理赔的通知、交表、证明和误工给付各必须在多少天内完成？ / Within how many days must notice, claim forms, proof of claim, and loss-of-time payments be completed for individual A&S claims?；前配偶与遗嘱新受益人争抢保险金时，保险人与代理人各应如何处理？ / How should an insurer and an agent respond when a former spouse and a new beneficiary named in a will assert competing claims to insurance proceeds?

怎么考

- 举证要件与两套时钟辨析题：给出受益人提交材料或拖延起诉的时间线，测试能否区分保护客户的付款时钟（四项充分证据齐备后 30 天内给付）与保护保险人的起诉时效时钟（证据提交后 2 年与死亡后 6 年取较早者，推定死亡宣告后另计 2 年）。 / Distinction questions on evidentiary requirements and the two time clocks: Presenting timelines where beneficiaries submit materials or delay legal action, testing the ability to distinguish between the client-protecting payment clock (payment within 30 days once all four items of sufficient proof are received) and the insurer-protecting limitation clock (the earlier of 2 years after submitting proof or 6 years after death, with a separate 2-year period following a declaration of presumption of death).
- 失踪与推定死亡双口径场景题：通过登山失联或空难等案情，测试考试口径的 7 年失踪通则、有充分间接证据时无需等待的例外（对比 BC《Presumption of Death Act》s.3 无固定年限的三要件），以及失踪期间必须继续缴费以维持保单有效（in force）的核心风控。 / Scenario questions on the dual standards for disappearance and presumption of death: Using circumstances such as hikers missing in the mountains or aviation disasters to test the exam standard general 7-year disappearance rule, exceptions where sufficient circumstantial evidence removes the waiting period (compared with the three criteria under BC Presumption of Death Act s.3 which has no fixed time requirement), and the core risk control requirement of continuing premium payments during the disappearance to keep the policy in force.
- 同时死亡与受益人顺位归属题：设计被保险人与主要受益人在同一事故中当场身故或相隔数日身故的场景，测试保险金适用《Insurance Act》s.83（同时死亡或先后不明时视受益人先死）且明文排除《Wills, Estates and Succession Act》五日生存规则（five-day survival rule）的去向判断。 / Questions on simultaneous death and beneficiary priority: Designing scenarios where the life insured and primary

高频陷阱（看到信号就警觉）

失踪七年门槛与保单失效陷阱 / Seven-year disappearance threshold and policy lapse trap：题干出现失踪（disappearance）、空难或灾难事故，或提到家属在失踪期间考虑停缴保费（stop paying premiums）。 / The question stem features a disappearance, air crash, or catastrophic accident, or mentions family members considering stopping premium payments during the absence.

付入法院当作拒赔手段 / Mistaking payment into court for claim denial trap：题干出现两位以上索赔人各执一份指定文件争抢保险金，或询问保险人在承认责任但归属不明时的法定救济通道。 / The question stem describes two or more claimants presenting conflicting designation documents to claim proceeds, or asks for the statutory remedy when an insurer admits liability but entitlement remains disputed.

A&S付款时限一刀切60天 / Assuming a blanket 60-day A&S payment deadline trap：题干涉及个人 A&S 保单理赔，并具体区分是伤残收入/误工给付（loss of time）还是一次性非误工给付。 / The question stem involves an individual A&S claim and differentiates between disability income or loss-of-time benefits versus a lump-sum non-loss-of-time benefit.

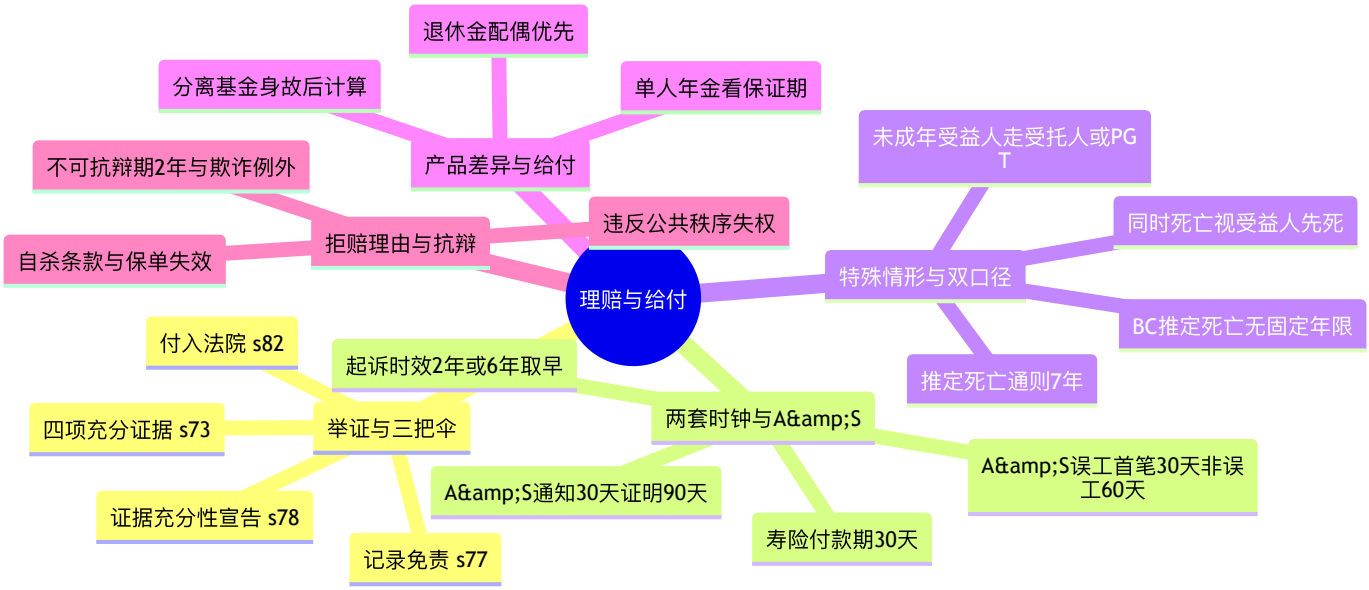
同时死亡套用五日生存规则 / Applying the five-day survival rule to simultaneous death trap：题干同时出现房产/遗产与人寿保单，或写明被保险人与受益人在同一场事故中一先一后（如相隔 3 天）去世。 / The question stem involves both real property or estate assets and life insurance, or specifies that the life insured and beneficiary died sequentially (e.g., 3 days apart) from injuries in the same accident.

beneficiary die at the same time or several days apart in the same accident, testing distribution determinations under Insurance Act s.83 (presuming the beneficiary died first in simultaneous death or uncertain sequence) and the explicit exclusion of the five-day survival rule under the Wills, Estates and Succession Act.

- 多方争抢与三把保护伞实务题：前配偶与遗嘱新受益人同时主张权利时，测试记录免责（s.77 总部收到书面文件前按原记录付款免责）、付入法院（s.82 承认付款责任但存在相争索赔人时交由法院裁断）与证据充分性宣告（s.78）的适用前提，以及代理人如实告知冲突、不预判结果的职业义务。 / Practical questions on competing claimants and the three safe harbours: When a former spouse and a new beneficiary named in a will assert competing claims, testing the preconditions for the record discharge rule (s.77 discharging the insurer for payments made per existing records before head office receives contrary written documents), payment into court (s.82 surrendering funds for judicial determination when admitting liability with adverse claimants), and a declaration as to sufficiency of proof (s.78), alongside the agent's professional duty to disclose conflicts objectively without predicting outcomes.
- 拒赔抗辩与跨产品给付规则题：结合自杀条款、2 年不可抗辩期（欺诈除外）、违反公共秩序失权（不问受益人动机与是否知情）、个人 A&S 法定条件天数（30/15/90 天及误工首笔 30 天 vs 非误工 60 天）、分离基金死后计价与单人终身年金保证期，测试哪笔钱能赔、付给谁及何时付。 / Questions on claim denial defenses and cross-product payout rules: Combining suicide clauses, the 2-year incontestability period (except fraud), forfeiture for acts contrary to public order (regardless of beneficiary motive or knowledge), statutory condition timelines for individual A&S (30/15/90 days, and 30 days for initial loss-of-time benefits versus 60 days for non-loss-of-time), post-death segregated fund valuation, and single-life annuity guarantee periods to test which benefits are payable, to whom, and when.

> **不知情受益人免于公序失权 / Assuming an unknowing beneficiary avoids public order forfeiture trap**：题干强调致死受益人「事先不知道自己是保单受益人」或「并非为了保险金作案」，并询问保险人能否向其拒付。 / The question stem emphasizes that the beneficiary who caused the death was unaware of being named beneficiary or did not commit the crime for insurance money, asking whether the insurer can refuse payment.

导图


理赔与给付
产品差异与给付
退休金配偶优先
分离基金身故后计算
单人年金看保证期
拒赔理由与抗辩
不可抗辩期2年与欺诈例外
自杀条款与保单失效
违反公共秩序失权
特殊情形与双口径
未成年受益人走受托人或PGT
同时死亡视受益人先死
BC推定死亡无固定年限
推定死亡通则7年
两套时钟与A&S
A&S误工首笔30天非误工60天
寿险付款期30天
A&S通知30天证明90天
起诉时效2年或6年取早
举证与三把伞
付入法院 s82
四项充分证据 s73
证据充分性宣告 s78
记录免责 s77

第 30 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
寿险四项充分证据与付款时钟 / Four Proof of Claim Elements and the 30-Day Payment Clock	Proof of claim and 30-day payment period	保险人收到给付事件已发生、被保险人年龄、索赔人受领权、受益人姓名与年龄四项充分证据后，必须在 30 天内付款（BC《Insurance Act》s.73）。 / Upon receiving sufficient proof of the occurrence of the insured event, the age of the life insured, the claimant's right to receive payment, and the name and age of the beneficiary, the insurer must pay the insurance money within 30 days (BC Insurance Act s.73).
三把保护伞的适用前提 / Preconditions for the Three Safe Harbours	Payment into court / Sufficiency of proof	记录免责（s.77）保护总部收到变更文件前的付款；证据充分性宣告（s.78）仅争证据够不够格；付入法院（s.82）以承认付款责任且出现相争索赔人等法定情形为前提。 / The record discharge rule (s.77) protects payments made per existing records before head office receives contrary documents; a declaration as to sufficiency of proof (s.78) resolves disputes solely over whether evidence is adequate; payment into court (s.82) strictly requires admitting liability to pay alongside statutory circumstances such as adverse claimants.
起诉时效时钟 / Limitation Clock for Legal Action	Limitation period	就寿险或 A&S 身故保险金起诉保险人，须在证据提交后 2 年与死亡后 6 年中较早届满的期限内提起（s.76、s.104(1)）；推定死亡宣告后另计 2 年（s.76(2)）。 / An action against an insurer for life insurance or A&S death proceeds must be commenced within the earlier of 2 years after furnishing proof of claim or 6 years after the date of death (ss.76, 104(1)); following a court declaration of presumption of death, a separate 2-year limitation period runs from the declaration date (s.76(2)).
失踪与推定死亡双口径 / Dual Standards for Disappearance and Presumption of Death	Presumption of death	考试口径通则为失踪满 7 年可申请法院裁定死亡（有充分间接证据时无需等待），而 BC《Presumption of Death Act》s.3 按三要件判断且无固定年限门槛；失踪期间须继续缴费维持保单有效。 / The general exam rule provides that an application for a declaration of death can be made after 7 years of absence (with no waiting period where sufficient circumstantial evidence exists), whereas BC Presumption of Death Act s.3 applies three statutory criteria without a fixed time threshold; premiums must continue to be paid during the absence to keep the policy in force.
同时死亡与五日生存规则双轨 / Dual Tracks of Simultaneous Death and the Five-Day Survival Rule	Simultaneous deaths / Five-day survival rule	除合同另有规定外，被保险人与受益人同时死亡或先后不明时，保险金按受益人先死处理（s.83），且明文不适用遗产法 WESA s.10 的五日生存规则（WESA s.11）。 / Unless the contract provides otherwise, where the life insured and a beneficiary die at the same time or in circumstances where the order of death is uncertain, insurance proceeds are distributed as if the beneficiary predeceased the life insured (s.83), and the five-day survival rule under estate law (WESA s.10) is explicitly inapplicable to insurance money (WESA s.11).
未成年受益人受领通道 / Payment Channels for Minor Beneficiaries	Minor beneficiary / Public Guardian and Trustee	考试口径提某些省可能要求付入法院，而在 BC 保险人须将未成年受益人的款项付给指定受托人，无受托人则付给公共监护与受托人办公室（s.88）；年满 18 岁者直接付给本人（s.88(4)）。 / While exam materials note that some provinces may require payment into court, in BC the insurer must pay a minor beneficiary's proceeds in trust to a designated trustee, or to the Public Guardian and Trustee if no trustee exists (s.88); beneficiaries aged 18 or older are paid directly as adults (s.88(4)).
个人 A&S 理赔法定条件时限 / Statutory Condition Timelines for Individual A&S Claims	Notice and proof of claim (A&S)	个人 A&S 须在 30 天内书面通知、保险人 15 天内给表、90 天内交证明；考试口径通则 60 天内付款，BC 法定条件分为非误工给付 60 天、误工给付首笔 30 天且此后每 60 天至少一次。 / Individual A&S requires written notice of claim within 30 days, insurer provision of claim forms within 15 days, and proof of claim within 90 days; the general exam rule requires payment within 60 days, whereas BC statutory conditions provide 60 days for non-loss-of-time benefits and 30 days for initial loss-of-time benefits, payable at least once every 60 days thereafter.
分离基金与年金身故给付特征 / Death Benefit Features of Segregated Funds and Annuities	Segregated fund death benefit / Guarantee period	分离基金身故给付在身故后计算，受市场波动影响；单人终身年金若已进入给付期且无剩余保证期（guarantee period），受保人身故后无后续给付；退休金类合资格配偶优先于指定受益人。 / Segregated fund death benefits are calculated after death and fluctuate with market performance; a single-life annuity in the payout phase with no remaining guarantee period ceases with no further payments upon the annuitant's death; for pension-derived funds a qualifying spouse has priority over named beneficiaries.

不可抗辩期、自杀与公共秩序拒赔 / Incontestability Period, Suicide, and Public Order Denials	Incontestability / Suicide / Public order	合同生效满 2 年后善意误述不可撤销但欺诈除外（s.52）；自杀条款在约定年限（通常生效或复效后 2 年）内有效（s.56）；受益人违法致被保险人死亡触发公共秩序失权，不问动机与是否知情，但仅挡该名受益人。 / Innocent misrepresentation no longer renders a contract voidable after 2 years in force during the insured's lifetime, but fraud remains permanently contestable (s.52); suicide exclusion clauses are valid during the contracted period, typically 2 years from issue or reinstatement (s.56); an unlawful act causing the insured's death triggers public order forfeiture regardless of motive or knowledge, barring that specific beneficiary without voiding the underlying contract.
代理人理赔协助边界与争议三级路径 / Agent's Role in Claims and the Three-Tier Dispute Escalation	Agent's role in claims / OLHI	保险人无主动通知受益人的法定义务，代理人应协助定位受益人、解释材料清单与两套时钟，但绝不能预判理赔结果或替相争索赔人站队；争议依次走内部投诉、OLHI（独立审视建议，不发牌不罚款）与法院诉讼。 / An insurer has no statutory duty to proactively notify beneficiaries, and agents should assist in locating beneficiaries and explaining documentation requirements and the two clocks, but must never predict claim outcomes or take sides between adverse claimants; disputes escalate through internal complaints, the OmbudService for Life & Health Insurance (OLHI, providing independent recommendations without licensing or fining authority), and court litigation.

自测提问（康奈尔左栏）

1. BC《Insurance Act》s.73 要求哪四项证据齐备才启动 30 天付款时钟？ / Which four items of proof under BC Insurance Act s.73 must be fully satisfied to start the 30-day payment clock?
2. s.77 记录免责、s.78 证据充分性宣告与 s.82 付入法院各自的前提是什么？ / What are the respective preconditions for section 77 record discharge, section 78 declaration of sufficiency of proof, and section 82 payment into court?
3. 失踪推定死亡与个人 A&S 付款时限在考试口径与 BC 成文法之间有何差异？ / What distinctions exist between the general exam standard and BC statutory law regarding presumed death from disappearance and individual A&S payment timelines?
4. 为什么同一场车祸中受益人晚死 3 天，房产与寿险保险金会流向不同的人？ / Why do real estate and life insurance proceeds flow to different recipients when a beneficiary survives the life insured by three days following the same accident?
5. 受益人违法致被保险人身故但事先不知自己是受益人，保单如何处理？ / How is a life insurance claim handled when a beneficiary unlawfully causes the insured's death without knowing they were named as beneficiary?

总结：用三句话总结本章核心：第一句写四项举证门与两套时钟（30天付款期 vs 2年/6年取较早的起诉时效），第二句写三把保护伞（s.77/s.78/s.82）的边界，第三句写失踪、同时死亡与未成年受益人的考场及BC双口径。 / In three sentences, summarize the core of this chapter: first, describe the four proof-of-claim hurdles and the two opposing time clocks (the 30-day payment deadline versus the earlier-of-2-years-or-6-years lawsuit limitation); second, outline the boundaries and preconditions of the three insurer safe harbours (ss.77, 78, and 82); and third, state the exam general rules versus BC statutory distinctions for disappearance, simultaneous death, and minor beneficiaries.

第 31 章 · 保护客户的机构 / Bodies That Protect the Client

伦理与职业实践 / Ethics & Professional Practice　P2 稳住 / Hold steady　Client Protection Bodies · 模考 3 题

带着这几道题读：联邦 OSFI 与省 Insurance Council 各管什么？ / What are the respective regulatory mandates of federal OSFI and the provincial Insurance Council?；BC 管代理人回佣与搭售的条文写在哪部法里？ / Which statute contains BC's provisions governing agent rebating and tied selling?；保险公司破产时 Assuris 给付怎么算？ / How are Assuris benefit protections calculated when an insurer becomes insolvent?；客户拆单交现金怎样触发 FINTRAC 报告？ / How does splitting cash payments trigger FINTRAC reporting under anti-money laundering rules?；客户对理赔不满与举报代理人违规各找谁？ / Where should clients turn for claim dissatisfaction versus reporting agent misconduct?

怎么考

- 机构职能配对题：给出一宗具体事件（如保险公司偿付能力审查、代理人误导销售、客户服务争议），要求判断应当由 OSFI、BCFSA、Insurance Council of BC 还是 OLHI 介入，核心考「联邦管钱、省管人、投诉找监察、破产找基金」的分工边界。 / Institutional mandate matching questions: Given a specific scenario (such as an insurer solvency review, agent sales misconduct, or a client service dispute), candidates must determine whether OSFI, BCFSA, the Insurance Council of BC, or OLHI has jurisdiction, testing the division of responsibilities: the federal government regulates financial soundness, the province regulates individuals, complaints go to the ombudservice, and insolvencies are protected by the compensation fund.
- BC 立法渊源辨析题：询问在 BC 规范代理人回佣、强制搭售、持牌与罚则的实体法条写在哪部法律中，专门测试考生能否避开《Insurance Act》的字面诱惑而正确选出《Financial Institutions Act》（FIA）。 / BC statutory source distinction questions: Asking which statute in BC contains the substantive provisions governing agent rebating, tied selling, licensing, and penalties, testing whether candidates avoid the literal distraction of the Insurance Act and correctly choose the Financial Institutions Act (FIA).
- Assuris 破产保护计算与顺位题：给出保单的死亡给付、现金价值或月收入金额，要求按「保底金额或比例取高者（whichever is higher）」计算受保护利益，或考察清算人（liquidator）先行转移保单、给付削减时 Assuris 才兜底的程序顺位。 / Assuris insolvency protection calculation and procedural order questions: Given a policy's death benefit, cash value, or monthly income amount, candidates must calculate the protected benefits based on whichever is higher between the fixed dollar threshold and the percentage, or evaluate the procedural order where the liquidator first attempts to transfer policies and Assuris provides protection only if benefits are cut.
- 反洗钱（FINTRAC）触发与时限题：围绕 $10,000 现金或虚拟货币门槛、连续 24 小时合并窗口（24-hour rule）、可疑交易报告（STR）与大额现金交易报告（LCTR）的不同提交时限设题，检验考生是否把「触发窗口」与「上报期限」混为

高频陷阱（看到信号就警觉）

联邦与省级监管错位（OSFI vs 省级机构） / Misallocating Federal and Provincial Jurisdiction (OSFI vs Provincial Bodies)：题干出现「licensing」「agent misconduct」「disciplinary action」等个人执业字眼时必找 Insurance Council of BC；出现「financial soundness of federally registered insurer」找 OSFI；出现「business authorization in BC」找 BCFSA。 / When the stem mentions individual practice terms like 'licensing', 'agent misconduct', or 'disciplinary action', look for the Insurance Council of BC; when it mentions 'financial soundness of federally registered insurer', look for OSFI; when it mentions 'business authorization in BC', look for BCFSA.

BC 保险法与金融机构法张冠李戴（Insurance Act vs FIA） / Confusing BC Insurance Act with Financial Institutions Act (Insurance Act vs FIA)：题干同时出现「British Columbia」与「statutory provisions governing agents / rebating / tied selling」时，答案一定指向《Financial Institutions Act》而非《Insurance Act》。 / When the stem mentions 'British Columbia' alongside 'statutory provisions governing agents / rebating / tied selling', the answer must point to the Financial Institutions Act, not the Insurance Act.

投诉调解与纪律处分越权（OLHI vs Insurance Council） / Overstepping Authority Between Dispute Mediation and Discipline (OLHI vs Insurance Council)：题干问「revoke licence / impose fine」选省监管机构（Insurance Council）；问「unresolved dispute after receiving a final position letter」选 OLHI。 / When the stem asks to 'revoke licence / impose fine', choose the provincial regulator (Insurance Council); when it asks about an 'unresolved dispute after receiving a final position letter', choose OLHI.

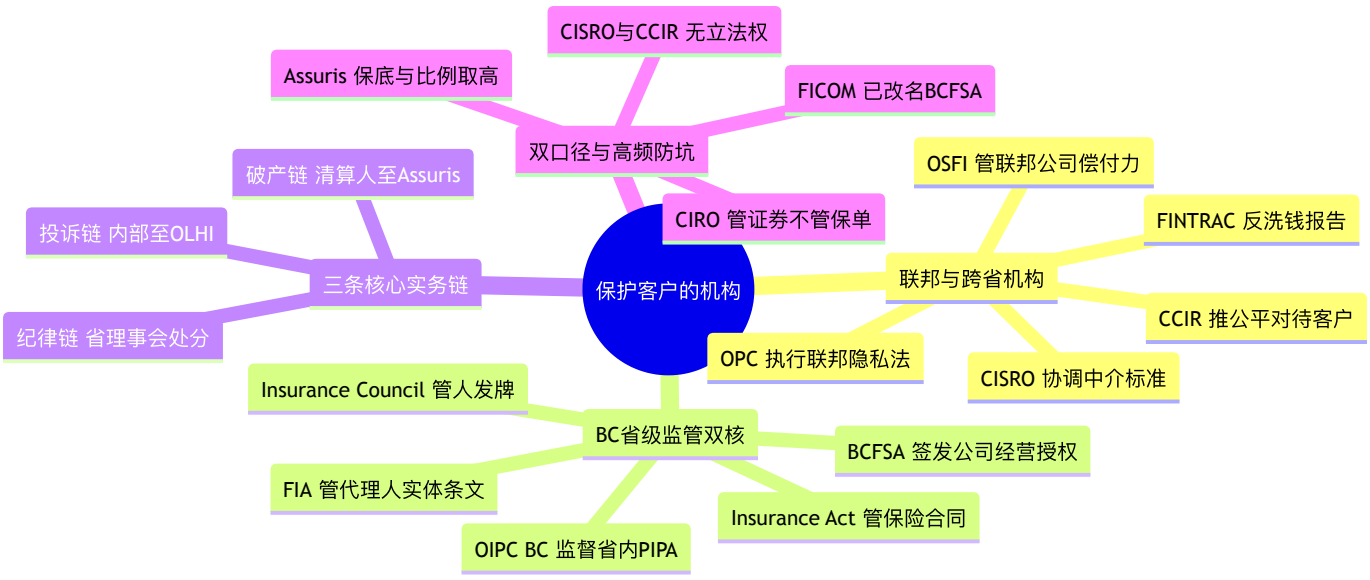
一谈。 / FINTRAC anti-money laundering threshold and deadline questions: Scenarios centered on the $10,000 cash or virtual currency threshold, the 24 consecutive hour aggregation rule (24-hour rule), and different submission deadlines for Suspicious Transaction Reports (STR) and Large Cash Transaction Reports (LCTR), testing whether candidates confuse the aggregation trigger window with the submission reporting deadline.

- 跨省协调与跨模块机构边界题：考察 CISRO 与 CCIR 是否具备立法权，或区分分离基金（segregated funds）与共同基金（mutual funds）在监管线（保险监管 vs CIRO）及破产保护基金（Assuris vs CIPF）上的归属差异。 / Interprovincial coordination and cross-sectoral jurisdictional boundary questions: Testing whether CISRO and CCIR possess legislative powers, or distinguishing between segregated funds and mutual funds regarding regulatory oversight (insurance regulation vs CIRO) and insolvency protection funds (Assuris vs CIPF).

Assuris 保障上限算反或顺位颠倒 / Inverting Assuris Protection Limits or Reversing Procedural Order：题干出现「insurer insolvency / Assuris protection」时，先看是否考察自动覆盖与清算人转移保单顺位；若算金额，用「max(固定门槛, 比例×原利益)」且不超过原合同利益。 / When the stem mentions 'insurer insolvency / Assuris protection', first check if it tests automatic coverage and the liquidator's transfer order; if calculating an amount, use max(fixed threshold, percentage * original benefit) not exceeding the original contractual benefit.

FINTRAC 24小时触发窗口与报告时限混淆 / Confusing FINTRAC 24-Hour Aggregation Window with Reporting Deadlines：题干出现两笔低于 $10,000 但合计达到或超过 $10,000 的交易时，紧盯「within 24 consecutive hours」判断触发；出现「when must the report be submitted」时按报告类别区分时限。 / When the stem presents multiple transactions under $10,000 that total $10,000 or more, focus on 'within 24 consecutive hours' to verify triggering; when asked 'when must the report be submitted', apply the specific deadline for that report type.

导图



第 31 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
OSFI 与省级监管的核心分工 / Core Division Between OSFI and Provincial Regulators	financial soundness vs licensing and market conduct	OSFI 依《Insurance Companies Act》监管联邦注册寿险公司的财务稳健性（偿付能力），不负责保险代理人的持牌、执业规范与纪律监督。 / Under the Insurance Companies Act, OSFI monitors the financial soundness (solvency) of federally registered life insurers, and does not licence, regulate, or discipline insurance agents.
BC 省两个保险监管机构的职责边界 / Jurisdictional Boundary Between BC's Two Insurance Regulators	BCFSA business authorization vs Insurance Council licensing	在 BC，BCFSA（已取代旧称 FICOM）向保险公司签发经营授权（business authorization），而 Insurance Council of BC 负责向代理人及法人代理机构发牌并执行《Rules》与《Code of Conduct》。 / In BC, BCFSA (which replaced FICOM) issues business authorizations to insurers, while the Insurance Council of BC licences individual agents and corporate agencies and enforces Council Rules and the Code of Conduct.
BC 规范代理人的实体成文法来源 / Statutory Source of Substantive Agent Regulation in BC	Financial Institutions Act (FIA) vs Insurance Act	BC 的《Insurance Act》没有专门规范代理人的一章；禁止保费回佣（s.79）、禁止强制搭售（s.94）、代理人持牌（ss.168–180）及罚则均规定在《Financial Institutions Act》中。 / The BC Insurance Act has no dedicated chapter on agents; statutory provisions prohibiting premium rebating (s. 79), prohibiting tied selling (s. 94), governing agent licensing (ss. 168–180), and prescribing penalties are set out in the Financial Institutions Act (FIA).
CISRO 与 CCIR 的协调性质 / Coordinating Role of CISRO and CCIR	Fair Treatment of Customers (FTC) and non-legislative bodies	CISRO 与 CCIR 均为跨辖区协调组织，本身不能制定法律或法规，但联合发布了同时适用于保险公司与中介的《公平对待客户》（FTC）指引。 / CISRO and CCIR are inter-jurisdictional coordinating bodies that cannot enact legislation or regulations, but jointly issued the Fair Treatment of Customers (FTC) guidance applicable to both insurers and intermediaries.
Assuris 破产保护顺位与计算规则 / Assuris Insolvency Protection Procedural Order and Calculation Rules	liquidator policy transfer and Assuris coverage limits	保险公司资不抵债时由清算人（liquidator）先行尝试转移保单，Assuris 保护自动生效且无需申请；给付削减时按固定保底或比例「取高者」保护（考试口径 2022 为死亡给付 $200,000 或 85%，2026 现行为 $1,000,000 或 90%）。 / When an insurer becomes insolvent, the liquidator first attempts to transfer policies, and Assuris protection applies automatically without application; if benefits are cut, protection covers whichever is higher between the fixed floor and percentage (2022 exam standard: death benefit $200,000 or 85%; 2026 current standard: $1,000,000 or 90%).
FINTRAC 代理人的五类义务与报告时限 / FINTRAC Agent Obligations and Reporting Deadlines	reporting entity, 24-hour rule, LCTR and STR	寿险代理人作为报告实体（reporting entity）须建合规计划、建档、核实身份及报告交易；现金或虚拟货币在连续 24 小时内累计达 $10,000 即触发报告，LCTR 限 15 个日历日内、LVCTR 限 5 个工作日内、STR 须在合理可行的最早时间提交。 / As reporting entities, life agents must implement compliance programs, keep records, verify identities, and report transactions; cash or virtual currency totaling $10,000 or more within 24 consecutive hours triggers reporting: LCTR within 15 calendar days, LVCTR within 5 business days, and STR as soon as practicable.
联邦与 BC 省隐私法的适用边界 / Application Boundary Between Federal and BC Privacy Laws	PIPEDA vs PIPA (BC) and OIPC BC	BC 拥有与联邦 PIPEDA 实质相似的省级私营部门隐私法 PIPA（由 OIPC BC 监督执法），省内商业活动通常适用 PIPA，而跨省或跨境商业信息流动仍可能触发 PIPEDA。 / BC has its own private-sector privacy statute, PIPA (enforced by OIPC BC), deemed substantially similar to federal PIPEDA; commercial activity within BC is generally governed by PIPA, while interprovincial or international commercial personal information transfers may trigger PIPEDA.
OLHI 独立投诉处理的受理前置条件 / Prerequisites for OLHI Independent Dispute Resolution	final position letter and OLHI mandate	客户向全国独立投诉组织 OLHI 申诉前，必须先走完保险公司内部投诉程序并取得最终立场信（final position letter）；OLHI 无权吊销牌照或罚款。 / Before submitting a complaint to the national independent dispute body OLHI, a client must exhaust the insurer's internal complaints process and obtain a final position letter; OLHI has no statutory power to revoke licences or levy fines.
分离基金与共同基金的监管及保护分流 / Regulatory and Protection Division Between Segregated Funds and Mutual Funds	segregated funds vs mutual funds (CIRO and CIPF)	分离基金本质是保险合同，销售行为归省级保险监管机构且破产保护走 Assuris；共同基金归 CIRO（由 MFDA 与 IIROC 合并而成）监管且投资者保护走 CIPF。 / Segregated funds are insurance contracts governed by provincial insurance regulators and protected against insolvency by Assuris; mutual funds are securities regulated by CIRO (formed by merging MFDA and IIROC) and protected by CIPF.

BC 持牌代理人的监管期、E&O 与继续教育要求 / BC Licensed Agent Supervision, E&O, and Continuing Education Requirements	24-month supervision, E&O limits, and 15 CE credits	BC 新持牌人须在合格监管人下执业 24 个月（持 CLU/CFP/RFP 减为 12 个月），维持单次索赔 $1,000,000 / 累计 $2,000,000 的 E&O 保险，并每牌照周期完成 15 个 CE 学时且留存记录 5 个周期。 / New BC licensees must practice under a qualified supervisor for 24 months (reduced to 12 months for CLU, CFP, or RFP holders), maintain E&O coverage of at least $1,000,000 per claim and $2,000,000 aggregate, and complete 15 CE credits per licence period while retaining records for 5 licence periods.

自测提问（康奈尔左栏）

1. 为什么 OSFI 只管保险公司财务稳健而不直接给代理人发牌或做纪律处分？ / Why does OSFI focus solely on insurer financial soundness rather than licensing or disciplining individual agents?
2. 在 BC 查处代理人保费回佣和强制搭售，依据的是《Insurance Act》还是《Financial Institutions Act》？ / Under which statute does BC penalize agent premium rebating and tied selling: the Insurance Act or the Financial Institutions Act?
3. 客户遇到服务争议、代理人违规、保险公司破产三类问题时，各自的第一入口和最终处理机构是谁？ / When clients encounter service disputes, agent misconduct, or insurer insolvency, what are the initial entry points and ultimate resolving bodies for each?
4. Assuris 的「固定金额或比例取高者」怎么算？考试口径 2022 旧值与 2026 现行值差在哪里？ / How is the Assuris 'whichever is higher' rule calculated between the fixed dollar floor and percentage, and how do 2022 exam values differ from 2026 current standards?
5. FINTRAC 的 $10,000 连续 24 小时规则管什么？LCTR、LVCTR 和 STR 的提交时限各是多久？ / What is governed by the FINTRAC $10,000 24 consecutive hour rule, and what are the filing deadlines for LCTR, LVCTR, and STR?

总结：请用三句话总结本章：第一句写「联邦与 BC 省级机构在管钱与管人上的分工」，第二句写「投诉、违规、破产三条链各自的对应机构」，第三句写「考试口径与 2026 现行规则最关键的两处数字或名称差异」。 / Summarize this chapter in three sentences: First, state the division between federal and BC provincial bodies regarding financial soundness versus licensing and conduct; second, identify the corresponding bodies for complaints, agent misconduct, and insurer insolvency; third, highlight the two most critical differences in figures or institutional names between the 2022 exam standard and 2026 current rules.

第 32 章 · 代理人的义务 / Main Responsibilities of Life Insurance Agents

伦理与职业实践 / Ethics & Professional Practice　P1 必拿分 / Must score　Agent Duties · 模考 5 题

带着这几道题读：分期保单每期只交 $2,000，什么时候必须完成反洗钱身份核验？ / When an installment policy costs only $2,000 per payment, at what point must anti-money laundering identity verification be completed?；客户赶着去度假，能不能先签替换声明 LIRD、省掉书面比较讨论？ / If a client is in a rush to leave for vacation, can the Life Insurance Replacement Declaration (LIRD) be signed without the written comparison discussion?；送保单上门时发现客户刚住院检查，代理人能不能把保单交给他？ / Upon arriving to deliver a policy, the agent discovers the client was just hospitalized for tests; can the agent proceed with delivery?；把老客户的定期寿险换成另一家公司的终身寿险且漏讲风险算什么违规？ / What violation occurs when replacing an existing client's term policy with whole life from another insurer while failing to disclose the risks?

怎么考

- 情景定性题：给出代理人诱导换单、冒名代签（fronting）、经手客户现金或贬损同行等具体行为，要求精准区分同司搅动（churning）与跨司搅动（twisting），或判断行为违反哪一类禁止性规则。 / Scenario characterization questions: Given specific agent conduct such as inducing policy replacements, fronting, handling client cash, or defaming competitors, candidates must precisely distinguish between churning and twisting, or determine which category of prohibited practices has been violated.
- 流程顺序与留痕题：围绕需求分析（needs analysis）六步法、保单替换（replacement）LIRD 流程或保单交付前健康复核，考察客户赶时间或结果合适时能否省略书面记录或跳过步骤。 / Process sequence and audit trail questions: Focusing on the six-step needs analysis method, the policy replacement LIRD process, or the pre-delivery health review, testing whether written records can be omitted or steps skipped when a client is in a hurry or when the outcome appears suitable.
- 反洗钱 KYC 门槛与核验方法题：考察 $10,000 存续期累计门槛、建档后 30 天核验期、受益人首次付款前核验节点、豁免保单范围，以及排除信用卡或支票等非法定证件。 / Anti-money laundering KYC threshold and verification method questions: Testing the $10,000 cumulative policy duration threshold, the 30-day verification window after creating an information record, the beneficiary verification deadline before the first payment, exempt policy categories, and the exclusion of non-statutory instruments such as credit cards or cheques.
- E&O 覆盖范围与执业合规题：测试过失与遗漏保险（E&O）不赔故意欺诈与伪造的边界、BC 最低保额与失保 30 天自动停牌、失保 5 个营业日通报义务，以及离职延续期覆盖（run-off insurance）。 / E&O coverage scope and practice compliance questions: Testing the boundary where Errors and Omissions (E&O) insurance excludes intentional fraud and forgery, BC minimum policy limits, automatic licence suspension after 30 days of lapsed coverage, the 5-business-day lapse reporting obligation, and post-departure run-off insurance.

高频陷阱（看到信号就警觉）

混淆同司搅动与跨司搅动 / Confusing Churning with Twisting：看题干中新旧保单的承保人：同一家保险公司内部换单是同司搅动（churning），跨不同保险公司且隐瞒或误导成本是跨司搅动（twisting）。 / Check the insurers of the existing and new policies in the question stem: replacing a policy within the same insurer is churning, while inducing a switch across different insurers with hidden or misleading costs is twisting.

把 $10,000 核验门槛当成单笔金额 / Treating the $10,000 KYC Verification Threshold as a Single-Payment Amount：题干出现分期保费（如每年或每期 $2,000）但预计保单或年金整个存续期收款累计达到 $10,000，或出现用信用卡、银行支票代替法定核验方法。 / Look for installment premiums (such as $2,000 annually or per installment) where total expected payments over the policy or annuity duration reach $10,000, or where credit cards or personal cheques are improperly offered to replace statutory verification methods.

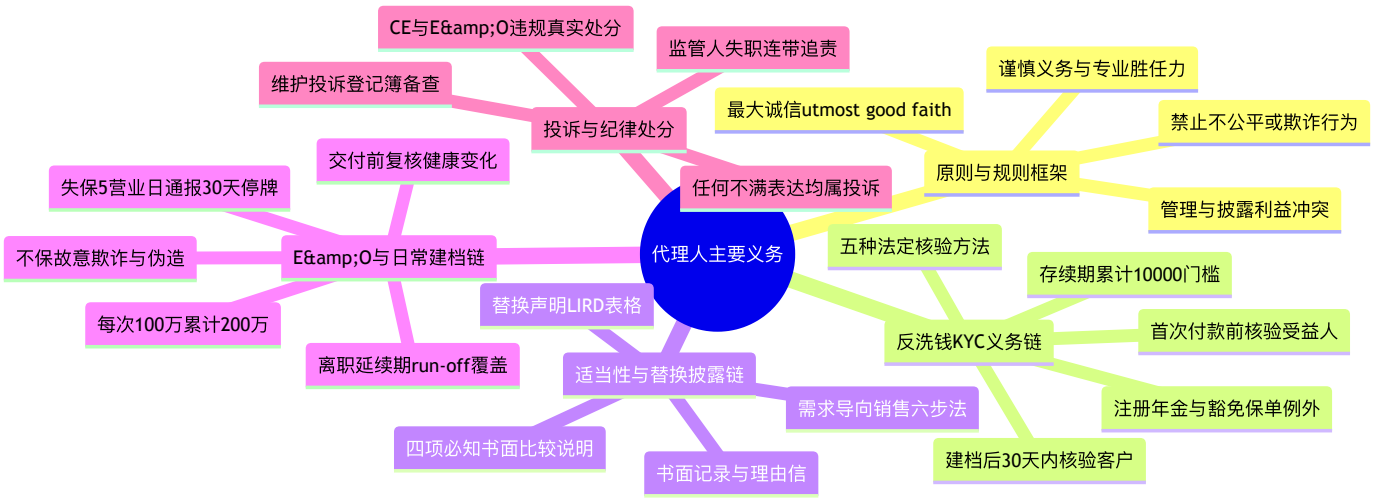
以为产品合适或客户赶时间就能省掉书面记录 / Assuming Written Records Can Be Omitted if the Product Fits or the Client Is in a Hurry：题干强调推荐的产品客观上适合客户、客户急着去度假或为了客户好，试图以此合理化跳过事实调查、书面记录或 LIRD 书面比较说明。 / When the stem emphasizes that the recommended product objectively suits the client, that the client is rushing for a vacation, or that the agent acted for the client's good, attempting to justify skipping fact-finding, written records, or the written LIRD comparison.

把 E&O 保险当成万能赔偿盾牌或把 30 天当宽限期 / Treating E&O Insurance as an All-Purpose Shield or Treating 30 Days as a Grace Period：题干涉及伪造文件（forgery）、挪用资金（misappropriation of client funds）等故意行为却想走 E&O 理赔，或 E&O 失保后未在 5 个营业日内通报 Council。 / When the stem involves intentional acts such as forgery or misappropriation of client funds seeking E&O coverage, or failing to notify the Council within 5 business days after an E&O lapse.

- 投诉处理与双口径辨析题：考察口头不满即构成投诉、投诉登记簿（complaint log）留存要求，以及全国考试口径与 BC 本省规则（如回佣低于 25% 例外、G19 已撤回）的边界。 / Complaint handling and dual-standard distinction questions: Testing that any verbal dissatisfaction constitutes a complaint, complaint log retention requirements, and the boundaries between national exam standard and BC provincial rules (such as the exception for rebating strictly under 25%, and the withdrawal of Guideline G19).

套用已撤回的 G19 或把原则层违规当成只给警告 / Applying Withdrawn Guideline G19 or Assuming Principle-Level Breaches Only Draw Warnings：选项引用 CLHIA G19 作为现行佣金披露依据，或断言违反诚信原则、监管人盲信系统自动计算数字只会收到口头提醒。 / When options cite CLHIA Guideline G19 as authority for current commission disclosure, or assert that breaching utmost good faith or blindly trusting automated spreadsheet figures as a supervisor draws only a verbal warning.

导图



第 32 章要点（遮住右两列自测）

要点	考卷用词	规则 / 数字
原则与规则两层规范 / Two-Tier Normative Framework: Principles and Rules	Principles vs Rules / Utmost good faith	原则规定应当如何诚信行事，规则规定禁止何种行为；违反诚信、胜任力或利益冲突等原则同样会导致严重纪律后果，不能按教学分类预设处分轻重。 / Principles govern how agents must act in good faith, while rules prescribe prohibited conduct; breaching principles such as integrity, competence, or conflicts of interest likewise leads to serious disciplinary consequences, and penalty severity cannot be presumed based on textbook classification.
反洗钱身份核实门槛与时限 / Anti-Money Laundering Identity Verification Threshold and Deadlines	Know your client (KYC) / Information record	当保单或年金预计整个存续期收款达到 $10,000 时，须在相关 information record 建档后 30 天内用五种法定方法之一核实客户身份（信用卡或支票不可用），向受益人预计累计支付达 $10,000 则须在首次付款前核实。 / When total payments expected over the entire duration of a policy or annuity reach $10,000, client identity must be verified using one of five statutory methods (credit cards or cheques cannot be used) within 30 days of creating the information record; if cumulative payments to a beneficiary are expected to reach $10,000, identity must be verified before the first payment.
需求分析与书面留痕 / Needs Analysis and Written Documentation	Needs-based sales practices / Reason-why letter	最佳实践顺序为披露、了解期望、事实调查、需求评估、给出推荐、说明产品信息，且必须对需求分析与推荐理由做书面记录，跳过事实调查或无书面记录即违反适当性原则。 / The best-practice sequence requires initial disclosure, understanding expectations, fact-finding, needs assessment, providing recommendations, and explaining product information; agents must maintain written records of the needs analysis and reasons for recommendation, and skipping fact-finding or lacking written records breaches suitability principles.
保单替换披露义务 / Policy Replacement Disclosure Obligations	Disclosure about replacement / LIRD	涉及替换已有保单时，必须完成《人寿保险替换声明》（LIRD）及涵盖保单差异、替换合理性、固有风险、现金价值与税务后果的书面比较说明，当面逐条讨论并交客户副本，时间压力不能豁免。 / When replacing an existing policy, the agent must complete the Life Insurance Replacement Declaration (LIRD) and a written comparison explaining policy differences, replacement rationale, inherent risks, cash values, and tax consequences, discuss them in person point by point, and provide copies to the client, with no exemption for time pressure.
佣金披露现行依据 / Current Authority for Commission Disclosure	Commission disclosure / CLHIA G13 & G14	CLHIA G19 已于 2019-05-31 整体撤回且从未全面生效，现行披露依考试口径 4.2.4.1 清单（代表公司、报酬方式、额外报酬、利益冲突）及 BC 行为准则执行。 / CLHIA Guideline G19 was withdrawn in its entirety on May 31, 2019, and never took full effect; current disclosure is governed by the exam standard section 4.2.4.1 checklist (companies represented, method of compensation, additional compensation, conflicts of interest) and the BC Code of Conduct.
E&O 覆盖限额、范围与失保后果 / E&O Coverage Limits, Scope, and Consequences of Lapsed Coverage	Errors and omissions (E&O) insurance / Run-off insurance	BC 要求维持每次索赔最低 $1,000,000、累计最低 $2,000,000 的 E&O 保险，仅覆盖过失、错误与遗漏而不覆盖故意欺诈或伪造；失保须在 5 个营业日内通报 Council，超 30 个日历日自动停牌，离职退休应安排延续期覆盖。 / BC requires maintaining Errors and Omissions (E&O) insurance with minimum coverage of $1,000,000 per claim and $2,000,000 aggregate, covering only negligence, errors, and omissions while excluding intentional fraud or forgery; an E&O lapse must be reported to the Council within 5 business days, coverage lapsed beyond 30 calendar days results in automatic licence suspension, and retiring or departing agents should arrange run-off coverage.
保单交付前健康复核 / Pre-Delivery Health Status Review	Policy delivery / Change in insurability	交付合同前必须重新确认客户健康状况，若签约到交付之间可保性发生实质变化，不得按原条件交付保单，须暂停交付并交保险人重新评估。 / Before delivering the policy contract, the agent must reconfirm the client's health status; if a material change in insurability occurs between application signing and delivery, the agent must not deliver the policy under the original terms, but must withhold delivery and refer the file to the insurer for reassessment.
投诉定义与登记簿管理 / Complaint Definition and Complaint Log Management	Complaint log	客户对服务的任何不满表达（无论口头或书面、有无金额损失）均构成投诉，须区分一般服务投诉与违反行为准则的伦理投诉，并在投诉登记簿中完整记录全流程以备监管审计。 / Any expression of dissatisfaction by a client regarding service (whether verbal or written, and with or without financial loss) constitutes a complaint; agents must

		distinguish general service complaints from ethical breaches under the Code of Conduct and record the entire process in a complaint log for regulatory audit.
同司揽动、跨司揽动与冒名代签 / Churning, Twisting, and Fronting	Churning / Twisting / Fronting	同司揽动是在同一保险公司内不必要换单牟取佣金，跨司揽动是以误导方式诱导跨公司换单，冒名代签是让未实际接触客户的持牌人以自己名义提交业务，三者均属严重违规。 / Churning is unnecessarily replacing a policy within the same insurer to generate commission, twisting is inducing a policy replacement across different insurers through misleading representations, and fronting is submitting business under a licensee's name when that licensee had no direct contact with the client; all three constitute serious prohibited practices.
客户资金隔离与回佣、转介边界 / Client Fund Segregation and Boundaries for Rebating and Referrals	Misappropriation of client funds / Premium rebating / Referral fee	严禁将客户现金保费存入代理人个人账户代转；考试口径将回佣列为全国不公平行为，但 BC 允许严格低于保费 25% 且符合客户利益与合同的回佣，向未持牌人支付转介费则要求对方不从事保险活动且交易前书面披露。 / Depositing client cash premiums into an agent's personal bank account for forwarding is strictly prohibited; while national exam standard classifies premium rebating as an unfair practice, BC permits rebating that is strictly less than 25% of the premium provided it is in the client's interest and conforms to contract terms, whereas paying a referral fee to an unlicensed person requires that they engage in no insurance activities and that written disclosure is provided prior to the transaction.

自测提问（康奈尔左栏）

1. FINTRAC 核实客户与受益人身份的 $10,000 门槛如何计算？时限各是什么？哪些方法合法？ / How is the FINTRAC $10,000 threshold calculated for client and beneficiary identification, what are the respective deadlines, and which methods are legally valid?
2. 需求分析（needs analysis）六步法的顺序是什么？为什么产品选对了却没留书面记录仍算违规？ / What is the correct sequence of the six-step needs analysis process, and why does recommending the right product without written documentation still constitute a violation?
3. 触发保单替换（replacement）时，LIRD 书面比较说明必须包含哪几项内容？ / When a policy replacement is triggered, what specific elements must be included in the written comparison accompanying the Life Insurance Replacement Declaration (LIRD)?
4. E&O 保险在 BC 的最低限额是多少？哪些行为不保？失保 5 个营业日与 30 个日历日分别对应什么规则？ / What are the minimum E&O insurance coverage limits in BC, what conduct is excluded, and what rules correspond to 5 business days versus 30 calendar days after a coverage lapse?
5. Churning、twisting 与 fronting 的核心区别是什么？BC 对保费回佣和未持牌人转介有什么具体规定？ / What are the core distinctions between churning, twisting, and fronting, and what are BC's specific rules regarding premium rebating and referral fees to unlicensed individuals?

总结：请用三句话总结：寿险代理人在 KYC、适当性评估、保单替换、投诉处理及 E&O 与交付核验五条义务链中，分别必须在哪个节点留下什么书面证据或动作。 / In three sentences, summarize: across the five chains of agent obligations—KYC, suitability assessment, policy replacement, complaint handling, and E&O with pre-delivery review—at what specific milestones must an agent take action and what written documentation must be retained?