

This fund's risks are high and complex.
United Global Equity Absolute Return Fund (UGEAR)

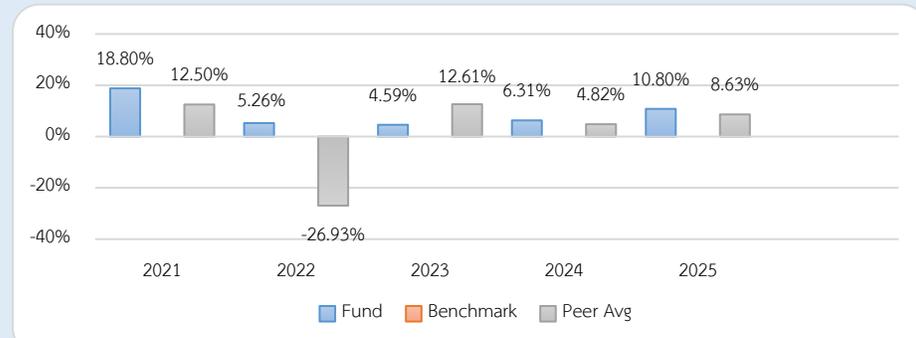
Fund Type / AIMC Category

- Equity Fund
- Feeder Fund / Absolute Return Fund / This fund's risks are high and complex/ Mutual funds that offer life or health insurance benefits/ Fund with Foreign Investment related Risks
- Global Equity

Investment Policy and Strategy

- The Fund will mainly invest in Jupiter Merian Global Equity Absolute Return Fund (Class I USD Accumulation) (Master Fund).
- The master fund is managed by Jupiter Asset Management Series plc.
- Master Fund will be structured as a market neutral portfolio. A universe of major market, large capitalisation global equity stocks will be assessed, and long positions taken in the stocks determined most likely to deliver a positive relative return, and short positions taken in the stocks determined most likely to deliver a negative relative return
- The fund seeks to closely track the performance of the master fund, which employs an market neutral strategy.

Calendar Year Performance (% p.a.)

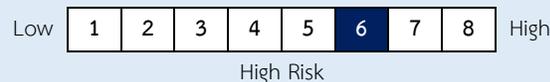


Fund Performance (%)

	YTD	3 Months	6 Months	1 Year*
Fund Return	0.43	5.20	5.81	10.37
Benchmark Return	-	-	-	-
Peer Average	1.12	-1.07	3.79	5.88
Fund Standard Deviation	1.43	2.13	2.85	4.29
Benchmark Standard Deviation	-	-	-	-
	3 Years*	5 Years *	10 Years *	Since Inception *
Fund Return	7.27	8.13	-	3.17
Benchmark Return	-	-	-	-
Peer Average	9.24	2.05	-	-
Fund Standard Deviation	3.55	4.37	-	5.31
Benchmark Standard Deviation	-	-	-	-

Remark : * % p.a.

Risk Level



Mainly invests in equity instruments, with an average annual allocation of not less than 80% of NAV.

Fund Information

Registered Date	28 June 2018
Class Inception Date	-
Dividend Payment Policy	No dividend
Fund Duration	Indefinite

Fund Manager	Since
Mr. Waroon Saptaweekul	18 September 2023

Benchmark

The fund does not use a benchmark for performance comparison, as the United Global Equity Absolute Return Fund primarily invests in the Jupiter Merian Global Equity Absolute Return Fund (the master fund), which seeks to deliver returns independent of market conditions. Consequently, the master fund's manager considers that no benchmark is suitable for its investment strategy.

Remark:

- The fund uses the stated benchmark solely for the purpose of comparing the fund's performance against the benchmark index.

Warning:

- Investment in Mutual Fund is not bank deposit.
- Past performance is not indicative of future results.

Certified by Thai Private Sector Collective Action

Against Corruption: Declared CAC

Morningstar 

Full Prospectus



Investors can study Liquidity Risk Management tools in the full prospectus.

Subscription

Subscription date : Every business day
 Business hours : 08:30 a.m. - 03:30 p.m.
 Min. initial subscription : None
 Min. subsequent subscription : None

Redemption

Redemption date : Must submit a redemption order in advance Between the 1st - 14th on business days of every month. ⁽¹⁾
 Business hours : 08:30 a.m. - 03:30 p.m.
 Min. redemption : None
 Min. holding balance : None
 Settlement period : T+4 business days after the redemption date.

Remark:

- ⁽¹⁾ The asset management company has designated the 15th of each month as the official redemption date for investment units. In the event that this date falls on a non-business day or a day when unit transactions cannot be executed, the redemption date will be deferred to the next business day. Unitholders are required to submit their redemption requests in advance between the 1st and 14th of each month, on business days.
- The Settlement period does not include non-business days in foreign countries.

Statistical Data

Maximum Drawdown	-2.64 %
Recovering Period	1 Years 10 Months
FX Hedging	94.77 %
Sharpe Ratio	1.86
Alpha	-
Beta	-
Portfolio Turnover Ratio	0.05

Fees charged to the Fund (% p.a. of NAV / Include VAT)

Fees	Max.	Actual
Management Fee	2.1400	1.3910
Total expenses	5.3500	1.7569

Remark:

- The stated management fee includes expenses related to the payment of life and health insurance premiums. The preliminary estimate of the proportion of insurance premiums to the management fee is approximately 40%.
- The management company may adjust the actual fees charged to align with its investment strategy or management expenses.

Fees charged to unitholders (% of the unit price / Include VAT)

Fees	Max.	Actual
Front-end Fee	2.00	1.50
Back-end Fee	2.00	waived
Switching-in Fee	2.00	1.50
Switching-out Fee	2.00	waived
Transfer fee	None	None

Remark:

- In case of switching in, the Management Company will not charge front-end fee.
- The management company may adjust the actual fees charged to align with its investment strategy or management expenses.
- The Management Company may apply different fee structures to each investor group.

Asset Allocation

breakdown	% NAV
1. Unit Trust	97.91
2. Other Asset and Liability	2.09

Top 5 Holdings

holding	% NAV
1. Jupiter Merian Global Equity Absolute Return Fund (Class I USD Accumulation)	97.91

Investment in the other funds exceeding 20% of NAV

Fund name : Jupiter Merian Global Equity Absolute Return ISIN code : IE00BLP5S684 Bloomberg code : OMEIUSA ID

Fund (Class I USD Accumulation)

Remark: For the fiscal year ended December 31, 2024 (January 1, 2024 to December 31, 2024), the master fund applied a performance fee of 1.30% of the net asset value of this class. This rate represents the actual fee charged, calculated based on the weighted average value of all units offered in this class during the performance fee calculation period.

Definition

Maximum Drawdown : The percentage of the fund's maximum loss in the past 5 years (or since the fund's inception if it is launched for less than 5 years) which is measured from the highest NAV per unit to the lowest NAV per unit during such period. Maximum Drawdown is an indicator of the risk of loss from investing in the fund.

Recovering Period : The length of time that the fund takes in recovering from the point of maximum loss to earning back the initial investment.

FX Hedging : The percentage of foreign currency investment with FX hedging.

Portfolio Turnover Ratio : The frequency of securities trading in the fund portfolio over a certain period, calculated by taking the lower value between the sum of the value of securities purchased and the sum of the value of securities sold of the fund in 1 year period divided by the average NAV in the same period. A fund with high Portfolio Turnover Ratio indicates frequent securities trading by fund manager resulting in high trading costs. Therefore, it is necessary to compare with the performance of the fund in order to assess the worthiness of such securities trading.

Sharpe Ratio : A ratio between the excess return of a fund and the risk of investment. The Sharpe ratio reveals the average investment return, minus the risk-free rate of return, divided by the standard deviation of returns for the fund. The Sharpe ratio reflects the extra return that should be received by the fund to compensate the amount of risk taken in investment. The fund with a higher Sharpe ratio is considered superior to other funds in terms of management efficiency since it provides higher excess return under the same risk level.

Alpha : The excess return of a fund relative to the return of a benchmark index. A fund with high alpha indicates that it is able to beat the performance of its corresponding benchmark which is a result of the capabilities of the fund manager in selecting appropriate securities for investment or making investment in a timely manner.

Beta : A measure of the degree and direction of volatility of the rate of return of assets in the investment portfolio of the fund compared to the changes in the overall market. A beta of less than 1.0 implies that the rate of return of the fund's assets is less volatile than that of the securities in the broader market whereas a beta of greater than 1.0 implies that the rate of return of the fund's assets is more volatile than that of the broader market.

Tracking Error : The efficiency of the fund to imitate its return to benchmark. Low Tracking Error means the fund is effective in generating return close to benchmark. High Tracking Error means the fund generates return more deviate from benchmark.

Yield to Maturity : The rate of return earned on a bond held to maturity, calculated from the interest expected to receive in the future over that bond duration and paid back principal discounted to the present value. It is used to measure return of fixed income funds by calculating the weighted average of Yield to Maturity of each bond that the fund invests. As Yield to Maturity has standard unit in percentage per annum, it can be used to compare the returns between fixed income funds that have an investment policy of holding bonds until maturity and similar investment characteristics.

“Important Notice: This Document has been translated from Thai. If there is any inconsistency or ambiguity between the English version and the Thai version, the Thai version shall prevail.”

Life and Health Insurance Benefits Information

Unitholders of United Global Equity Absolute Return Fund (UGEAR) are entitled to life and health insurance coverage as specified in the insurance policy, as follows:

1. Eligibility Criteria for Insurance Coverage

- 1.1 Must be a natural person.
- 1.2 Must be a unitholder listed in the fund's registry with an investment value of at least THB 1,000,000, or any other amount as may be amended by the asset management company in the future. The investment value will be assessed based on the unitholder's national ID number.
- 1.3 Must be aged between 15 and 65 years before the coverage start date.
- 1.4 Must be considered in good health by the insurance company. Coverage will be effective upon approval of the insurance application by the insurer.

Unitholders must consent to the disclosure of personal information such as name, address, health data, or any other information required by the insurer. If the asset management company does not receive such information, it reserves the right to deny coverage under the policy.

The asset management company reserves the right to amend the eligibility criteria and conditions as deemed appropriate, prioritizing the interests of unitholders and the fund. Such changes will not be considered a deviation from the fund's project details and will be deemed approved by the unitholders. The company will announce such changes at its office and through selling or redemption agents at least 7 days in advance, and publish them on its website.

2. Termination of Coverage

If the unitholder is eligible for insurance, coverage will begin on the effective date of the insurance policy or upon approval by the insurer and will terminate under any of the following conditions:

- 2.1 When the insurance policy expires.
- 2.2 When the unitholder ceases to be a holder of the fund's units.
- 2.3 Upon the death of the unitholder.
- 2.4 When the unitholder exceeds the maximum age limit specified above.
- 2.5 When the unitholder no longer meets any of the eligibility criteria outlined in Section 1.

Termination of coverage will follow the terms of the insurance policy year or the period specified by the insurer.

Eligible unitholders will receive life and health insurance coverage as detailed in the insurance policy. The benefits are provided by the asset management company to enhance the security of unitholders' lives and health. The company will bear the full cost of the insurance premiums, which are included in the management fee.

Once the fund reaches one year from its registration date as a mutual fund, if the asset management company determines that the coverage does not benefit investors overall, affects the fund, or if the insurance premium equals or exceeds the net management fee after expenses, the company reserves the right to amend, improve, or add conditions to the insurance benefits, policy terms, insurer, or any other conditions as permitted by law. This includes the right to cancel life and health insurance benefits, which will be deemed approved by unitholders. Affected unitholders will be notified at least 60 days in advance. During this period, there will be at least one redemption, and unitholders may redeem their units without redemption fees ("exit without fee").

Additionally, the asset management company reserves the right to deny insurance coverage if the number of eligible unitholders is fewer than 100 during the initial offering period. Eligibility will be assessed based on the unitholder's national ID number. This will be deemed approved by unitholders. Affected unitholders will be notified at least 60 days in advance, with at least one redemption during this period, allowing redemption without fees ("exit without fee").

Coverage Start Date refers to the date the insurance policy becomes effective and the date the insurer approves coverage or changes the coverage plan for the unitholder.

Coverage Start Date Conditions

- If the investment is made on or before the 15th of the month, before 3:30 PM, the coverage will begin on the 1st day of the following month.

Example:

If the investment is made on July 9, 2018, the coverage will begin on August 1, 2018.

- If the investment is made after the 15th of the month, the coverage will begin on the 1st day of the second month following the investment month.

Example:

If the investment is made on July 16, 2018, the coverage will begin on September 1, 2018.

The asset management company reserves the right to adjust the coverage start date as deemed appropriate or at its discretion.

Coverage Period refers to the period from the effective date of the insurance policy or the coverage start date (whichever is applicable) until the coverage ends, which shall not exceed the duration specified in the insurance policy.

Q&A Section

Q: Who is the current insurer for the United Global Equity Absolute Return Fund (UGEAR) (“the Fund”)?

A: Prudential Life Assurance (Thailand) Public Company Limited.

Q: Who is eligible for life and health insurance coverage?

A: Eligible individuals must meet the following criteria:

1. Be a natural person.
2. Be a registered unitholder with an investment value of at least THB 1,000,000 or any other amount as may be amended by the asset management company in the future.
3. Be aged between 15 and 65 years before the coverage start date.
4. Be considered in good health by the insurance company. Coverage will be effective upon approval of the insurance application by the insurer.

If the insurer does not approve the insurance application, the unitholder will not receive life and health insurance coverage.

The asset management company reserves the right to amend the eligibility criteria and conditions as deemed appropriate, prioritizing the interests of unitholders and the fund. Such changes will not be considered a deviation from the fund’s project details and will be deemed approved by the unitholders.

Notification will be provided at least 7 days in advance via the asset management company’s website.

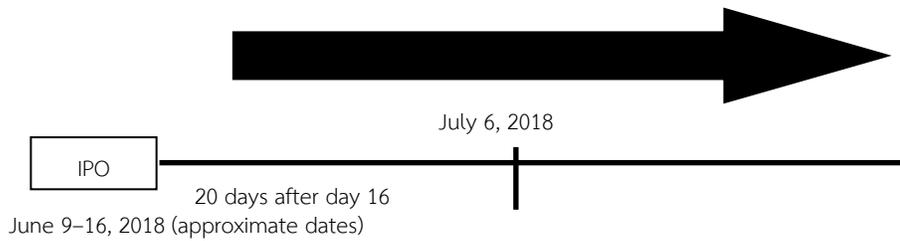
Q: When will the unitholder receive coverage?

A: Coverage will begin under the following conditions:

- For investments made during the IPO period and meeting the required investment value, coverage will begin within 20 days after the IPO ends.

Example: Coverage for Unitholders Investing During IPO

Unitholders who purchase or switch into the United Global Equity Absolute Return Fund (UGEAR) during the IPO period, submit all required documents, and do not redeem their units, will receive insurance coverage within 20 days after the IPO ends.



- For investments made after the IPO:
Unitholders may purchase or switch into the United Global Equity Absolute Return Fund (UGEAR) on any business day. If the investment value meets the specified conditions, coverage will begin according to the Coverage Start Date Conditions.
- Coverage ends on the date the asset management company confirms that the unitholder has redeemed all units, or when the remaining investment value falls below THB 1,000,000. The coverage end date will be the 1st day of the month following the redemption month at 00:00 hours, based on the insurer's policy period or the termination of the group life insurance agreement between the asset management company and the insurer.

Example: Eligibility Criteria Based on Age (15–65 years)

1. For Children

Must be at least 15 years old on the coverage start date.

Examples:

- *Master A*, born on July 15, 2003, invests during IPO (June 9–16, 2018)* (June 2018).
Coverage start date: July 1, 2018 → Not eligible (not yet 15 years old).
- *Master A*, born on November 15, 2003, invests on October 1, 2018.
Coverage start date: November 1, 2018 → Not eligible (not yet 15 years old).
- *Master A*, born on September 15, 2003, invests on October 1, 2018.
Coverage start date: November 1, 2018 → Eligible (turns 15 on coverage start date).

2. For Adults

Must be not older than 65 years, calculated by calendar year (subtract birth year from the coverage year).

Examples:

- *Mr. B*, born on June 15, 1953, invests during IPO (June 9–16, 2018)* (June 2018).
Coverage start date: July 1, 2018 → Eligible (still under 65 years by calendar year).
Coverage remains valid for the full year (July 1, 2018 – June 30, 2019) even if Mr. B turns 65 during that period.
In the next year (July 1, 2019 – June 30, 2020), Mr. B will not be eligible for life insurance coverage.
- *Mr. B*, born on December 31, 1953, invests on September 1, 2018.
Coverage start date: October 1, 2018 → Eligible (still under 65 years by calendar year).
Coverage remains valid until June 30, 2019, even if Mr. B turns 65 during that period.

From July 1, 2019, Mr. B will no longer be eligible for life insurance coverage.

Note: *Dates mentioned are subject to change.*

Q&A Section

Q: What is the life insurance coverage amount for unitholders?

A: Coverage for death from any cause is THB 10,000.

(Exceptions apply as per the insurance policy terms.)

Q: What is the health insurance coverage amount for unitholders?

A: The health insurance coverage details for unitholders are as follows:

Coverage for medical expense reimbursement is provided according to the selected coverage plan, which includes a total of four health insurance plans.

Insurance Benefit	Plan 1	Plan 2	Plan 3	Plan 4
Investment value	1 million baht but less than 5 million baht	5 million baht but less than 10 million baht	10 million baht but less than 20 million baht	20 million baht or more
Life Insurance				
- All cases of death	10,000	10,000	10,000	10,000
In-Patient Benefit Rider (IPD) per disability				
1) Daily Room & Board (Max 31 days)	2,000	4,000	5,000	7,500
1.1 ICU (Max. 15 days)	4,000	8,000	10,000	15,000
2) General Hospital Services	12,000	30,000	35,000	40,000
2.1 Ambulance Service	2,000	4,000	5,000	7,500
2.2 OPD follow-up treatment within 31 days after discharge from the hospital				
3) Surgical Benefits (Subject to Non-Schedule)	12,000	40,000	50,000	75,000
4) Doctor' s Visit (Max 31 days)	350	900	1,000	1,200
5) Emergency Out-patient Treatment (Accident) within 72 hours after accident including follow up max limit per disability	2,200	5,000	6,000	7,000
6) Specialist' s Consultation Fee (Max. per disability) / excluded from item 2 or 3	2,200	5,000	6,000	7,000
Out-Patient Benefit endorsement (OPD)	1,000	3,000	3,500	4,000
1. OPD : Max. 30 visits per policy year				
HB Incentive	2,000	4,000	5,000	7,500
When exercising the right to claim other available coverage, which does not constitute a benefit under this policy, from other medical welfare benefits until the entitlement under such medical welfare benefits is fully exhausted, and no claim has been made for any benefit under the supplementary contract attached hereto.				

Example: Coverage Based on Investment Amount

For instance, Mr. A initially invests THB 1,000,000 in the United Global Equity Absolute Return Fund (UGEAR):

- Mr. A will receive coverage under Plan 1.
- Later, Mr. A invests an additional THB 4,000,000, increasing his total investment. His coverage will be upgraded from Plan 1 to Plan 2.
- Coverage under all four plans is determined based on the increase or decrease in investment value.

Remark: If a unitholder has an investment value exceeding THB 1,000,000 but does not receive insurance approval, they will not be eligible for any life or health insurance plan.

Q: Can unitholders change their life and health insurance coverage plan?

A: Yes, unitholders can change their coverage plan based on changes in their investment value.

- When a unitholder buys or redeems units, the asset management company will notify the insurer to adjust the health insurance plan accordingly, typically on a monthly basis.
- If a unitholder buys or switches into the fund, resulting in an upgrade in coverage plan, they will receive the higher plan once the insurer approves the policy.
- If a unitholder exits and re-enters the fund, coverage will resume only after the insurer approves the new policy.

Q: How is the coverage plan calculated if a unitholder has multiple accounts?

A: Coverage is calculated based on the national ID number of the unitholder. For example:

- Mr. A invests THB 1,000,000 under account number 1111111.
- Mr. A also invests THB 1,000,000 under account number 1111112.

The insurer will calculate the total investment as THB 2,000,000 under Mr. A's national ID and assign the appropriate coverage plan accordingly.

Q: If an account is opened as “for...” or “and/or...”, who receives the life and health insurance coverage?

A: Coverage is assigned based on the first named individual in the fund account application using their national ID.

Examples:

- “Mr. A for Master B” or “Mr. A and/or Mrs. B” → Coverage is assigned to Mr. A.

Q: If an account is opened “by...” such as “Mr. A by Mr. B”, who receives the coverage?

A: The person who receives coverage under the policy is Mr. B.

Q: If a unitholder transfers their units, will they still receive life and health insurance coverage?

A: No. The original unitholder will no longer be eligible for life and health insurance coverage after transferring the units, as they no longer meet the eligibility criteria. Additionally, the coverage will not be transferred to the new unitholder who receives the units.

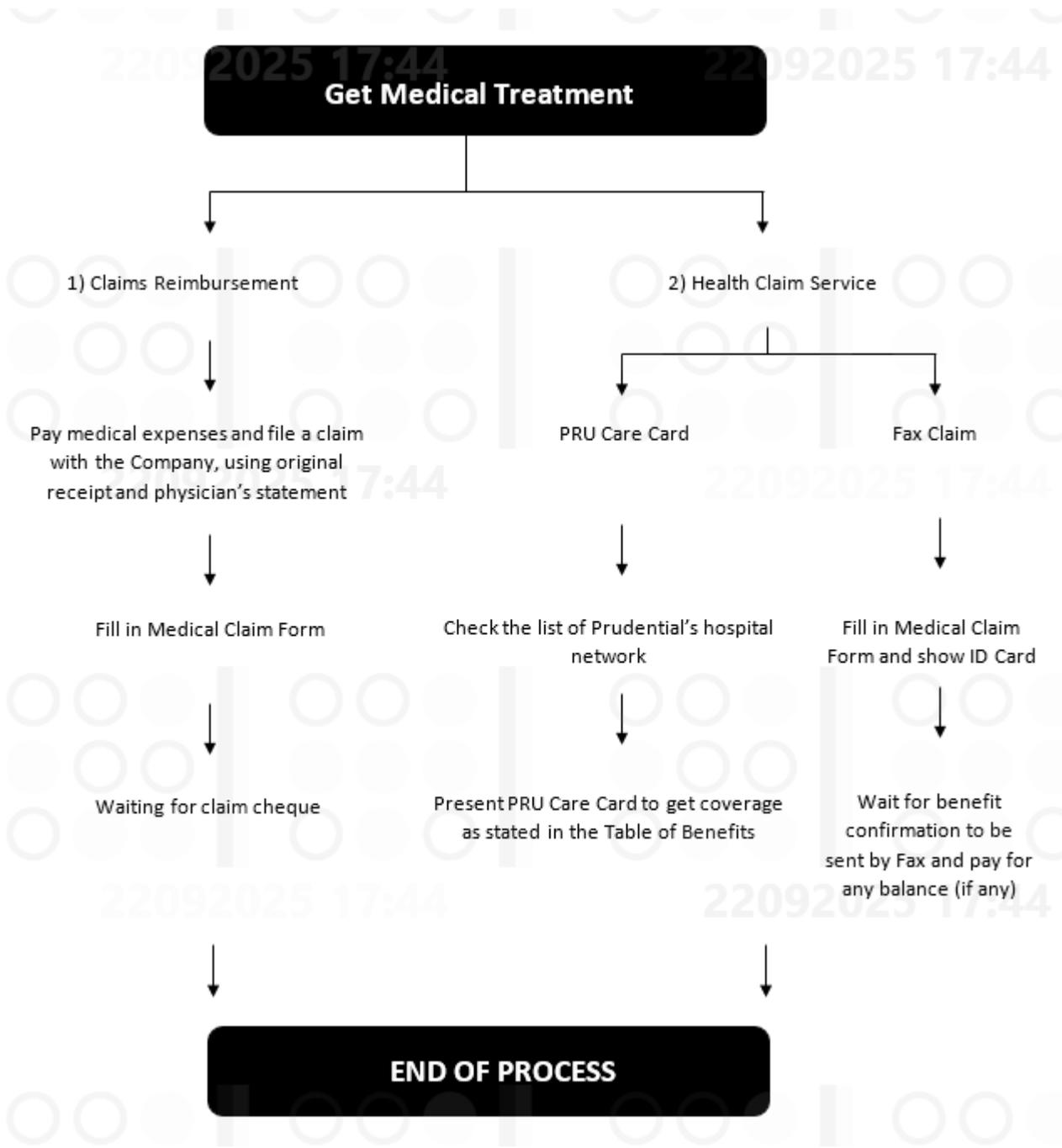
Example

Q: If Mr. A transfers his investment units to Mr. B, and Mr. B subsequently purchases additional units, what happens?

A: Mr. A will no longer be eligible for the previous life and health insurance coverage plan. His insurance rights will be terminated according to the coverage cycle. However, if Mr. A still retains investment units that meet the coverage plan criteria, he will continue to receive coverage based on the remaining investment amount. The portion of units transferred to Mr. B will not carry over the insurance coverage. Nevertheless, Mr. B will be eligible for life and health insurance coverage based on the additional units he purchased, provided he meets the required conditions.

Q: What should a unitholder do to claim benefits under the health insurance coverage plan?

A: Unitholders can claim benefits under the health insurance plan by following these steps (Summary of claims service process):



1) Reimbursement

The Insured member undergoes medical treatment according to the coverage plan at the legally-licensed hospitals (both privately-owned and government-owned), and pays medical bills in advance, then file a reimbursement claim with supporting documents. Details are as follows:

In-patient – Must admit to the hospital for at least 6 hours running. To file a claim, please follow the following steps:

- 1) Fill in a Claim Form (Accident Claim Form or H&S Claim Form) with complete details Information about the Insured member, injury or sickness, whichever case may be, and sign
- 2) Have a doctor fill in details of treatment, doctor's qualifications, medical license number and affix a hospital seal
- 3) Submit to the Company the complete Claim Form together with payment evidence, i.e., original receipt, expenses in detail – Room & Board, Medicines, Surgical and etc. It is required that the doctor's statement must be filled in in Thai or English only.

2) PRUcare card

Usage guideline

PRUcare card is issued to the Insured Member by **Prudential Life Assurance (Thailand) Public Company Limited**. It can be used at hospitals in the Company's network only. It must be used along with other government-issued cards, such as ID Card for the medical treatment at hospitals as an in-patient or out-patient.

Eligibility

All Insured Members covered under the Group Health Insurance policy issued by **Prudential Life Assurance (Thailand) Public Company Limited**.

- Upon termination of Insured Member, the rights to use PRUcare card will immediately stop from the date of termination
- Don't let other persons use PRUcare card on your behalf

PRUcare card benefits

- The Company issues PRUcare card for the convenience of the Insured Member covered under Group Health Insurance policy. For this, the Insured Member is not required to pay medical bills in advance
- PRUcare card must be used at hospitals in the Company's network only. In case there are any outstanding balance, the Insured Member has to settle it with the hospital immediately.

How to use PRUcare card

- The Insured Member presents PRUcare card and ID card to hospital staff prior to the treatment
- Fill in Health Claim Form when paying for medical bills
- Once the treatment finishes, check if all the medical expenses and details of treatment are correct. If they are correct, sign in the Invoice and pay for any outstanding balance (if any)

Responsibility of PRUcare card holders/ policyholders

- Insured Member shall be provided with Group Health Insurance coverage as stated in the Group Life Insurance policy applied for the Insured Member by the Policyholder. In case there are any outstanding balance or the cause of treatment is not within the coverage scope, the Insured Member has to pay for the outstanding balance, or pay all the medical expenses for the uncovered treatment.
- Insured Member who has no right to use PRUcare card, regardless of the cause, or allows other persons to use it on his/her behalf, the Policyholder or Insured Member must be responsible for all the expenses incurred, including all the damages suffered by the Company
- In case of loss/ damage, please notify to the Company to issue a new one.

3) Reimbursement from other entities

To help you get the most benefits from your medical claims, you can also exercise your right of claims with the following (if any)

- 1) Social Security Office (Additional information, go to www.sso.go.th)
- 2) Compensation Fund (Additional information, go to www.sso.go.th)
- 3) Spouse/ Father/ Mother who is a government official
- 4) Own a personal life insurance policy
- 5) Third Party Liability Coverage

Remarks: For the unpaid amount from Social Security or Compensation Fund, please ask the hospital to identify it and also attach details of claims payment when filing the claim with the Company.

- Copy of an original receipt cannot be used for claim filing in all cases, except that the partial claims had been made through government agencies or other welfares and the claims submitted to the Company is for the amount in difference. The copies of receipts must be certified true copy from that government agency, and Insured Member has to submit them together with details of claims payment when filing claims with the Company. (For example, claims payment from Social Security/ Compensation Fund)
- If Insured Member would like the Company to return the original receipts in order to claim for the amount in difference from personal life insurance policy, please state your intention when filing a medical claim with the Company.

Q: How can unitholders inquire about life and health insurance information?

A: Unitholders can contact the insurance company directly:

Prudential Life Assurance (Thailand) Public Company Limited

Group Life Insurance Service Department

Tel: 0-2352-8673 to 4

Prudential Customer Service Center: 1621

Monday – Friday: 8:30 AM – 7:00 PM

Saturday: 8:30 AM – 4:00 PM

Email: DSSC-GrpCorp@prudential.co.th or hotline@prudential.co.th

Q: What exclusions apply to the health insurance coverage under the fund's plan?

A: The insurance company will not pay benefits for the following exclusions as specified in the insurance policy:

1. Life Insurance Exclusions

The insurer will not pay under this policy if:

1.1 The unitholder commits suicide voluntarily within 1 year from the date of joining the insurance.

1.2 The unitholder is intentionally killed by the beneficiary.

2. General Exceptions

This insurance does not cover medical expenses or damage caused by an Injury or a Sickness (including complications), symptoms or abnormal conditions caused by:

2.1 Chronic diseases, pre-existing conditions not cured before the insurance contract date, congenital conditions, developmental disorders, or genetic diseases.

2.2 Treatment or surgery for cosmetic purposes, or solution of skin problems, acne, blemishes, freckles, dandruff, hair loss or weight control, surgery that can be replaced by other treatment methods, except for wound dressing due to a covered Accident.

2.3 Pregnancy, miscarriage, abortion, childbirth, pregnancy complications, solution to infertility problems (including investigation and treatment), sterilization, or contraception, except choriocarcinoma.

2.4 AIDS, venereal diseases, or sexually - transmitted diseases.

2.5 Treatment, prevention or usage of drugs or substances for anti-ageing or giving of replacement hormone during climacteric or menopause, corporal imbecility in a female or male, treatment of sexual disorder and gender confirmation or transgender surgery.

2.6 Routine medical examinations, requests for a hospitalization a Medical Facility, or requests for surgery, or rest cures, or rest for rehabilitation or treatment by rest, or stay in a Medical Facility to be cared by a general care assistant, an examination or a treatment that is not related to a disease that leads to the hospitalization to the Medical Facility, diagnosis of an Injury or a Sickness, treatment or diagnosis for the cause analysis, which are not medically necessary or non-conforming to Medical Standards.

2.7 Checks and treatment for abnormality of vision, Lasik, expenses for a vision-aid device, or for treatment of abnormality of vision.

2.8 Treatment or surgery related to teeth or gums, dentures, crowns, root canal treatment, fillings, orthodontics, polishing, extraction, or root implants, except as necessary due to an Accident Injury, but excluding the expenses of dentures, crowning, and root canal treatment or root implants.

2.9 Treatment or therapy for drug addiction, smoking, alcoholism or use of psychoactive substances.

2.10 Treatment of symptoms or diseases related to mental disorders, psychiatric or behavioral diseases, or personality disorders, including attention deficit disorder, autism, stress, eating disorders or anxiety.

2.11 Treatment which is in a trial stage, an examination or a treatment of sleep apnea disorder or symptom, an examination or a treatment of sleep disorder or snoring.

2.12 Immunizations or vaccinations to prevent diseases, except rabies vaccinations after being injured by an animal and tetanus vaccinations after suffering an Injury.

2.13 Non-conventional treatment including Alternative Medicine.

2.14 Expenses arising from a medical examination that the Insured Member, who is a Doctor, executes a prescription for him/herself, including expenses arising from a medical examination by a Doctor who is a father, a mother, a spouse or a child of the Insured Member.

2.15 Suicide, attempted suicide, self-inflicted Injury, or attempted self-inflicted Injury, whether by oneself or with the consent that allows someone else to do the action, whether or not while being insane, including an Accident caused by the Insured Member's eating, drinking or injection of drug or poisonous substance, or overdose of medications.

2.16 Injuries while under the influence of alcohol, addictive substances, or narcotics to the extent that (s)he is unable to control own consciousness (a level of alcohol in the body recorded from a blood test is 150mg% or higher; or).

2.17 Injuries during fights or when provoking a fight.

2.18 An Injury arising while the Insured Member commits a critical crime or while being arrested or being at large of an arrest.

2.19 An Injury while the Insured Member joins races of a car or a boat of any type or horse race; skis or compete in a ski race of any kind including jet ski; goes skating, boxing, or parachuting (except to save his/her life); controls or joins a paramotor or glider race, goes up or down or rides in a balloon or a; goes bungee jumping, or scuba diving that requires oxygen tanks and underwater breathing apparatus.

2.20 Injuries while boarding, disembarking, or flying in non-commercial aircraft not registered for passenger transport.

2.21 Injuries while piloting or working as crew on any aircraft.

2.22 Injuries while serving as military, police, or volunteer personnel in war or suppression operations.

2.23 War, invasion, acts of hostility by foreign enemies or those similar to war whether declared or not; or civil war, insurrection, rebellion, riot, strike, chaos, revolution, coup d'état, declaration of martial law; or any event that causes the proclamation or maintenance of martial law.

2.24 Terrorism.

2.25 Radiation or radioactivity from any nuclear fuel or nuclear refuse arising from the combustion of nuclear fuel or any process of self-sustaining nuclear fission or fusion.

2.26 Explosion of radioactive materials, nuclear components, or any other hazardous substances that may explode through nuclear processes.

3. Additional Exclusions for Outpatient Group Health Insurance Coverage

3.1 Treatment for acne, freckles, dandruff, hair loss, elective surgery, or surgery to correct pre-existing conditions; dental, gum, and oral treatments—except when necessary due to accidental injury. This excludes dentures, crowns, and dental restoration.

3.2 Diagnosis, treatment, or disease prevention using Thai traditional medicine, folk medicine, Chinese medicine, or any non-conventional medical practices.

3.3 Medication and medical supplies purchased without a doctor's prescription.

3.4 Eye exams, eyeglasses, contact lenses, or hearing aids.

3.5 Functional disorders without pathological evidence, including constipation, indigestion, bloating, or loss of appetite without a diagnosed medical condition.

Q: In cases where the unitholder pays for medical treatment first and then submits receipts and a medical certificate for reimbursement, what are some examples of applicable conditions?

A: Below are 16 examples of conditions for which the unitholder must pay first and then submit for reimbursement:

1. Tumors, cysts, or cancer
2. Hernias
3. Varicose vein
4. Tonsillectomy or Adenoidectomy
5. Hemorrhoid
6. Pterygium or cataract
7. Stones
8. Endometriosis
9. Cerebral vascular disease
10. Heart disease
11. Diabetes Mellitus
12. Hypertension
13. Kidney disease
14. Systemic Lupus Erythematosus (SLE)
15. Liver or biliary tract disease
16. Arthritis disease