SME Group Hospitalisation & Surgical

Product Disclosure Sheet

IMPORTANT NOTE

Read this Product Disclosure Sheet before you decide to take out the **SME Group Hospitalisation & Surgical** Insurance Policy**.** Be sure to also read through the general terms and conditions.

1. What is this product about?

This Policy provides for Hospitalisation and Surgical expenses incurred due to illnesses covered under the policy. This policy is designed for companies with minimum of five (5) and up to one hundred (100) employees. This scheme is only allowed for New insurance application NOT for TakeOver

2. What are the covers / benefits provided?

This policy covers:

- Hospital Room and Board from RM 120 per day up to RM 350 per day
- Surgical expenses
- Outpatient cancer treatment and outpatient kidney dialysis
- Overall Annual Limit from RM 20,000 up to RM 80,000 depending on plan

(Note: The above benefits are Non exhaustive, please refer to the brochure for full list of benefits).

3. How much premium do I have to pay?

The total premium that you have to pay may vary depending on the choice of plan required and underwriting requirements:

- Standard cover for a non-cashless plan from RM 258
- Standard cover for a cashless plan from RM 286

Premium rates and renewal of the policy are not guaranteed. Factors contributing to the increase in premiums rates are Plan ,Specific claims experience and medical inflation. However, past experience does not necessarily reflect future trends.

Kindly refer to our brochure for the choice of plans, cover and their respective premium.

4. What are fees and charges that I have to pay?

The fees and charges that you will have to pay are:

What you have to pay in addition to the premium

- Stamp Duty – RM10.00
- Goods & Service Tax 6% of premium
- Agents Commission(if any) which is 10% of the premium

5. What are some of the key terms and conditions that I should be aware of?

- **Importance of Disclosure**

  Pursuant to Section 129 and Para 5 of Schedule 9 of Financial Service Act 2013 or any amendments thereof: you have a pre-contractual duty of disclosure and shall disclose all matters in this proposal form which you know or ought to know or reasonably expected to know which are relevant to the decision of the company to accept the risk or not and the rates and terms to be applied. Your duty of disclosure shall continue until the time the contract is entered into, varied or renewed.

- **Cooling-off period**

  You may cancel your policy by returning the policy within 15 days after you have received the policy. The premiums that you have paid (less any medical fee incurred) will be refunded to you.
- **Qualifying/waiting period**

  The eligibility for the benefits under the policy will only start 30 days after the effective date of the policy except for accidental injuries.
- **Room and board co-payment**

  If you are hospitalised at a Room and Board which is higher than your eligible benefits, you shall bear 20% of the other eligible benefits described in the Schedule of Benefits.

6. What are the major exclusions under this policy?

This insurance does not cover:

- Pre-existing conditions and Specified Illnesses;
- Maternity;
- Congenital abnormalities;
- Cosmetic or plastic surgery;
- Dental conditions including dental treatment or oral surgery;

(Note: This list is non-exhaustive. Please refer to the policy contract for the full list of exclusions under this policy).

7. What about geographical scope?

Worldwide, however no benefits shall be payable if you reside or travel outside Malaysia for more than 90 consecutive days.

8. What is Pre-Existing Conditions?

Pre-existing Conditions mean Disabilities that the Insured Person has reasonable knowledge of. An Insured Person may be considered to have reasonable knowledge of a pre-existing condition where the condition is one for which:

- The Insured Person had received or is receiving treatment;
- Medical advice, diagnosis, care or treatment has been recommended;
- Clear and distinct symptoms are or were evident; or
- Its existence would have been apparent to a reasonable person in the circumstances.

9. What is Specified Illness?

Specified Illness means the following Disabilities and its related complications, occurring within the first one hundred and twenty (120) days of Insurance of the Insured Person:

- Hypertension, diabetes mellitus and cardiovascular disease;
- All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system;
- All ear, nose (including sinuses) and throat conditions;
- Hernias, haemorrhoids, fistulae, hydrocele, varicocele;
- Endometriosis including disease of the reproduction system;
- Vertebro spinal disorders (including disc) and knee conditions.

10. Can I cancel my policy?

You may cancel your policy by giving written notice to the insurance company. Upon cancellation, you are entitled to a refund of the premium based on the scale of short period rates provided that you have not made a claim on the policy. The scale of short period rates is available in the policy.

11. What do I need to do if there are changes to my contact details?

It is important that you inform us of any change in your contact details to ensure that all correspondences reach you in a timely manner. You can write in / fax us at the address / fax number below.

12. Where can I get further information?

If you have any enquiries, please contact us at:

Tune Insurance Malaysia Berhad
Level 9, Wisma Tune, No 19, Lorong Dungun,
Damansara Heights, 50490 Kuala Lumpur

Telephone +60 3 2087 9000
Fax +60 3 2094 1366
Email enquiries@tuneinsurance.com

IMPORTANT NOTE

YOU SHOULD SATISFY YOURSELF THAT THIS POLICY WILL BEST SERVE YOUR NEEDS. YOU SHOULD READ AND UNDERSTAND THE INSURANCE POLICY AND DISCUSS WITH THE AGENT OR CONTACT THE INSURANCE COMPANY DIRECTLY FOR MORE INFORMATION.

Tune Insurance Malaysia Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia The information provided in this Product Disclosure Sheet is valid as at March 2014.