

MEDIC SME INSURANCE

Product Disclosure Sheet

Important Note

- Read this Product Disclosure Sheet before you decide to take out the Medic SME Insurance Policy. Be sure to also read through the general terms and conditions.
- 2. You should satisfy yourself that this policy will best serve your needs. You should read and understand the insurance policy and discuss with the intermediary or contact the insurance company directly for more information.
- 3. Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance wholly for purposes unrelated to your trade, business or profession, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form (or when you apply for this insurance). You must answer the questions fully and accurately.

Failure to take reasonable care in answering the questions may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance.

The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us.

In addition to answering the questions in the Proposal Form (or when you apply for this insurance), you are required to disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied.

You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in the Proposal Form (or when you applied for this insurance) is inaccurate or has changed.

1. What is this product about?

This product provides for hospitalisation and surgical expenses incurred due to illnesses & injury covered under the policy with optional plan for Clinical/outpatient benefits. This policy i designed for companies with minimum of five (5) employees and up to one hundred and fifty (150) active service employees.

2. What are the covers / benefits provided?

Some of the major benefits for Hospitalisation and Surgical Plan available are:

- · Hospital Room & Board
- Intensive Care Unit
- Surgical Fees (inclusive of second surgical opinion)
- Anaesthetist Fees
- Operating Theatre Fees
- In-Hospital Physician Visits
- Hospital Services & Supplies
- Pre-Hospital Diagnosis Tests/Specialist Consultation
- Post-Hospitalisation Treatment
- Emergency Outpatient Accidental Treatment
- Accidental Dental Treatment
- Home Nursing Care
- Outpatient Physiotherapy Treatment
- · Daycare Procedure
- Ambulance Fee and Medical Report Fees
- Outpatient Cancer/Kidney Dialysis Treatment
- Malaysian Government Hospital Daily Cash Allowance
- Accidental Death Benefits
- Tax charges (if any)

You may opt for Outpatient Clinical Benefits as rider by paying additional premium. Some of the major benefits for Clinical Plan available are:

- GP visit Routine Consultation, Medication, Injection, Diagnostic/Laboratory tests, X-ray, Outpatient Surgical Procedures,
- Specialist visit upon written referral by Panel Clinic: Consultation, Medication, injection, diagnostic/Laboratory tests, X-ray, Outpatient Surgical Procedures.
- · Overseas GP or Specialist visit

Note: Please refer to the policy wording for the full list of terms and conditions of the benefits.

The benefit(s) payable under eligible product is protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Generali Insurance Malaysia Berhad or PIDM (visit www.pidm.gov.my)

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:

A) Hospitalisation and Surgical Insurance Plan	MS130 (RM)	MS160 (RM)	MS 220 (RM)	MS300 (RM)	MS450 (RM)
Employee Only	312.26	375.47	469.81	638.68	845.28
Employee and Spouse	780.66	938.68	1,174.53	1,596.70	2,113.21
Employee and Children	780.66	938.68	1,174.53	1,596.70	2,113.21
Employee and Family	1,249.06	1,501.89	1,879.25	2,554.72	3,381.13

B) Clinical / Outpatient Insurance Plan (Rider to the Hospitalisation and Surgical Plan)	MSD (RM)	MSC (RM)	MSB (RM)	MSA (RM)
Per Person	533.02	589.62	650.94	745.28

Note: The premium that you have to pay includes commission payable to the intermediaries amounting to 10% of the premium (if any) and the MCO's fee.

(MCO refers to the Managed Care Organization which we engage to assess, administer and manage the claims arising from this medical plan).

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

In addition to the premium, you have to pay:	Amount
a. Service Tax	8% of premium for business organisations only. Individuals are excluded from Service Tax.
b. Stamp duty	RM 10.00

The applicability of stamp duty and service tax amount herein applied, or any other taxes are subjected to the prevailing laws of Malaysia.

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

- Cooling-off period: You may cancel your policy by returning the policy within 15 days after you have received the policy
 and you will be refunded the full premium that you paid. No refund is made if a claim was made during this cooling-off
 period.
- Qualifying / waiting period: Your eligibility for benefits under the policy will only start 30 days after the effective date of the policy except for accidental injury.

Eligible Age:

Adult: up to 65 years old. The coverage can be renewed yearly up to the period before attaining age 101 years.

Child: from 30 days to 18 years old, unmarried and unemployed. Extension up to 23 years if studying full-time at a local institution of higher learning.

Cash Before Cover: Full premium must be paid to us or our authorized intermediary before the effective date of the
policy.

- **Pre-existing Conditions:** These are disabilities that the Insured Person has reasonable knowledge of. A person may be considered to have reasonable knowledge of a pre-existing condition where the condition is one for which:
 - a) the Insured Person had received or is receiving treatment
 - b) medical advice, diagnosis, care or treatment has been recommended;
 - c) clear and distinct symptoms are or were evident; or
 - d) its existence would have been apparent to a reasonable person in the circumstances
- Specific Illness: These are disabilities and its related complications, occurring within the first 120 days of Insurance:
 - a) Hypertension, diabetes mellitus and cardiovascular disease.
 - b) All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system.
 - c) All ear, nose (including sinuses) and throat conditions.
 - d) Hernias, haemorrhoids, fistulae, hydrocele, varicocele.
 - e) Endometriosis including diseases of the reproductive system.
 - f) Vertebro-spinal disorders (including disc) and knee conditions.

Note: This list is not exhaustive. Please refer to the policy wording for the full list of terms and conditions under this policy.

6. What is Deductible?

This is the amount that must be borne by you or payable by your basic Hospitalisation & Surgical Insurance policy before Medic SME can indemnify you.

7. What are the major exclusions under this policy?

The policy generally does not cover:

- Any medical or physical conditions arising or contracted within the first thirty (30) days of the Insured Person's cover or reinstatement date except accidental injuries.
- Pre-existing conditions for the first 12 months of cover.
- Specific Illnesses for the first 120 days.
- Congenital conditions, dental and maternity conditions, AIDS/HIV related conditions.
- · Self-inflicted injury or suicide, circumcision of all causes.
- · Psychotic, mental or nervous disorders.
- · Cosmetic or plastic surgery.
- · War, strike, riot, civil commotion.
- · Routine medical or physical examination, investigative procedures.

Note: This list is not exhaustive. Please refer to the policy wording for the full list of terms and conditions under this policy.

8. Can I cancel my policy?

You may cancel your policy at any time by giving written notice to us. Upon cancellation, any refund of the premium would be based on the conditions stipulated in the policy.

Period Not Exceeding	Refund of Annual Premium
15 days	90% (applicable for renewal only)
1 month	80%
2 months	70%
3 months	60%
4 months	50%
5 months	40%
6 months	30%
7 months	25%
8 months	20%
9 months	15%
10 months	10%
11 months	5%
Period exceeding 11 months	No refund

9. 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 correspondence reaches you in a timely manner.

10. Where can I get further information?

If you have any enquiries about this product or any other types of similar products, you can contact us or your insurance intermediary or visit our website at www.generali.com.my.

Generali Insurance Malaysia Berhad

Reg No: 197501002042 (23820-W) Generali Customer Service Centre Level 1, Menara Generali,

27 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia.

Tel: 1 300 13 2121 or +603 3007 2121 Email: customer.service.gi@generali.com.my

www.generali.com.my

IMPORTANT NOTE:

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

The information provided in this Product Disclosure Sheet is a summary for quick and easy reference. The exact terms and conditions that apply are stated in the policy contract.

Generali Insurance Malaysia Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

The information provided in this disclosure sheet is valid as at 24 February 2025.