

Read this Product Disclosure Sheet before you decide to participate in Takaful myClick MediCare. Please be sure to also read the general terms and conditions.

1. What is this plan about?

This is an individual medical plan that pays the eligible medical expenses up to the overall annual limit (“Basic Coverage”). In addition, you may opt to include top-up rider which covers the eligible medical expenses up to the overall annual limit of the rider once the overall annual limit of the Basic Coverage is exhausted (“Top-up Rider”).

2. What are the Shariah concepts applicable?

This plan applies the following Shariah concepts:

- a. **Tabarru’** means donation for charitable purposes. Under this plan, the participant donates a portion of the contribution to the Group Family Takaful Account (“GFTA”) to help other participants.
- b. **Wakalah** refers to a contract where a party, as principal authorizes another party as his agent to perform a particular task on matters that may be delegated, with or without the imposition of a fee. Under this plan, the participant authorizes Syarikat Takaful Malaysia Keluarga Berhad (“Takaful Malaysia”) to manage the GFTA and in return, Takaful Malaysia will receive a Wakalah fee.
- c. **Qard** refers to a contract of lending money by a lender to a borrower where the latter is bound to repay an equivalent replacement amount to the lender. Under this plan, Takaful Malaysia will lend an amount of money to the GFTA without interest if the GFTA is in deficit.

3. What are the covers / benefits provided?

The Basic Coverage comes with three (3) plan options as below:

Plan	Bronze	Silver	Gold			
Section A: In-Patient and Daycare Surgical Benefits						
Daily Hospital Room and Board (No limit on number of days)	RM100	RM150	RM200			
Intensive Care Unit (Maximum 60 days per any one disability)	As charged					
Surgical Fees						
Anaesthetist Fees						
Operating Theatre						
Hospital Supplies and Services						
In-Hospital Physician's and Specialist's Visit						
Ambulance Fees						
Day Surgery	As charged					
Daily Cash Allowance at Malaysian Government Hospital (No limit on number of days)				RM100	RM100	RM100
Section B: Out-Patient Benefits						
Pre-Hospitalisation Benefit (Within 60 days before hospitalisation)				As charged		
Post-Hospitalisation Benefits (Within 90 days after discharged)						
Emergency Accidental Out-patient Treatment						
Out-patient Cancer Treatment						
Out-patient Kidney Dialysis Treatment						
Overall Annual Limit (for Sections A & B)	RM 50,000	RM 75,000	RM 100,000			

You can also include the Top-up Rider under the same plan option as the Basic Coverage subject to additional contributions. If the Top-up Rider is included, the following Schedule of Benefits shall be **applicable after the Overall Annual Limit of the Basic Coverage has been fully utilised.**

Plan	Bronze	Silver	Gold
Section A: In-Patient and Daycare Surgical Benefits			
Daily Hospital Room and Board (No limit on number of days)	RM100	RM150	RM200
Intensive Care Unit (Maximum 60 days per any one disability)	As charged		
Surgical Fees			
Anaesthetist Fees			
Operating Theatre			
Hospital Supplies and Services			
In-Hospital Physician's and Specialist's Visit			
Ambulance Fees			
Day Surgery			
Daily Cash Allowance at Malaysian Government Hospital (No limit on number of days)	RM100	RM100	RM100
Section B: Out-Patient Benefits			
Pre-Hospitalisation Benefit (Within 60 days before hospitalisation)	As charged		
Post-Hospitalisation Benefits (Within 90 days after discharged)			
Emergency Accidental Out-patient Treatment			
Out-patient Cancer Treatment			
Out-patient Kidney Dialysis Treatment			
Overall Annual Limit (for Sections A & B)	RM 500,000	RM 750,000	RM 1,000,000

Notes:

- All the benefits are as charged based on reasonable and customary charges in Malaysia, subject to overall annual limit. No lifetime limit applies.
- The overall annual limit of the Basic Coverage must be fully utilised before claiming any benefit under the Top-up Rider.
- The plan option for the Basic Coverage and Top-up Rider must be the same.
- The participant has an option to choose the deductible limit to enjoy lower contributions as per table below:

Deductible Limit Per Admission (RM)	Contribution Discount (%)
1,000	10
2,000	20
3,000	30

The deductible limit shall not be applicable if the person covered is admitted to a Government Hospital in Malaysia.

4. How much contribution do I have to pay?

The contribution amount varies by plan option, contribution payment mode, gender and attained age of the person covered at renewal. Please refer to the following table of annual contributions:

Table of Annual Contributions for Basic Coverage

Attained Age (Next Birthday)	Male			Female		
	Bronze (RM)	Silver (RM)	Gold (RM)	Bronze (RM)	Silver (RM)	Gold (RM)
1 – 5	942	952	1,128	771	780	923
6 – 10	579	584	693	553	559	619
11 – 15	463	468	556	433	439	507
16 – 20	559	563	651	532	538	621
21 – 25	536	594	659	500	556	646
26 – 30	537	598	659	504	560	651
31 – 35	545	605	757	586	651	780
36 – 40	655	727	788	658	731	878
41 – 45	761	846	1,019	849	943	1,130
46 – 50	1,081	1,202	1,301	1,107	1,230	1,469
51 – 55	1,261	1,401	1,564	1,316	1,463	1,795
56 – 59	1,697	1,887	2,055	1,773	1,970	2,317
60 – 64	2,762	3,069	3,524	2,970	3,301	3,612
65 – 69	4,505	5,300	6,078	4,341	5,107	6,274
70 – 74*	5,353	6,690	8,113	5,767	7,209	8,327
75 – 79*	6,856	9,793	11,603	6,710	9,584	11,348
80 – 85*	9,455	11,819	14,334	9,254	11,569	14,019

* for renewal only

Table of Annual Contributions for Top-up Rider

Attained Age (Next Birthday)	Male			Female		
	Bronze (RM)	Silver (RM)	Gold (RM)	Bronze (RM)	Silver (RM)	Gold (RM)
1 – 5	310	287	271	254	235	222
6 – 10	190	176	166	170	157	149
11 – 15	153	142	134	139	129	122
16 – 20	179	166	157	170	157	149
21 – 25	181	167	158	178	165	156
26 – 30	181	167	158	178	165	156
31 – 35	208	192	182	214	198	187
36 – 40	217	201	190	242	224	212
41 – 45	280	259	245	311	288	272
46 – 50	358	331	313	404	374	354
51 – 55	430	398	376	494	457	432
56 – 59	565	523	494	637	589	557
60 – 64	969	896	848	993	919	869
65 – 69	1,671	1,546	1,462	1,725	1,596	1,509

70 – 74*	2,231	2,064	1,952	2,290	2,118	2,004
75 – 79*	3,191	2,952	2,792	3,121	2,887	2,731
80 – 85*	3,942	3,646	3,449	3,855	3,566	3,373

* for renewal only

Notes:

- The contributions above are applicable to standard lives and if you choose to make an annual payment.
- Additional contribution loadings may apply depending on the occupation and health conditions of the person covered.
- If the deductible limit is selected, the contribution discount (%) shall apply on the total contribution paid for the Basic Coverage and Top-up Rider (if any).
- Please refer to your online quotation for the actual contribution payable under this plan based on the contribution payment mode that you have selected.
- The contributions are not guaranteed. Contributions may be adjusted on a portfolio basis in consideration of medical inflation and any other factors which may materially affect the sustainability of the portfolio. We will notify you at least thirty (30) days before any revision of the contribution.

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

Type	Amount
Wakalah Fee / Administration Fee	38% of the contribution (includes marketing and administration expenses)

Note:

This plan is developed for online distribution, and may involve marketing collaboration with our business partners / intermediaries.

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

Some of the key terms and conditions that you should be aware of are:

- Duty of Disclosure** – Pursuant to Paragraph 5 of Schedule 9 of the Islamic Financial Services Act 2013, you have a duty to take reasonable care not to provide false or inaccurate information when you apply for this plan. Failure to do so may result in voidance of your contract of Takaful, refusal or reduction of your claim(s), change of the terms or termination of your contract of Takaful. The above duty of disclosure shall continue until the time your contract of Takaful is entered into, varied or renewed with us. You also have a duty to tell us immediately if at any time after your contract of Takaful has been entered into, varied or renewed with us any of the information provided is inaccurate or has changed.
- Deductible Limit** – You will have to pay the applicable amount per admission before we can pay any benefits under your certificate. You can request to change the deductible limit, subject to the terms and conditions of your certificate.
- Waiting Period** – For illness other than specified illnesses, the eligibility for benefits under your certificate will only start thirty (30) days from the effective date or the reinstatement date, whichever is the later. For specified illnesses, the waiting period is one hundred and twenty (120) days.
- Grace Period** – You will have thirty (30) days from the contribution due date (inclusive) to pay each contribution due. If the contribution is not paid at the end of the grace period, your certificate will lapse and the person covered will not have any takaful cover, benefit or value.
- Free-Look Period** – There is a free-look period of fifteen (15) calendar days from the date of delivery of the e-certificate for you to review and decide whether you want to continue with the plan. If you wish to discontinue, you may request to cancel your certificate and get a full refund of your contributions paid.
- Portfolio Withdrawal Condition** – We reserve the right to cancel this plan portfolio as a whole if we decide to discontinue this plan. We will provide a prior notice to the participant and we will run off all certificates to expiry of the current period of cover within the portfolio.

- g. Upgrade Room and Board** – If the person covered is hospitalised at a room and board which is higher than his/her room and board benefit limit, then he/she will need to pay the difference in the room and board charge and the limit.
- h.** You can nominate a nominee(s) and ensure that your nominee(s) is/are aware of your participation in this plan.
- i.** You can choose to make annual, half-yearly, quarterly, or monthly payment. However, the total amount payable with contribution payment mode other than annual payment will be higher than the total amount payable with annual contribution payment mode.
- j.** In order to ensure continuous protection under your certificate, your contribution will be automatically deducted from your chosen debit / credit card based on the contribution payment mode that you have selected.
- k.** You can only be covered by one (1) Takaful myClick MediCare plan.
- l.** If an incident occurs which gives rise to a claim, you shall notify Takaful Malaysia immediately. You may refer to the claims procedures in the Certificate Wording.

Note:

The above list is non-exhaustive. Please refer to the Certificate Wording for the full list of terms and conditions under this plan.

7. What are the major exclusions under this plan?

This plan does not cover the following:

- a.** Any claim caused by pre-existing illness;
- b.** Any claim due to specified illnesses occurring during the first one hundred and twenty (120) days of continuous cover;
- c.** Private nursing care or house calls, rest cures or sanatoria care, illegal drugs, intoxication, sterilisation, venereal Disease and its sequelae, Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) and Human Immunodeficiency Virus (HIV) related Diseases, and any communicable diseases requiring quarantine by law. Diseases such as the Hand, Foot and Mouth Disease (HFMD), dengue fever and measles are not considered as communicable diseases requiring quarantine by law; or
- d.** Any out-patient treatment unless specifically provided under this plan.

Note:

The above list is non-exhaustive. Please refer to the Certificate Wording for the full list of exclusions under this plan.

8. Can I cancel my certificate?

You may request to cancel your certificate within the fifteen (15) calendar days of the free-look period. Under such circumstance, you may get a full refund of your contributions paid. If you choose to surrender your certificate after the fifteen (15) calendar days of the free-look period, you will be entitled to a portion of contribution refund as determined by us provided that you did not make any claims for the current certificate year.

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

It is important that you update in the myTakaful Customer portal or inform us of any changes in your contact details to ensure that all correspondences reach you in a timely manner.

10. Where can I get further information?

Should you require additional information about medical & health takaful, please refer to the insuranceinfo booklet on 'Medical & Health Takaful' available at all our branches or visit insuranceinfo.com.my/.

If you would like to know more about Takaful myClick MediCare, please contact us at:

Customer Service Unit (CSU)

Syarikat Takaful Malaysia Keluarga Berhad [198401019089 (131646-K)]

14th Floor, Annexe Block,

Menara Takaful Malaysia,

No. 4, Jalan Sultan Sulaiman,

50000 Kuala Lumpur.

P.O. Box 11483, 50746 Kuala Lumpur.

Tel: 1-300 88 252 385

Email: csu@takaful-malaysia.com.my

11. Other types of similar takaful cover available:

Please refer to our website at <https://online.takaful-malaysia.com.my/>.

IMPORTANT NOTE:

PARTICIPATING IN A FAMILY TAKAFUL PLAN IS A LONG-TERM FINANCIAL COMMITMENT. YOU SHOULD SATISFY YOURSELF THAT THIS PLAN WILL BEST SERVE YOUR NEEDS. YOU SHOULD READ AND UNDERSTAND THIS PLAN AND CONTACT US DIRECTLY FOR MORE INFORMATION.

Syarikat Takaful Malaysia Keluarga Berhad is licensed under the Islamic Financial Services Act 2013 and regulated by Bank Negara Malaysia.

The information provided in this disclosure sheet is valid as at July 2022.