



Take It Easy Managed Care Programme

Product Disclosure Sheet

(Read this Product Disclosure Sheet before you decide to take out the Take It Easy Managed Care Programme. Be sure to also read the general terms and conditions.)

1. What is this product about?

TAKE IT EASY MANAGED CARE PROGRAMME provides for hospitalisation and surgical expenses incurred due to accident and illnesses covered by the policy. This product also provides you with medical assist card for easy admission and discharge from panel hospitals in Malaysia. The policy also extended to cover Personal Accident benefits and Life Benefits*.

This Policy shall cover each eligible person age between 18 years to 45 years of age unless prior consent has been granted by the Company for any person other than the age stated.

* Underwritten by Hong Leong Life Assurance Berhad

2. What are the covers/ benefits provided?

This policy has one (1) plans covering the following benefits on “As charged” basis:-

Section A - Hospital Medical & Surgical Insurance

Section I – Outpatient Medical (Clinical) Benefits

1. Outpatient Primary Care
2. Outpatient Specialist Care

Section II – Hospital & Surgical Benefits (Description of Services)

1. Hospital Room & Board, each day up to 365 days
2. Intensive Care Unit, up to 365 days
3. Daily-Cash Allowance at Government Hospital – up to 365 days
4. Hospital Supplies and Services
5. Pre-Hospital Diagnostic Services within 31 days preceeding confinement
6. Pre-Hospital Physician Visit within 31 days preceeding confinement
7. Surgical Fees, Anaesthesia & Operating Theatre Fees
8. Anaesthetist Fees
9. Operating Theatre Fees
10. In-Hospital Physician Visit– up to 365 days
11. Post-Hospitalisation Treatment within 60 days from discharge
12. Emergency Accidental Outpatient Treatment – up to 365 days
13. Emergency Accidental Outpatient Dental Treatment
14. Ambulance Fee (road vehicle)

15. *Inpatient Treatment for Mental Illness*
16. *Reimbursement of College Tuition Fees (per semester)*
17. *Repatriation & transport of Mortal Remains (foreign students, Sabahan and Sarawakian students)*
18. *Medical Evacuation Expenses (foreign students, Sabahan and Sarawakian students)*
19. *Medical Report Fee*

Section B - Personal Accident Insurance

1. PERSONAL ACCIDENT BENEFITS

- a. *Death*
- b. *Permanent Disablement*
- c. *Bereavement Allowance*

Section C - Term Life (Underwritten by Hong Leong Assurance)

1. LIFE BENEFITS

- a. *Natural Death*
- b. *Permanent Total Disablement*

Note:

Policy renewability and renewal premium are not guaranteed.

Policy is arranged on an annually renewable basis and premium will be adjusted periodically to reflect both experience and inflation in underlying medical treatment costs.

Changes to benefits and premium revisions can only be made on renewal or at the policy anniversary.

Duration of cover is for one (1) year. It may be renewed on each anniversary of the Date of Inception of the Policy by payment of the premium determined by the Company at the time of renewal.

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

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

Type	Amount
Service Tax	8% of premium

Service Tax (ST) at the rate of 8% is applicable to your insurance premium effective from 1 March 2024.

You are obligated to pay any applicable taxes (which include but not limited to service tax and stamp duty) imposed by the Malaysian tax authorities in relation to your Policy.

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

Importance of Disclosure – You must take reasonable care not to misrepresent when answering questions in the proposal form or in any request made by the Company and check the information you have provided is complete and accurate. You should also disclose all relevant information which may influence the Company in the acceptance of this insurance, decide the terms and the premium you will pay. If you do not take reasonable care and the information provided by you is incomplete or inaccurate, this may affect your claim. Your responsibility to provide complete and accurate information when requested by the Company shall continue until the time of you entering into, making changes to or renewing your insurance.

Cash Before Cover (for individual policyholders only) – This insurance shall not be effective unless the premium due has been paid. The premium warranty condition stated in the policy is hereby deleted.

Premium Warranty (others) – This insurance policy is automatically cancelled unless the full premium is paid within 60 days from commencement date of cover.

Cooling-Off-Period - If this Policy shall have been issued and for any reason whatsoever the Insured Person shall decide not to take up the Policy, the Insured person may return the Policy to the Company for cancellation provided such request for cancellation is delivered by the Insured Person to the Company within fifteen (15) days from the date of delivery of the Policy. The Insured Person is entitled to the return of the full premium paid less deduction of medical expenses incurred by the Company in the issue of the Policy.

Waiting Period - Eligibility for benefits starts 30 days after the Insured has been included in the Policy, except for a covered Accident occurring after the effective date of coverage.

Pre-Existing Illness - shall 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:-

- 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.

Specified Illnesses - Shall mean the following disabilities and its related complications, occurring within the first 120 days of Insurance of the Insured Person:

- 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 disease of the Reproduction system.
- f. Vertebro-spinal disorders (including disc) and knee conditions.

Room & Board Co-Payment – If the Insured is hospitalised at a Room & Board rate which is higher than his/her eligible benefit, the Insured Person shall bear 20% of the other eligible benefits described in the Schedule of Benefits

Claim Procedures - The Insured shall within 30 days of a Disability that incurs claimable expenses, give written notice to us stating full particulars of such event, including all original bills and receipts, and a full Physician's report stipulating the diagnosis of the condition treated and the date the Disability commenced in the Physician's opinion and the Physician's summary of the cost of treatment including medicines and services rendered.

Unless renewed, the coverage will cease on expiry date and we shall strictly not be liable.

Note: This list is non-exhaustive. Please refer to the policy contract for the terms and conditions under this policy.

5. What are the major exclusions under this policy?

This policy does not cover the following events:

- Pre-Existing illnesses.
- Specified Illnesses occurring during the first 120 days of continuous cover.
- Any medical or physical conditions arising within the first 30 days of the Insured Person's cover.
- Plastic / Cosmetic surgery, circumcision, eye examination, glasses and refraction or surgical correction of nearsightedness (Radial Keratotomy) and the use or acquisition of external prosthetic appliances or devices such as artificial limbs, hearing aids, implanted pacemakers and prescriptions thereof
- Dental conditions including dental treatment or oral surgery except as necessitated by Accidental Injuries to sound natural teeth occurring wholly during the Period of Insurance.
- Rest cures or sanatoria care, illegal drugs, intoxication, sterilization, venereal disease and its sequelae, AIDS (Acquired Immune Deficiency Syndrome) or ARC (AIDS Related Complex) and HIV related diseases, and any communicable diseases required quarantine by law.

- Any treatment or surgical operation for congenital abnormalities or deformities including hereditary conditions.
- Pregnancy, child birth, miscarriage, abortion, methods of birth control or treatment pertaining to infertility (except as defined under Maternity Benefit). Erectile dysfunction or treatment related to impotence or sterilization.
- Hospitalisation primarily for investigatory purposes, diagnosis, X-ray examination, general physical or medical examinations, not incidental to treatment or diagnosis of a covered Disability and any preventive treatments or treatments specifically for weight reduction or gain.
- Suicide or intentionally self-inflicted injury while sane or insane.
- War or terrorist activities, active duty in any armed forces.
- Investigation and treatment of sleep and snoring disorders, hormone replacement therapy and alternative therapy such as treatment, medical service or supplies, including but not limited to chiropractic services, acupuncture, acupressure, reflexology, bonesetting, herbalist treatment, massage or aroma therapy or other alternative treatment.
- Psychotic, mental or nervous disorders.
- Costs / expenses of services of non-medical nature, such as television, telephones or similar facilities, admission kit / pack and other ineligible non-medical items.
- Sickness or Injury arising from racing of any kind (except foot racing), hazardous sports and illegal activities.

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

6. Can I cancel my policy?

You may cancel the policy at any time by giving a written notice to us; and provided that no claims have been made during the current policy year, you shall be entitled to refund of premium based on the short-period rate for the unexpired period of cover.

7. What do I need to do if there are changes to my contact/ personal details?

You must advise us in writing as soon as you are aware of any change in the employment, occupation, duties or pursuits of any Insured Person, or any other change which may increase the risk profile of this Policy. You may be required to pay additional premium as a result of any such change.

8. Where can I get further information?

Should you require additional information about medical and health insurance, please refer to the insurance-info booklet on 'Medical and Health Insurance', available at all our branches or you can obtain a copy from the insurance agent or visit www.insuranceinfo.com.my.

If you have any enquiries, please contact us at:

MSIG Insurance (Malaysia) Bhd (46983-W)
No. 42, Jalan KSB 1, Taman Kota Syahbandar,
75200 Melaka
Tel : (06) 289 4333
Fax : (06) 289 4260
Customer Service Hotline: (06) 289 4333
E-mail : msigmmumc@my.msig-asia.com

9. Other types of Medical and Health Insurance cover available:



Nil

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.

This information provided in the Product Disclosure Sheet is valid at 1 June 2024.