

PRODUCT DISCLOSURE SHEET

Please read this Product Disclosure Sheet before you decide to take up the following product.
 Be sure to also read the general terms and conditions of the policy.

MEDI-HELP

(Critical Illnesses Insurance)

1. What is this product about?

This policy provides a lump sum payment should the Insured Person suffers from critical illness as defined in the policy.

2. What are the covered Critical Illnesses?

1. Acquired Immuno-Deficiency Syndrome (AIDS)	13. Coronary Artery Disease	27. Multiple Sclerosis
2. Alzheimer's Disease / Irreversible Brain Disorder	14. Encephalitis	28. Muscular Dystrophy
3. Aplastic Anaemia	15. Fulminant Viral Hepatitis	29. Paralysis / Paraplegia
4. Bacterial Meningitis	16. Heart Attack	30. Parkinson's Disease
5. Benign Brain Tumour	17. Heart Valve Replacement	31. Poliomyelitis
6. Blindness	18. Kidney Failure	32. Primary Pulmonary Arterial Hypertension
7. Brain Surgery	19. Loss of Hearing / Deafness	33. Stroke
8. Cancer	20. Loss of Independent Existence	34. Surgery to Aorta
9. Cardiomyopathy	21. Loss of Speech	35. Systemic Lupus Erythematosus with Lupus Nephritis
10. Chronic Liver Disease	22. Major Burns	36. Terminal Illness
11. Chronic Lung Disease	23. Major Head Trauma	
12. Coma	24. Major Organ Transplant	
	25. Medullary Cystic Disease	
	26. Motor Neurone Disease	

3. How much is the sum insured?

You have the option to choose from any one of the five (5) plans below:

Plan	Ringgit Malaysia				
	A	B	C	D	E
Sum Insured	125,000	100,000	75,000	50,000	25,000

Duration of cover is for one year. The Pacific Insurance Berhad shall give 30 days written notice in the event of revision of premium. If a claim has been made on the policy, the policy shall no longer be renewed.

4. How much premium do I have to pay?

The premium payable is based on age of next birthday but a premium loading may apply depending on underwriting requirements of The Pacific Insurance Berhad. Different premium rates apply to smokers and non-smokers. The premium for standard risks are as follows:

ANNUAL PREMIUM RATES FOR NON-SMOKERS

Age Next Birthday	Plan				
	A	B	C	D	E
30 days - 18 years - Male	113	96	80	63	46
30 days - 18 years - Female	171	142	114	86	58
19 years - 25 years - Male	140	118	95	73	51
19 years - 25 years - Female	204	167	133	98	64
26 years - 30 years - Male	155	129	104	79	55
26 years - 30 years - Female	237	190	150	110	69
31 years - 35 years - Male	245	196	153	112	71
31 years - 35 years - Female	350	280	211	148	89
36 years - 40 years - Male	372	297	224	156	92
36 years - 40 years - Female	479	383	288	193	111
41 years - 45 years - Male	786	630	472	314	163
41 years - 45 years - Female	671	536	403	268	143
46 years - 50 years - Male	1,351	1,080	810	541	271
46 years - 50 years - Female	934	748	561	374	188
51 years - 55 years - Male	2,325	1,859	1,394	930	465
51 years - 55 years - Female	1,516	1,213	910	607	304
56 years - 60 years - Male	4,008	3,207	2,405	1,604	802
56 years - 60 years - Female	2,486	1,989	1,491	994	497
61 years - 65 years - Male (renewal only)	5,655	4,525	3,393	2,263	1,131
61 years - 65 years - Female (renewal only)	3,368	2,694	2,021	1,347	674
66 years - 70 years - Male (renewal only)	8,230	6,584	4,937	3,292	1,646
66 years - 70 years - Female (renewal only)	4,382	3,506	2,629	1,753	877

ANNUAL PREMIUM RATES FOR SMOKERS

Age Next Birthday	Plan				
	A	B	C	D	E
30 days – 18 years - Male	143	120	97	74	52
30 days – 18 years - Female	229	186	147	107	68
19 years – 25 years - Male	170	142	113	86	57
19 years – 25 years - Female	268	214	166	120	75
26 years – 30 years - Male	199	165	130	97	63
26 years – 30 years - Female	327	262	196	141	84
31 years – 35 years - Male	341	273	205	145	87
31 years – 35 years - Female	495	396	297	198	113
36 years – 40 years - Male	540	432	324	217	121
36 years – 40 years - Female	705	564	424	282	149
41 years – 45 years - Male	1,252	1,001	751	501	251
41 years – 45 years - Female	1,009	807	605	404	202
46 years – 50 years - Male	2,162	1,730	1,298	865	433
46 years – 50 years - Female	1,425	1,141	856	571	286
51 years – 55 years - Male	3,644	2,915	2,187	1,458	730
51 years – 55 years - Female	2,302	1,842	1,382	920	460
56 years – 60 years - Male	6,098	4,878	3,659	2,440	1,219
56 years – 60 years - Female	3,745	2,996	2,246	1,498	749
61 years – 65 years - Male (renewal only)	8,585	6,868	5,151	3,434	1,717
61 years – 65 years - Female (renewal only)	5,055	4,044	3,033	2,022	1,011
66 years – 70 years - Male (renewal only)	12,600	10,080	7,561	5,040	2,520
66 years – 70 years - Female (renewal only)	6,578	5,263	3,947	2,632	1,316

5. Apart from the premium, what other fees and charges that I have to pay?

Commission paid to the insurance agent	15% of Gross Premium
Stamp Duty	RM10.00
Government Tax (non-individual)	6% of Gross Premium

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

Importance of Disclosure

You must disclose all material facts such as medical condition and state your age correctly.

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 Pacific Insurance Berhad for cancellation provided such request for cancellation is delivered by the insured person to The Pacific Insurance Berhad 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 Pacific Insurance Berhad in the issue of the policy.

Qualifying or Waiting Period

The eligibility for benefits under the policy will only start thirty (30) days after the effective date of the policy. Unless renewed, the coverage will cease on expiry date and The Pacific Insurance Berhad shall strictly not be liable for any expenses that take place after the expiry date.

Survival Period

The period of 14 days after the diagnosis of a covered critical illness for which the insured person must survive before a claim becomes valid.

Renewal up to age 70 next birthday

The policy is renewable at the option of the policyholder.

Cash Before Cover

The premium due must be paid and received by The Pacific Insurance Berhad before insurance cover is effective.

7. What are the major exclusions under this policy?

No benefits shall be payable under this Policy:

1. If the insured person is diagnosed with any of the Critical Illness within the first 30 days from the commencement date of the policy.
2. If the insured person does not survive the first 14 days from the date he is diagnosed with any of the Critical Illness.
3. When the Critical Illness, directly or indirectly, is caused by, arises in connection with, is a consequence of, or is contributed by any of the following:
 - (a) suicide or attempted suicide, self-inflicted injuries, self-destruction or any attempt thereafter while sane or insane.
 - (b) complication of any surgery, therapy or treatment administered on the insured person which is not prescribed or required by a medical practitioner in his or her professional capacity.
 - (c) alcohol or drug addiction or abuse.
 - (d) any consumption of a drug, unless it is taken on proper medical advice and is not for the treatment of drug addiction.
 - (e) illegal and unlawful acts of the insured person.
 - (f) pre-existing illness
 - (g) pre-existing physical condition.
 - (h) war, invasion, act of foreign enemy, hostilities, warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, mutiny, military rising, military or usurped power, confiscation, detention, nationalisation, requisition, acts of terrorism committed by a person/persons acting on behalf of or in connection with any organisation, martial law or state of siege.
 - (i) nuclear weapons material or ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
 - (j) pregnancy, miscarriage, childbirth or abortion.

In addition to the above exclusions, The Pacific Insurance Berhad will not pay the benefit for any claims arising out of injury sustained by the insured person:

1. while driving any vehicle with more than the legally permitted level of alcohol in the blood, or
2. while riding or pillion-riding on a motorcycle including a moped and a scooter, or
3. being under the influence of intoxicants unless it is established that intoxicants were not a major factor contributing to the injury,
4. while engaging in or involving with naval, military or air force service or operations, or
5. while engaging in any kind of hand-gliding, bungee jumping, parachuting, paragliding or activities in aerial balloon whilst airborne, or
6. while participating or practicing for the taking part in any sports in a professional capacity, or
7. while flying or taking part in other aerial activities except as a passenger in a fully-licensed passenger carrying aircraft but not as a member of the crew nor for the purpose of any trade or technical operation therein.

8. Can I cancel my policy?

You may cancel your policy by giving a written notice to The Pacific Insurance Berhad. However, no premium would be refunded and any premium which you have already paid to The Pacific Insurance Berhad will be used to provide insurance for the remaining duration of the policy.

9. How do I make a claim?

In the event which you may be entitled to claim any of the benefits under this policy, you must:

- a) notify The Pacific Insurance Berhad as soon as possible but not later than thirty (30) days from the date of diagnosis of the Critical Illness, and
- b) within fourteen (14) days of receipt, submit completed claim forms supported by acceptable clinical, radiological, histological, laboratory and other medical evidence that The Pacific Insurance Berhad may require in support of the claim at the policyholder's expense,
- c) and if necessary, submit to a medical examination at The Pacific Insurance Berhad expense as frequently as The Pacific Insurance Berhad requires in connection with any claim.

10. What do I need to do if there are changes in my contact or personal details?

It is important that you inform The Pacific Insurance Berhad of any changes in your contact or personal details to ensure that all correspondences reach you in a timely manner.

11. What other types of Medical and Health Insurance cover are available from The Pacific Insurance Berhad?

Other types of medical insurance covers are available which include but is not limited to:

- a) Medi-Care
- b) Medi-Major
- c) Medi-Pac

12. Where can I get further information?

Should you require additional information about medical and health insurance, please refer to the insuranceinfo booklet on 'Medical & Health Insurance', available at any of The Pacific Insurance Berhad branches or visit www.insuranceinfo.com.my. If you have any other enquiries, please contact :

The Pacific Insurance Bhd,
Level 6 Menara Prudential, 10 Jalan Sultan Ismail, 50250 Kuala Lumpur, Malaysia.
Tel: 03-21761188 Fax: 03-20784928 Toll Free line: 1800 88 1629
Email: customerservice@pacificinsurance.com.my Website: www.pacificinsurance.com.my

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 INSURANCE AGENT OR CONTACT THE PACIFIC INSURANCE BERHAD DIRECTLY FOR MORE INFORMATION.

The information provided in this disclosure sheet is valid as at 01/01/2011.