

PRODUCT DISCLOSURE SHEET

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The Product Disclosure Sheet (PDS) provides some of the key information that you should consider before you buy a medical insurance plan that best meets your needs. You should read your insurance policy contract carefully for full details on your coverage.



Step 1 Is this plan right for you?

- This policy provides a “Top-Up” cover to other basic hospitalisation and surgical insurance policies under the policy up to the age of 80 years. It is a policy of last resort which will only make payment after all avenues of compensation from other medical insurance policies have been fully utilised.
- Your premiums will be pooled with other policyholders’ premiums to pay claims. If the total claims paid out from the pool of fund is high, the premium for all policyholders in the same pool may increase, including your premiums **even if you did not make a claim**.

Step 2 Does it meet your needs?

What is covered?

- Hospital Room and Board: RM100 to RM400
- Surgical Fees: As charged
- Annual Limit: RM25,000 to RM100,000
- Lifetime Limit: RM100,000 to RM400,000

What is not covered?

- Medical conditions that you had or had symptoms of, before buying the plan (i.e.: pre-existing illnesses).
- Diseases requiring quarantine by law.

This is not a complete list. Please read the policy contract carefully for the full details on what is and is not covered.

Step 3 Can you afford the increase in premiums over time?

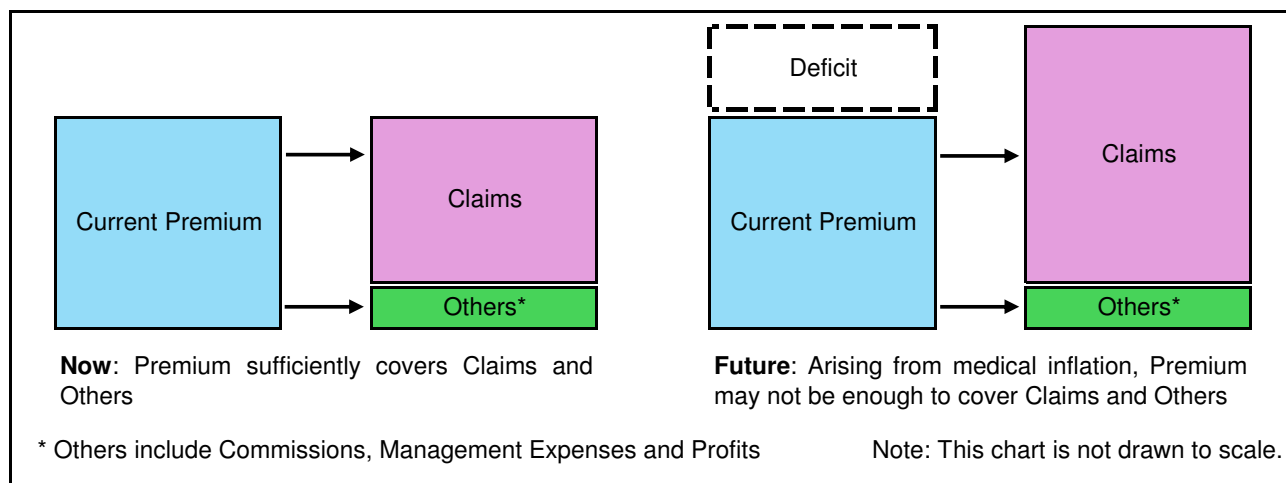
Premium Projection Table

Age	Current premium upon age next birthday for Plan C (RM)	Estimated premium		Over the long term, you can reduce premiums payable by choosing plans with: A lower annual limit.
		Based on medical Inflation of 7% per annum ¹ (RM)	Based on medical inflation of 10% per annum (RM)	
25	173	185	190	
35	202	216	222	
45	273	292	300	
55	401	429	441	
65	969	1,037	1,066	

- The projection above is solely for **illustration purposes only**.
 - Premiums are affected by both the increase in treatment costs and the increased use of healthcare services by policy owners. This can result in actual medical inflation rate being higher or lower than the above illustration. We are undertaking the necessary cost containment measures in co-operation with other stakeholders to manage premium increases over time.
- The bulk of your premiums will go to paying claims. On average, for every RM1.00 of premium paid, RM0.72² is allocated to pay claims. The remainder goes to pay commissions to insurance agent, management expenses and profits of the insurers.

¹ This is the year-on-year increase in the average treatment cost as billed by hospitals to the insurance and takaful industry from years 2020 to 2023.

² This is based on insurance and takaful industry average data from years 2021 to 2023. The actual experience of the plan you purchase may differ from the industry average.



Step 4 What else should you be aware of?

- **Importance of Disclosure** - You must answer the questions that we ask fully and accurately. Failure to take reasonable care in answering the questions may result in rejection of your claim and/or termination of your policy.
- **Cooling-off Period** - If you decide you do not want this policy within 15 calendar days after the policy has been delivered to you, you may submit a cancellation letter to cancel your policy and receive a full refund (less any medical examination expenses incurred).
- **Waiting Period** - Your coverage will only start 30 calendar days after the inception date of your policy.
- **Specified Illness** - Not applicable
- **Hospital Admission Assist** - The optional Hospital Admission Assist (cashless facility) can be extended for insured persons from the age of 61 years by paying additional premium at renewal.
- **Premium** - The premium payable is based on the age of next birthday and is paid annually at the rate applicable during renewal.
- **Commission** - The commission³ paid to the insurance agent is 15% of the annual premium.

This is not a complete list. Please read your policy contract carefully for full details on the key terms and conditions.

³ These figures are based on the current premium upon age next birthday.

Step 5 Have you considered other products that might suit your needs?

Product Option Table

	Recommended Product	Alternative Product Option
Name	PACIFIC Medi-Major Plan C	PACIFIC Medi-Major Plus Plan D
Annual Premium	RM273	RM570 <i>The annual premium is higher by RM297.</i>
Type	From age of 1 to 60 years Pay first, claim later <i>You pay for treatment first and claim from us later.</i>	From age of 1 to 60 years Pay first, claim later <i>You pay for treatment first and claim from us later.</i>
	From age of 61 years and above (if opt for Hospital Admission Assist extension at renewal) Cashless facility <i>We pay directly to hospitals.</i>	From age of 61 years and above Cashless facility <i>We pay directly to hospitals.</i>
Coverage Term	Until age 80 <i>Renewal is at the option of the policyholder but premium rates are not guaranteed.</i>	Until age 80 <i>Renewal is at the option of the policyholder but premium rates are not guaranteed.</i>
Co-insurance	Not applicable	Not applicable

Deductible	RM3,500 per disability	RM10,000 per disability
Hospital Room and Board	RM200 per day	RM500 per day
Surgical Expenses	As charged	As charged
Limit Per Disability	RM50,000	RM200,000
Annual Limit	RM50,000	RM200,000
Lifetime Limit	RM200,000	RM600,000

- **Deductible:** Fixed amount that you have to pay before your actual coverage begins. For example: RM3,500 means you have to pay RM3,500 out of your own pocket and we will pay the balance (up to the relevant limits).
- **Limit Per Disability:** Maximum amount you can claim for each disability.
- **Annual Limit:** Maximum amount you can claim in a year.
- **Lifetime Limit:** Maximum amount you can claim throughout your lifetime.

This table does not capture all of the features of products compared. Please ask us or your agent for more information on the differences in features of these products.

Customer's Acknowledgement* (Optional)

Please ensure that you complete this section yourself and fully understand what you are placing your signature for.

☐ I acknowledge that The Pacific Insurance Berhad has provided me with a copy of the PDS.

☐ I have read and understood the key information contained in this PDS.

* A customer's acknowledgement of this PDS shall not prejudice his/her right to seek redress in the event of subsequent disputes over the product terms and conditions.

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Name:

Date:

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