The Pacific Insurance Berhad

PACIFIC Medi-Pac



PRODUCT DISCLOSURE SHEET

FIND OUT MORE

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 comprehensive policy provides for reimbursement of hospitalisation and surgical expenses incurred due to illness and accident up to the age of 80 years.
- 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 RM450

Surgical Fees: As charged

Annual Limit: RM30,000 to RM100,000

Lifetime Limit: RM150,000 to RM500,000

What is not covered?

- Medical conditions that you had or had symptoms of, before buying the plan (i.e.: preexisting 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

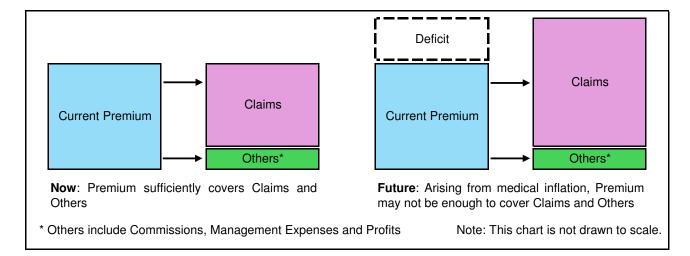
Age	Curent premium upon age	Estimated premium		Over the long term
	next birthday for Plan C (RM)	Based on medical Inflation of 7% per annum ¹ (RM)	Based on medical inflation of 10% per annum (RM)	you can reduce premiums payable by choosing plans with: A lower annual limit.
25	936	1,002	1,030	Triower armaar mint.
35	1,223	1,309	1,345	
45	1,848	1,977	2,033	
55	2,997	3,207	3,297	
65	5,627	6,021	6,190	

- 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 necessarry 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.

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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 calender 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 calender days after the inception date of your policy.
- Specified Illness Not applicable
- **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.

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

Product Options Table

	Recommended Product Alternative Product Options		oduct Options
Name	PACIFIC Medi-Pac Plan C	Option 1 PACIFIC Medi-Pro Plan 200	Option 2 PACIFIC Medi-Care Plan B
Annual Premium	RM1,848	RM1,345 The annual premium is lower by RM503.	RM1,168 The annual premium is lower by RM680.
Туре	Cashless facility We pay directly to hospitals.	Cashless facility We pay directly to hospitals.	Cashless facility We pay directly to hospitals.
Coverage Term	Until age 80 Renewal is at the option of the policyholder but premium rates are not guaranteed.	Until age 100 Renewal is at the option of the policyholder but premium rates are not guaranteed.	Until age 70 Renewal is at the option of the company but premium rates are not guaranteed.
Co- insurance	Not applicable	Not applicable	Not applicable
Deductible	Not applicable	Not applicable	Not applicable
Hospital Room and Board	RM220 per day	RM200 per day	RM200 per day

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

Surgical Expenses	As charged	As charged	RM25,000 and subject to surgical schedule
Annual Limit	RM60,000	RM1,000,000	RM250,000
Lifetime Limit	RM300,000	Not applicable	Not applicable

- ◆ 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	at you are placing your signature fo				
I acknowledge that The Pacific Insurance Berhad has provided me with a	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.					
	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).