

Amanah Medicare
Master Certificate Summary

The benefit(s) payable under eligible certificate is protected by Perbadanan Insurans Deposit Malaysia (“PIDM”) up to limits. Please refer to PIDM’s Takaful and Insurance Benefits Protection System (“TIPS”) Brochure or contact Prudential BSN Takaful Berhad or PIDM (visit www.pidm.gov.my).

MASTER CERTIFICATE SUMMARY INFORMATION

Covered Member should read the following information in line with the conditions stated in this Master Certificate Summary.

1. PROOF OF AGE

In the event of claim, PruBSN requires satisfactory proof of age of Covered Member from claimant if such age was not admitted to PruBSN before.

2. CHANGE OF CONTACT DETAILS

In order for PruBSN to keep Covered Member informed of material information, Covered Member must make sure PruBSN has the Covered Member's latest contact details.

3. CLAIMS SUBMISSION

To make a claim, the written notification via a claim form (obtain from the Master Certificate Holder's website) shall be received by PruBSN at the following address or by email within thirty (30) days from the day the Covered Member receives any Outpatient treatment. PruBSN requires the original bills and receipts in respect of the charges and fees incurred.

Prudential BSN Takaful Berhad 200601020898 (740651-H)

Level 13, Menara Prudential,
Persiaran TRX Barat,
55188 Tun Razak Exchange,
Kuala Lumpur.

E-mail: customer.microtakaful@prubsn.com.my

Covered Members shall fully co-operate with PruBSN by providing relevant information from any Doctor, Clinic or Hospital or other source to expedite the processing of the claims.

Failure to give notice within such time shall not invalidate the claim if it shall be shown to PruBSN's satisfaction that it was not reasonably possible to give such notice and that notice was given as soon as it was reasonably possible.

4. CUSTOMER SERVICE

If Covered Member has any question relating to this takaful coverage, Covered Member may contact/ approach the touch points below.

Branch

PruBSN branches are open between 8:45 a.m. and 4:15 p.m. Monday to Friday (excluding public holidays).

Call

PruBSN **Customer Service** line at **03 2775 7188** during office hours (8:30 a.m. to 5:15 p.m. from Monday to Friday, excluding public holidays).

Mail and E-mail

Write to PruBSN at:

Microtakaful Unit

Prudential BSN Takaful Berhad 200601020898 (740651-H)
Level 13, Menara Prudential,
Persiaran TRX Barat,
55188 Tun Razak Exchange,
Kuala Lumpur.

E-mail: customer.microtakaful@prubsn.com.my

5. **FINANCIAL MARKETS OMBUDSMAN SERVICE AND BANK NEGARA MALAYSIA LAMAN INFORMASI NASIHAT DAN KHIDMAT (BNMLINK)**

Financial Markets Ombudsman Service and Bank Negara Malaysia *Laman Informasi Nasihat dan Khidmat* (BNMLINK) are set up to offer customer protection and help to resolve any disputes over claims.

If the Covered Member has any complaint, or is not satisfied with a decision made by PruBSN, it may be referred to Financial Markets Ombudsman Service and/or BNM Link for deliberation:

Financial Markets Ombudsman Service

(formerly known as Ombudsman for Financial Services)

Level 14, Main Block,
Menara Takaful Malaysia,
No. 4, Jalan Sultan Sulaiman,
50000 Kuala Lumpur.
Tel: +603-2272 2811
Website: www.fmos.org.my

For Enquiries & Complaints

BNMLINK

4th Floor, Podium Bangunan AICB,
No. 10, Jalan Dato' Onn,
50480 Kuala Lumpur.
Tel: 1-300-88-5465 or +603-2174-1717 (for overseas calls)
Fax: +603-2174 1515
Webform: bnm.gov.my/BNMLINK

SHARIAH CONTRACT (‘AQAD)**1. Contractual relationship among the Covered Members with Master Certificate Holder**

Both the Master Certificate Holder and the Covered Members agreed to participate in this plan based on the principles of *Ta`awun* (mutual assistance). The *Tabarru`at* (charitable) contribution for each of the Covered Members made by Master Certificate Holder will be pooled together into the *Tabarru`* Fund to provide for mutual financial benefits payable to all the eligible Covered Members on the occurrence of pre-agreed events based on the agreed takaful benefit under the plan.

2. Contractual relationship between Master Certificate Holder and Covered Members with PruBSN**2.1 *Wakalah***

2.1.1 Master Certificate Holder and Covered Member agreed to appoint and authorise PruBSN to manage this takaful plan and invest the *Tabarru`* Fund. PruBSN is authorised to implement the takaful business in accordance with Shariah principles, legal and regulatory requirements as well as the terms stated herein.

2.1.2 In return for the tasks to be carried out and based on *Wakalah bi al-ujrah* principles, Master Certificate Holder agreed to pay the Upfront *Wakalah* Charges to PruBSN as specified under Master Certificate.

2.1.3 Upon circumstances that would be deemed as mismanagement, negligence or breach of specified terms, PruBSN shall be liable and shall compensate for loss or damage including any actual cost suffered by Master Certificate Holder or Covered Member.

2.1.4 This *Wakalah* contract shall dissolve upon termination to any circumstances as specified under the Master Certificate Summary Clause 4 herein. PruBSN is entitled to the Upfront *Wakalah* Charges for the services rendered.

BASIC PROVISIONS

1. DEFINITIONS

In this Master Certificate Summary, the following words and phrases are defined as below:

- 1.1. **Accident** – shall mean action caused by external and visible means, resulting directly and independently of any other cause by a sudden, unintentional, unexpected, unusual and specific event that happens at an identifiable date, time and place.
- 1.2. **Age** – shall mean age next birthday.
- 1.3. **Clinic** – shall mean any establishment duly licensed and registered as a Clinic intended to be used for the medical care and treatment of the sick and injured persons and which:
 - (a) is under the conduct of a registered medical practitioner at all times; and
 - (b) has facilities for diagnosis and has on its immediate premises services for the dispensation of drugs and medications.
- 1.4. **Covered Member Effective Date** – shall mean the effective date of takaful coverage for each Covered Member.
- 1.5. **Day Surgery** – shall mean a pre-planned surgery which needs the use of a recovery facility at the Hospital/ specialist clinic (but not for overnight stay).
- 1.6. **Diagnosis** – shall mean a definitive Diagnosis made by a Doctor based on specific evidence that PruBSN have mentioned for that specific illness or based on radiological, clinical, and histological or laboratory evidence that PruBSN accepts.

If there is any doubt about the Diagnosis, PruBSN may request an examination of the Covered Member or the evidence used in arriving at such Diagnosis, by an impartial acknowledged expert in the field of medicine concerned and the opinion of such expert as to such Diagnosis shall be considered binding on both Master Certificate Holder or the Covered Member and PruBSN.
- 1.7. **Disability** – shall mean a Sickness, Disease, Illness or all of the Injuries arising out of a single or continuous series of causes.
- 1.8. **Doctor or Physician** – shall mean a registered medical practitioner who is qualified and licensed to practise western/evidence-based medicine. In providing treatment, this person must be practising within the scope of his licensing and training in the geographical area of practice. This person shall not be the Master Certificate Holder, Covered Member, or the Covered Member's spouse or a close relative.
- 1.9. **Hospital** – shall mean an establishment set up and registered as a hospital for the care and treatment of sick and injured people as paying bed patients, and which:
 - (a) has facilities for Diagnosis and major surgery;
 - (b) provides twenty-four (24) hour nursing services by registered and graduate nurses;
 - (c) is under the supervision of a Doctor;

- (d) is not mainly a clinic, a place for alcoholics or drug addicts, a nursing, rest or convalescent home or a home for the elderly, or a similar establishment; and
 - (e) is not psychiatric hospital, which is primarily for treatment of mental illness and/or psychiatric disorders.
- 1.10. **Hospitalised/Hospitalisation** – shall mean a continuous admission of at least six (6) hours in a Hospital and a room-and-board charge has been made by the Hospital in connection with the Hospitalisation.
- 1.11. **Injury** – shall mean bodily injury sustained by the Covered Member caused solely by Accident.
- 1.12. **Medically Necessary** – shall mean medical service which is:
- (a) consistent with the Diagnosis and customary medical treatment for a covered Disability;
 - (b) in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits;
 - (c) not for the convenience of the Covered Member or the Doctor;
 - (d) not of an experimental, investigational or research nature, preventive or screening nature;
 - (e) for which the charges are fair and reasonable and customary for the Disability; and
 - (f) provide treatment directly related to the covered Disability.
- 1.13. **Outpatient** – shall mean the Covered Member is receiving medical care or treatment without being Hospitalised.
- 1.14. **Overall Annual Limit** – shall mean the maximum amount payable for the benefit under this Certificate, in respect of expenses incurred for treatment of all types of Disabilities provided to the Covered Member during the coverage term.
- 1.15. **Prescribed Medicines** – shall mean medicines that are dispensed by a Physician, a registered pharmacist or a Clinic or Hospital and which have been prescribed by a Physician or specialist in respect of treatment for a covered Disability.
- 1.16. **Reasonable and Customary Charges** – shall mean charges for medical care which is Medically Necessary shall be considered reasonable and customary to the extent that it does not exceed the general level of charges being imposed by other legally registered providers of medical or healthcare services of similar standing within Malaysia.

Such charges when incurred, taking into consideration similar or comparable treatment, services or supplies to individual of the same gender and of comparable age of similar Sickness, Disease or Injury and in accordance with accepted medical standards and practice could not have been omitted without adversely affecting the Covered Member's medical condition.

For clarity, Reasonable and Customary Charges do not include tax imposed on the charges for medical care.

- 1.17. **Sickness, Disease, Illness** – shall mean a state of poor physical health that requires medical treatment.
- 1.18. **Tabarru` Deduction** – shall mean voluntary contribution relating to the portion pooled into the *Tabarru` Fund* during the coverage term in accordance with the *Ta`awun* arrangement. PruBSN may revise *Tabarru` Deductions* by giving a thirty (30) days advance notification to the Master Certificate Holder.
- 1.19. **Tabarru` Fund** – shall mean a fund collectively owned by the Master Certificate Holder and Covered Members where the *Tabarru` Deduction* is contributed and pooled together. This fund is used to pay the agreed benefits under the plan on the basis of mutual aid and assistance.

MASTER CERTIFICATE SUMMARY

1. THE CERTIFICATE

- 1.1. This Master Certificate Summary serves as an excerpt of the main provisions of the Master Certificate. It does not replace or supersede the Master Certificate and is subject to any subsequent changes to the Master Certificate.
- 1.2. All interpretation of the benefits and terms mentioned in this document shall be based on the relevant provisions stated in the Master Certificate.
- 1.3. The person who is covered with takaful coverage under this Certificate is referred to as a Covered Member.

2. BENEFITS

- 2.1 PruBSN shall reimburse the Reasonable and Customary Charges for consultation services and treatments rendered by a legally registered Doctor at any legally registered Clinic or Hospital as a result of common Sicknesses and/or bodily Injuries, where Hospitalisation is not required, up to the Overall Annual Limit of Ringgit Malaysia three hundred (RM 300) per year, from the *Tabarru`* Fund. No benefit will be payable if the Covered Member receives treatment that requires Hospitalisation. This benefit is applicable within Malaysia only.

In the event the Overall Annual Limit for a Covered Member has been fully paid, the coverage for the Covered Member shall immediately cease.

3. CLAIMS

3.1 Claims Procedures

The written notice of any claim via a claim form (obtain from the Master Certificate Holder's website) shall be received by PruBSN at the written address or by email within thirty (30) days from the day the Covered Member receives any Outpatient treatment. Covered Member shall provide to PruBSN all documents including original bills and receipts of the consultation services or treatments, and a full Doctor's report. This Doctor's report shall state:

- (a) the Diagnosis of the Disability treated;
- (b) the date the Disability commenced in the Doctor's opinion; and
- (c) the Doctor's summary of the cost of treatment, including medicines and services provided.

All certificates, information, medical reports, evidence and information that PruBSN requires must be given in the way PruBSN requests for, at the Covered Member's own expense. If the Covered Member fails to do so, it will not affect the claim as long as the notice was given as soon as was reasonably possible.

Upon full payment of the benefit, the liability of PruBSN will cease in respect of the takaful coverage for the Covered Member.

3.2 Incomplete Claims

All claims with the complete documents shall be submitted to PruBSN within thirty (30) days of completion of the events for which the claim is being made. Claims are not deemed complete, and benefit will not be payable if all the documents for such claim have not been submitted to and agreed upon by PruBSN. Only actual costs incurred shall be considered for reimbursement.

3.3 Suits Against Third Parties

Nothing in this Master Certificate Summary shall render PruBSN liable or be responsible or to be added as a party in any way whatsoever to any suit for damages which may be instituted by the Master Certificate Holder and/or Covered Member against any third party, such as a provider of medical or dental services or treatments. PruBSN shall not be liable or responsible even if the Master Certificate Holder and/or Covered Member has a right to sue such third party for neglect, malpractice or other causes arising from acts or omissions in the treatment or examination of any Covered Member under the terms of this Master Certificate Summary.

3.4 Coordination of Benefits

PruBSN may reduce the amount of benefit reimbursed to the Covered Member if the Covered Member has received reimbursement for the same medical expenses from other sources. PruBSN will not reimburse any claim that has already been paid by another insurer or takaful operator. The total amount of benefit reimbursed shall not exceed the actual cost incurred for the same Outpatient treatment.

4. TERMINATION

4.1. Takaful coverage under this Certificate in respect of a Covered Member shall terminate immediately:

4.1.1. upon death of the Covered Member; or

4.1.2. upon full payment of Overall Annual Limit of such Covered Member; or

4.1.3. upon receipt of a written instruction from the Master Certificate Holder to terminate the takaful coverage for the Covered Member; or

4.1.4. on the Covered Member's takaful coverage expiry date which is twelve (12) months from Covered Member Effective Date;

whichever occurs first.

5 EXCLUSIONS

5.1 No benefit will be payable, if the claim from the Covered Member is directly or indirectly, wholly or partly caused by any one of the following occurrences:

- (a) primarily for investigatory purposes, Diagnosis, X-ray examination, stem cell therapy, general physical or medical examinations, not incidental to treatment or Diagnosis of a covered Disability or any treatment which is not Medically Necessary and any preventive treatments, preventive medicines or examinations carried out by a Doctor, and treatments specifically for weight reduction or gain or bariatric surgery; or
- (b) elective cosmetic or plastic surgery (except re-constructive surgery necessary to restore function), hyperhidrosis, circumcision, eye examination for near-sightedness, farsightedness or astigmatism, visual aids and refraction or surgical correction of near-sightedness (Radial Keratotomy) and the use or acquisition of external prosthetic appliances or devices such as but not limited to artificial limbs, hearing aids, cochlear apparatus, external or temporary pacemakers and prescriptions thereof; or
- (c) drug abuse, addictive disorders from any kind of substance or alcohol use or misuse, under the influence of alcohol, venereal disease and its sequelae, AIDS (Acquired Immune Deficiency Syndrome) or ARC (AIDS Related Complex) and HIV (Human Immunodeficiency Virus) related diseases, and any communicable diseases which require quarantine by law; or
- (d) suicide, attempted suicide or intentionally self-inflicted injury while sane or insane; or
- (e) participation in racing of any kind (except foot racing), hazardous sports such as but not limited to skydiving, water skiing, underwater activities requiring breathing apparatus, winter sports, professional sports and illegal activities; or
- (f) war or any act of war, declared or undeclared, act of foreign enemies, active duty in any armed forces or any war-like operations; or
- (g) any attempted or actual criminal act, illegal act, or involvement in terrorist activities; or
- (h) direct participation in strikes, riots and civil commotion or insurrection, revolution; or
- (i) ionising radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material; or
- (j) expenses incurred for donation of any body parts or organ by the Covered Member and acquisition of the organ including all costs incurred by the donor during organ transplant and its complications; or
- (k) care or treatment for which payment is not required or to the extent which is payable by any other takaful or insurance or indemnity covering the Covered Member. Any Disability arising out of duties of employment or profession that is covered under a Workman's Compensation Takaful Contract; or
- (l) private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes; or
- (m) expenses incurred for sex changes; or
- (n) failure of the Covered Member to seek or follow reasonable medical advice; or
- (o) more than one (1) Outpatient consultation service or treatment per day at any legally registered Clinic or Hospital;
- (p) cost of Prescribed Medicines without consultation; or
- (q) Outpatient physical therapy or physiotherapy; or
- (r) with respect to Day Surgery, unless the surgery had been Medically Necessary, recommended and approved by a Doctor in accordance with the Diagnosis treatment of the Disability for which the Day Surgery was required.

6 PROHIBITION DUE TO SANCTION OR RELATED OFFENCE

- 6.1 If PruBSN discovers or have justified suspicion that the Covered Member has become a prohibited person or related party to a prohibited person who is subject to sanction by any laws and/or regulations, PruBSN shall terminate or void the Certificate immediately without prior notice. PruBSN shall not transact any business with any parties in connection with the Certificate, including but not limited to, making or receiving any payments under the Certificate.

END OF MASTER CERTIFICATE SUMMARY