

## CERTIFICATE INFORMATION STATEMENT

This Certificate Information Statement 'CIS' provides a summary of the main features/benefits of your plan from MCIS Insurance Berhad (referred to as 'Company', 'Us', 'We' or 'Our') for information purposes. This CIS does not constitute a contract of insurance. It is important that you, as the Principal Member, read through and fully understand the information contained. The list of exclusions here is not exhaustive. Please refer to the Master Policy for the terms and conditions of this product, Merchtrade Insure Medic (MI Medic).

### 1. Age

The proof of Age of the Assured Member will be required prior to payment of any benefits under the Certificate of Assurance unless the Age has already been admitted. If it is not admitted, please submit a photocopy of the Assured Member's identification documents to admit the Age.

### 2. Payment and Premium Amount

The Premium payment facility currently available is via Merchtrade Money / Merchtrade Money Visa Prepaid Card.

The Premium is non-guaranteed and We reserve the right to revise the Premium by giving at least thirty (30) days' prior notice to you and the Master Policyholder. If at any point the product is repriced, the process to be undertaken and communication method will be determined at that time and the Premium revision will be applicable from the next Certificate Anniversary.

### 3. Nomination

Sub-paragraph 5(1), Schedule 10, Section 130 of the Financial Services Act 2013 provides for nomination of a person or persons to receive the policy monies at the time of applying for life assurance or after the Certificate of Assurance is issued. If you have not received the nomination form, please request it from Us.

In the event there is an outstanding claim and the Assured Member passes away, the claim will be paid to the nominee.

For a nominee of a Muslim Principal Member, the policy monies shall be distributed in accordance with Islamic Laws.

### 4. Enquiries

For any information enquiry or service relating to the Certificate of Assurance, please contact:

Merchtrade's Customer Service at:

- Email : [MI\\_enquiries@mtradeasia.com](mailto:MI_enquiries@mtradeasia.com)
- Hotline : 03-8313 8606 [Monday to Friday – 9:00am to 5:30pm (Excluding public holidays)]

Alternatively, you may also seek assistance from Our Customer Contact Centre at:

- Telephone : 03-7652 3388; or
- Email : [customerservice@mcis.my](mailto:customerservice@mcis.my); or
- Write to the address shown in the front cover of the Certificate of Assurance.

### 5. Change of Address or Information

In order for Us to update you with the necessary changes of important information or to send you the renewal notices (if applicable) or any Certificate of Assurance related matters, it is requested that you keep the Master Policyholder informed of your current correspondence address as well as the current correspondence address of the nominee(s).

### 6. Free Look Period

As per Schedule 8 of the Financial Service Act 2013, a Principal Member shall have fifteen (15) days after delivery of the Certificate of Assurance to examine its terms and conditions. A Principal Member may terminate the insurance coverage within the fifteen (15) days of free look period.

If the Principal Member decides not to continue with the insurance coverage due to any reason(s) within the free look period, the Principal Member may cancel the insurance coverage by contacting Merchtrade's Customer Service or by any other formal communication method.

The Company shall refund the full Premium paid through Merchtrade if the cancellation happens within free look period. Merchtrade shall return the Premium refund to the Principal Member's Merchtrade Money / Merchtrade Money Visa Prepaid Card.

Upon cancellation of the Certificate of Assurance, the Certificate of Assurance shall be deemed not effective from the Effective Date.

### 7. Surrender

If the Principal Member decides not to continue with insurance coverage after the free look period, the Principal Member may cancel the insurance coverage by contacting Merchantrade's Customer Service or by any other formal communication method.

The effective date of cancellation shall be the next Premium Due Date. No surrender value shall be payable and no Premium paid will be refunded.

## 8. Grace Period

It is important that you maintain your Certificate of Assurance by paying the Premiums regularly on the due dates in order for you to be eligible for the full benefits under the Certificate of Assurance. Grace period of thirty (30) days from the Premium Due Date will be allowed for payment of each subsequent premium, if any, and the Certificate of Assurance will remain in force during this period. Failure to pay the Premiums after the Grace Period may result in your Certificate of Assurance becoming lapse.

## 9. Benefits

While the insurance coverage for the Assured Member is in force, upon receipt of due proof, subject to the provisions herein contained and upon approval of claim, We will reimburse medical expenses for the Assured Member admitted to any Malaysian Government Hospitals due to Accident or illness up to the Annual Limit and subject to the applicable benefit plan and the terms and conditions stated below:

### 9.1. Limits

#### (a) Annual Limit

Means the limit on the total accumulated benefits payable in respect of expenses incurred for treatment provided to the Assured Member irrespective of a type / types of disability for any one (1) Certificate Year as stated in the Schedule of Benefits. In the event the Annual Limit has been exhausted for the Certificate Year, the insurance coverage under the Certificate of Assurance shall immediately cease to be payable for the remainder of the Certificate Year.

### 9.2. Hospital and Surgical Benefits

#### (a) Hospital Room and Board

Reimbursement of the Reasonable and Customary Charges incurred for Medically Necessary room accommodation and meals.

The amount of the benefit shall be equal to the actual charges made by the Malaysian Government Hospital during the Assured Member's confinement, consistent with the third (3rd) class Room & Board, but in no event shall the benefit exceed the maximum number of days as set forth in the Schedule of Benefits.

The Assured Member will only be entitled to this benefit while confined to a Hospital as an inpatient.

#### (b) Intensive Care Unit

Reimbursement of the Reasonable and Customary Charges incurred for Medically Necessary actual room and board during confinement as an inpatient in the Intensive Care Unit of the Hospital.

This benefit shall be payable equal to the actual charges made by the Malaysian Government Hospital consistent the third (3rd) class Room & Board, subject to the maximum number of days as set forth in the Schedule of Benefits. Where the period of confinement in an Intensive Care Unit exceeds the maximum set forth in the Schedule of Benefits, reimbursement will be restricted to the standard daily Hospital Room and Board rate.

No Hospital Room and Board Benefit shall be paid for the same confinement period where the Intensive Care Unit Benefit is payable.

#### (c) Hospital Supplies and Services

Reimbursement of the Reasonable and Customary Charges actually incurred for:

- general nursing, excluding private in-hospital nursing care;
- prescribed and consumed drugs and medicines;
- dressings, splints, plaster casts;
- x-ray, laboratory examinations, electrocardiograms;
- physiotherapy, basal metabolism tests, rental of appliances;
- intravenous injections and solutions;
- administration of blood and blood plasma but excluding the cost of blood and plasma whilst the Assured Member is confined as an inpatient in a Hospital;
- implants except for pacemakers,

which is Medically Necessary, up to the amount stated in the Schedule of Benefits.

#### (d) Surgical Fees (Excluding Organ Transplantation)

Reimbursement of the Reasonable and Customary Charges for a Medically Necessary surgery by the Specialists, including pre-surgical assessment Specialist's visits to the Assured Member and post-surgery care up to the

maximum number of days from the date of surgery, but within the maximum indicated in the Schedule of Benefits.

If more than one surgery is performed for any one disability, the total payments for all the surgeries performed shall not exceed the maximum stated in the Schedule of Benefits.

- (e) Operating Theatre  
Reimbursement of the Reasonable and Customary Operating Room charges incidental to the surgical procedure.
- (f) Anaesthetist Fees  
Reimbursement of the Reasonable and Customary Charges by the Anaesthetist for the Medically Necessary administration of anaesthesia not exceeding the limits as set forth in the Schedule of Benefits.
- (g) In-Hospital Physician Visit  
Reimbursement of the Reasonable and Customary Charges by a Physician for Medically Necessary visiting an in-paying patient while confined for a nonsurgical disability subject to a maximum number of days as set forth in the Schedule of Benefits.  
  
Payment will not be made for clinical treatment (including medications and subsequent consultation after the illness is diagnosed) or where the Assured Member does not result in hospital confinement for the treatment of the medical condition diagnosed.
- (h) Day Care Surgery  
We shall reimburse the Reasonable and Customary Charges incurred for Medically Necessary treatment by the attending specialist for minor Day Surgery in respect of non-accidental related condition conducted in a Malaysian Government Hospital or a government day care center or government specialist center, which does not require Hospitalisation. This shall include treatment requiring the use of special equipment usually found in Hospitals only. The benefit payable shall not exceed the limits stated in the Schedule of Benefits.
- (i) Ambulance Fees  
Reimbursement of the Reasonable and Customary Charges incurred for Medically Necessary domestic ambulance services (land only) inclusive of attendant to and/or from the Malaysian Government Hospital of confinement.  
  
Payment will not be made if the Assured Member is not hospitalised and subject to the limits set forth in the Schedule of Benefits.
- (j) Applicable Tax  
Reimbursement of the Reasonable and Customary Charges imposed for Applicable Tax on taxable supplies and services, subject to the limits set forth in the Schedule of Benefits. The amount payable for this benefit shall decrease the Annual Limit.
- (k) Hospital Admission Fee and Medical Report Fee  
Reimbursement of the Reasonable and Customary Charges incurred as Malaysian Government Hospital Admission Fee and Medical Report Fee up to the maximum stated in the Schedule of Benefits, arising from hospitalisation for a Medically Necessary treatment.

### 9.3. Outpatient Treatment Benefits

- (a) Outpatient Cancer Treatment  
If an Assured Member is diagnosed with Cancer as defined below, the Company will reimburse the Reasonable and Customary Charges incurred for the Medically Necessary treatment of Cancer performed at Malaysian Government Hospital subject to the limits set forth in the Schedule of Benefits.

Such treatment (radiotherapy or chemotherapy excluding consultation, examination tests, take home drugs) must be received on an Outpatient basis at a Malaysian Government Hospital.

Cancer is defined as the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue for which major interventionist treatment or surgery (excluding endoscopic procedures alone) is considered necessary. Cancer must be confirmed by histological evidence of malignancy. The following conditions are excluded:

- Carcinoma in situ including of the cervix;
- Ductal Carcinoma in situ of the breast;
- Papillary Carcinoma of the bladder & Stage 1 Prostate Cancer;
- All skin cancers except malignant melanoma;
- Stage 1 Hodgkin's disease;
- Tumours manifesting as complications of AIDS.

It is a specific condition of this benefit that notwithstanding the exclusion of pre-existing conditions, this benefit will not be payable for any Assured Member who had been diagnosed as a Cancer patient and/or is receiving Cancer treatment prior to the Effective Date.

(b) Outpatient Kidney Dialysis Treatment

If an Assured Member is diagnosed with Kidney Failure as defined below, the Company will reimburse the Reasonable and Customary Charges incurred for the Medically Necessary treatment of kidney dialysis performed at Malaysian Government Hospital subject to the limits set forth in the Schedule of Benefits.

Such treatment (dialysis excluding consultation, examination tests, take home drugs) must be received on an Outpatient basis at a Malaysian Government Hospital.

Kidney Failure means end stage renal failure presenting as chronic, irreversible failure of both kidneys to function as a result of which renal dialysis is initiated.

It is a specific condition of this benefit that notwithstanding the exclusion of pre-existing conditions, this benefit will not be payable for any Assured Member who has developed chronic renal diseases and/or is receiving dialysis treatment prior to the Effective Date.

## 10. Waiting Period

The Certificate of Assurance is subject to the following Waiting Period:

- (a) Any medical or physical conditions arising within the first thirty (30) days of Waiting Period from the Effective Date except for Accidental Injuries; or
- (b) Specified Illnesses occurring within the first hundred and twenty (120) days of Waiting Period from the Effective Date.

## 11. Exclusions

This product does not cover any Hospitalisation, Surgery or charges caused directly or indirectly, wholly or partially, by any one of the following occurrences:

- (a) Pre-existing Illness;
  - Pre-existing Illness shall mean disabilities that Principal Member and/or the Assured Member has reasonable knowledge of Principal Member and/or the Assured Member may be considered to have reasonable knowledge of a pre-existing condition where the condition is one for which:
    - the Principal Member and/or Assured Member had received or is receiving treatment;
    - medical advice, diagnosis, care or treatment has been recommended;
    - clear and distinct symptoms are or were evident;
    - its existence would have been apparent to a reasonable person in the circumstances.
- (b) Any medical or physical conditions arising within the first thirty (30) days of Waiting Period from the Effective Date except for Accidental Injuries;
- (c) Specified Illnesses occurring within the first hundred and twenty (120) days of Waiting Period from the Effective Date; Specified Illnesses shall mean the following disabilities and its related complications, occurring within the first hundred and twenty (120) days from the Effective Date:
  - Hypertension, diabetes mellitus and cardiovascular disease;
  - All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system;
  - All ear, nose (including sinuses) and throat conditions;
  - Hernias, haemorrhoids, fistulae, hydrocele, varicocele;
  - Endometriosis including disease of the reproduction system;
  - Vertebro-spinal disorders (including disc) and knee conditions.
- (d) Any communicable Diseases requiring quarantine by law;
- (e) Plastic/cosmetic surgery, circumcision, eye examination, glasses, lens and refraction or surgical correction of nearsightedness and farsightedness (Radial Keratotomy) and the use or acquisition of external prosthetic appliances or devices such as artificial limbs, hearing aids and prescriptions thereof;
- (f) Dental conditions including dental treatment or oral surgery; except as necessitated due to Accidental Injuries to sound natural teeth occurring in any Certificate Year and performed by Dentist. In addition, expenses arising from placement of denture and prosthetic services such as bridges, implants and crowns or their replacement will not be payable;
- (g) Private nursing, rest cures or sanatoria care, illegal drugs, intoxication (including but not limited to alcohol and drugs), sterilisation, venereal disease and its sequelae, AIDS (Acquired Immuno-deficiency Syndrome) or ARC (AIDS Related Complex) and HIV (Human Immunodeficiency Virus) related diseases;
- (h) Any treatment or surgical operation for Congenital Conditions or deformities including hereditary conditions;
- (i) Pregnancy, childbirth (including surgical delivery and any surgical or non-surgical procedures on the female reproductive system during surgical delivery), miscarriage, abortion and prenatal or postnatal care and surgical, mechanical or chemical contraceptive methods of birth control or treatment pertaining to infertility. Erectile dysfunction and tests or treatment related to impotence or sterilisation;
- (j) Hospitalisation primarily for investigatory purposes, diagnosis, X-ray examination, 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 Physician, and treatments specifically for weight reduction or gain;
- (k) Suicide, attempted suicide or intentionally self-inflicted Injury while sane or insane;
- (l) War or any act of war, declared or undeclared, criminal or terrorist activities, active duty in any armed forces, direct participation in strikes, riots and civil commotion or insurrection;
- (m) Ionizing radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material;
- (n) Expenses incurred for donation of any body organ by an Assured Member and cost of acquisition of the organ including all costs incurred by the donor during organ transplant and its complications;

- (o) Investigations and treatment of sleep and snoring disorders, hyperhidrosis treatment, hormone replacement therapy, stem cell therapy, PET scan and alternative therapy such as treatment, medical service or supplies, including but not limited to chiropractic services, reflexology, bone setting, herbalist treatment, massage, hyperbaric oxygen therapy or aromatherapy or other alternative treatment, except as provided under the Certificate of Assurance;
- (p) Care or treatment for which payment is not required or to the extent which is payable by any other insurance or indemnity covering the Assured Member and Disabilities arising out of duties of employment or profession that is covered under a Workman's Compensation Insurance Contract or from either sources in respect of Injury or Illness or Disease for which the claim is made;
- (q) Psychotic, mental or nervous disorders, (including any neuroses and their physiological or psychosomatic manifestations);
- (r) Costs/expenses of services of a non-medical nature, such as television, telephones, telex services, broadband services, electricity bills for handphone charging, radios or similar facilities, admission kit/pack and other ineligible non-medical items;
- (s) Sickness or Injury arising from racing of any kind (except foot racing), hazardous sports such as but not limited to parachuting, sky-diving, water skiing, underwater activities requiring breathing apparatus, winter sports, professional sports and illegal activities;
- (t) Engaging in aerial flights other than as a crew member or as a fare-paying passenger of an international Airline operating on a regular scheduled route; Private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes;
- (u) Expenses incurred for sex change;
- (v) Any Outpatient treatment not related to Inpatient treatment, except as provided under the Certificate of Assurance;
- (w) Charges which are not Reasonable and Customary Charges, or any surgery or treatment which is not Medically Necessary, or charges in excess of Reasonable and Customary Charges, or charges which are incurred for Hospitalisation, Pre-Hospitalisation and/or post-Hospitalisation after the Certificate Expiry Date;
- (x) Any hospitalisation, charges, any surgery and/or treatment not received from a Malaysian Government Hospital.

## 12. Termination

### 12.1. Termination of Master Policy

- (a) The Company reserves the right to cancel the portfolio as a whole by giving at least thirty (30) days' notice to the Master Policyholder and Principal Member if it decides to discontinue underwriting this insurance product.
- (b) In the event of portfolio cancellation, the Master Policy will end on the last Certificate Expiry Date issued under this Master Policy. However, the coverage for each respective Assured Member continues until the next Premium Due Date.

### 12.2. Termination of Certificate of Assurance

The Certificate of Assurance shall be automatically terminated at the earliest of any of the following circumstances:

- (a) Upon death of the Assured Member;
- (b) When the Company decides to not renew the Certificate of Assurance;
- (c) On the next Premium Due Date, when the Company decides to discontinue underwriting this insurance product;
- (d) The end of the Certificate Year after the Assured Member attains age sixty-six (66) last birthday;
- (e) When the Certificate of Assurance becomes void;
- (f) When the Certificate of Assurance becomes lapse;
- (g) Upon non-payment of Premium by the due date;
- (h) Any other date on which the Assured Member ceases to be eligible for assurance;
- (i) On the expiry date as stipulated in the Certificate of Assurance; or
- (j) On the next Premium Due Date after a written request from Principal Member for termination of the Certificate of Assurance is received by the Company.

## 13. Renewal

13.1. The renewal of Certificate of Assurance is not guaranteed. The Company may;

- (a) renew the Certificate of Assurance so long as the Premium is paid by the Principal Member; or
- (b) not renew the Certificate of Assurance by giving the Principal Member at least thirty (30) days' prior notice before the Certificate Anniversary.

13.2. If the Assured Member reaches age sixty-six (66) last birthday during the Period of Insurance, the Certificate of Assurance will not be renewable.

13.3. The Certificate of Assurance shall not be renewed in the occurrence of any of the following:

- (a) fraud or misrepresentation of material fact during application; or
- (b) fraudulent or suspected fraudulent claims; or
- (c) when the Company decides to discontinue underwriting this insurance product.

## 14. Sanctions & Unlawful Activities

14.1. The Company may be subject to restrictions imposed by economic and trade sanctions and laws made either by international bodies/countries or Bank Negara Malaysia.

14.2. Therefore, the Company will not provide coverage to Assured Member or be liable to pay any claims or provide benefits to if that exposes the Company in any way to these sanctions or any other applicable laws and regulations. This is applicable to Principal Member and/or any of the individual associated with the Master Policy and the Certificate of Assurance.

14.3. In compliance with Section 16(3) of the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Act 2001 (AMLATFPUAA) and the Malaysian Anti-Corruption Commission Act 2009, the Company reserves the right to withhold or terminate the business/individual application, policy or transactions including claims payment and refunds under the Master Policy and the Certificate of Assurance where it deems fit and proper. The Company shall not be liable for any potential or actual losses arising from or related to any steps taken.

## 15. Changes of Provisions/Clauses

We reserve the right to amend the terms and provision(s) / clause(s) of the Certificate of Assurance in order to comply with Malaysian Law or any governmental statutory or regulatory body or association having supervisory authority or jurisdiction over Us. We may make necessary changes to any provision(s) / clause(s) in the Certificate of Assurance by providing thirty at least (30) days' notice through Merchantrade, by email or other modes of communication.

## 16. Claim Procedures

16.1. If any event happens which may give rise to a claim, the following documents must be provided by Principal Member to Master Policyholder via its branches or representatives:

- (a) Completed claim form.
- (b) Other documents that may be required depending on circumstances.

16.2. The Master Policyholder shall furnish the Company with fully completed claim form with all the relevant documents for assessment at no cost to the Company.

16.3. Claims will be assessed by the Company and notified to the Principal Member within fourteen (14) working days. Any enquiries related to the claim status, you may contact the following:

- (a) Email : [MI\\_enquiries@mtradeasia.com](mailto:MI_enquiries@mtradeasia.com)
- (b) Hotline : 03-8313 8606 [Monday to Friday – 9:00am to 5:30pm (excluding public holidays)]

16.4. Failure to give notice within the stipulated time shall not invalidate any claim provided it can be proven that there is a reasonable justification provided.

## 17. Complaint Handling Unit

The Complaint Handling Unit will deal directly with you. Special and specific procedures are established to handle all complaints in a fair and effective manner. You can direct your complaints to the Complaint Handling Unit as follows:

**Position :** Complaints Officer

**Address :** Wisma MCIS  
Jalan Barat  
46200 Petaling Jaya  
Selangor Darul Ehsan

**Tel No :** 03-7652 3388

**Email :** [complaint@mcis.my](mailto:complaint@mcis.my)

Complaints should preferably be made in writing and sent to the Complaint Handling Unit by hand, normal mail, or email.

Our Corporate Website is [www.mcis.my](http://www.mcis.my) (Go to "Talk To Us" and refer to "Complaints Guide" to find out how you can submit a formal complaint).

You may also approach Our customer contact staff or branches nearest to you to lodge your complaints.

Principal Members' and Assured Members' complaints received from all locations and sources will be monitored closely by the Complaint Handling Unit to ensure satisfactory resolutions.

We take this opportunity to extend Our sincere thanks to you for choosing to insure with Us. In return, We assure you that you will receive the services and benefits as We have committed to you.

## 18. Ombudsman for Financial Services and Bank Negara Malaysia Laman Informasi Nasihat dan Khidmat

The following bodies are authorised to oversee public enquiries and complaints on insurance-related matters. You may contact them for assistance at:

**Ombudsman for Financial Services (OFS)**  
*(Formerly known as Financial Mediation Bureau)*  
Level 14, Main Block,  
Menara Takaful Malaysia,  
No. 4, Jalan Sultan Sulaiman,  
50000 Kuala Lumpur.  
Tel : 03-2272 2811  
Fax : 03-2272 1577

**Bank Negara Malaysia Laman Informasi Nasihat dan  
Khidmat (BNMLINK)**  
Bank Negara Malaysia  
P.O. Box 10922  
50929 Kuala Lumpur.  
Tel : 1-300-88-5465 (1-300-88-LINK)  
Overseas Tel : +603-2174-1717  
Fax : +603-2174-1515  
Web : bnmlink.bnm.gov.my

#### 19. Perbadanan Insurans Deposit Malaysia (PIDM)

The benefit(s) payable under eligible product are protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact MCIS Life or PIDM (visit [www.pidm.gov.my](http://www.pidm.gov.my)).

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