

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 purpose. This CIS does not constitute a contract of insurance. It is important that you, as the principal member, to 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 this certificate 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 payment of premium facility currently available for this product is via Merchtrade Money / Merchtrade Money Visa Prepaid Card.

The premium amount is non-guaranteed and we reserve the right to revise the premium amount 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 is issued. If You have not received it, 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.

A nominee of a Muslim Principal Member, on receipt of the certificate monies shall distribute the certificate monies in accordance with Islamic Laws.

4. For any information enquiry or service relating to your Certificate, please contact:

Master Policyholder Contact Centre at:

- Email : MI_enquiries@mtradeasia.com
- Hotline : 1300-88-8606 [Monday to Friday – 9:00am to 5:30pm (Excluding public holidays)]

Alternatively, You may also seek assistance from our Customer Service Department at:

- Telephone: 03-7652 3388; or
- Email: customerservice@mcis.my; or
- write to the address shown in the front cover of this Certificate.

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 related matters, it is requested that You keep the Master Policyholder informed of Your current correspondence address as well as the current 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 documents 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 from the delivery of the first Certificate document, the Principal Member may cancel the insurance coverage by contacting Merchtrade's Customer Service or 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 this Certificate, this Certificate 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 Merchtrade's Customer Service.

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 by paying the premiums regularly on the due dates in order for You to be eligible for the full benefits under the Certificate. 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 will remain in-force during this period. Failure to pay the premiums after the Grace period may result in Your Certificate 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 one of 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 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 Benefits shall be paid for the same confinement period where the Daily Intensive Care Unit Benefits 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. The 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 of the Certificate.

(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 of the Certificate.

10. This Certificate is subject to the following Waiting Period:

10.1. Any medical or physical conditions arising within the first thirty (30)-days of Waiting Period from the Certificate Effective Date except for Accidental Injuries; or

10.2. Specified Illnesses occurring within the first one hundred and twenty (120)-days of Waiting Period from the Certificate Effective Date.

11. Exclusions:

This product does not cover any hospitalisation, surgery or charges caused directly or indirectly, wholly or partially, by any one (1) of the following occurrences:-

11.1. 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; or
- its existence would have been apparent to a reasonable person in the circumstances.

11.2. Any medical or physical conditions arising within the first thirty (30)-days of Waiting Period from the Certificate Effective Date except for Accidental Injuries;

11.3. Specified Illnesses occurring within the first one hundred and twenty (120)-days of Waiting Period from the Certificate Effective Date;

Specified Illnesses shall mean the following disabilities and its related complications, occurring within the first one hundred and twenty (120)-days from the Certificate 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; and
- Vertebro-spinal disorders (including disc) and knee conditions.

11.4. Any communicable diseases requiring quarantine by law;

11.5. 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;

11.6. 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;

11.7. 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,

11.8. Any treatment or surgical operation for Congenital Conditions or deformities including hereditary conditions;

- 11.9. 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 sterilization;
 - 11.10. 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;
 - 11.11. Suicide, attempted suicide or intentionally self-inflicted injury while sane or insane;
 - 11.12. 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;
 - 11.13. Ionizing radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material;
 - 11.14. 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;
 - 11.15. 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;
 - 11.16. 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;
 - 11.17. Psychotic, mental or nervous disorders, (including any neuroses and their physiological or psychosomatic manifestations);
 - 11.18. 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;
 - 11.19. 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;
 - 11.20. 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;
 - 11.21. Expenses incurred for sex change;
 - 11.22. Any Outpatient treatment not related to Inpatient treatment, except as provided under the Certificate;
 - 11.23. 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; or
 - 11.24. Any hospitalisation, charges, any surgery and/or treatment not received from a Malaysian Government Hospital.
12. Termination
- 12.1. 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 Policy Owner and Principal Member if it decides to discontinue underwriting this insurance product.
 - (b) The Master Policy will end on the last certificate of assurance expiry date issued under this product. However, the coverage for each respective Assured Member continue until the next Premium Due Date.
 - 12.2. Termination of Certificate
 - (a) The Certificate shall be automatically terminate at the earliest of any of the following circumstances: -
 - (i) Upon death of the Assured Member;

- (ii) When the Company decides to not renew the Certificate;
- (iii) On the next Premium Due Date, when the Company decides to discontinue underwriting this insurance product;
- (iv) the end of the Certificate Year after the Assured Member attains age sixty-six (66);
- (v) when the Certificate becomes void;
- (vi) when the Certificate becomes lapse;
- (vii) upon non-payment of premium by the due date;
- (viii) any other date on which the Assured Member ceases to be eligible for assurance;
- (ix) On the expiry date as stipulated in the Certificate of Assurance; or
- (x) On the next Premium Due Date after a written request from Principal Member for termination of the Certificate is received by the Company.

13. Certificate Renewal

- 13.1. The Certificate renewal is not guaranteed. The Company may;
- (a) renew the Certificate so long as the Premium is paid by Principal Member; or
 - (b) not renew the Certificate by giving the Principal Member at least thirty (30) days' prior notice before that Certificate anniversary.
- 13.2. If the Assured Member reaches age 66 last birthday during the Period of Insurance, the Certificate will not be renewable after the Certificate Expiry Date.
- 13.3. The certificate shall not be renewed in the occurrence of any of the following:
- (a) fraud or misrepresentation of material fact during application;
 - (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 (AMLA/TFP/AAA) and the Malaysian Anti-Corruption Commission Act 2009, the Company reserves the right to withhold or terminate the business including claims payment under the Master Policy and the Certificate of Assurance where it deems fit and proper. The Company shall deal with all monies payable in respect of the Master Policy and the Certificate of Assurance in a manner it deems appropriate, including but not limited to handing it over to the relevant authorities. The Company shall not be liable for any potential or actual losses arising from or related to any steps taken pursuant to this clause.

15. Changes of Certificate Provisions/Clauses

- 15.1. We reserve the right to amend the terms and provision(s) / clause(s) of the Certificate 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 by providing thirty (30) days' notice through Merchantrade Asia Sdn. Bhd., 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) submit fully completed Claim Form.
 - (b) All documents 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
 - (b) Hotline : 1300-88-8606 [Monday to Friday – 9:00am to 5:30pm (Excluding public holidays)]

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

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

Ombudsman for Financial Services
Level 14, Main Block,
Menara Takaful Malaysia,
No. 4, Jalan Sultan Sulaiman,
50000 Kuala Lumpur
Tel : 03-2272 2811
Fax : 03-2272 1577
(For claim matters only)

Pengarah, Laman Informasi Nasihat dan Khidmat
(BNM LINK)
Tingkat Bawah, Blok D
Bank Negara Malaysia
Jalan Dato' Onn
50480 Kuala Lumpur
Tel : 1-300-88-5465 (General Line)
Fax : 03-2174 1515
Email : bnmtelelink@bnm.gov.my