

Temporary Switch Available for Repriced Medical Plans

As an additional support to customers whose medical plans are being repriced, MCIS Life now allows these customers the ability to temporarily switch to a lower priced plan (with lower benefits) for a limited time.

Please refer to the **Frequently Asked Questions (FAQs)** below for details:

1. Which medical plans are eligible?*

This applies to any medical plan which has either already been repriced or will be repriced. If you have any of these products, you are therefore eligible for this offer:

- MaxHealth Ordinary Life Standalone (Conversion)
- MaxHealth Ordinary Life Rider (Conversion)
- Investment-Linked MaxHealth Rider (Conversion)

*This list may be updated from time to time.

2. What is the temporary switch offer about?

If your plan is eligible (refer to question 1), then you may apply to switch your plan to a lower priced available option.

For example, if you were previously on MaxHealth 200 plan, you may now opt to switch to the MaxHealth 150 plan.

You may revert to your original plan without further underwriting, provided you make this decision within 12 months from the date of opting for the lower priced plan.

3. What happens if I don't revert to my original plan within 12 months?

You will remain on the lower priced plan until we receive further instructions from you. Note that should you wish to revert to your original plan after 12 months, you will be required to undergo medical underwriting.

4. How do I apply for the temporary switch?

You may submit a Service Request Form, which is available in our website (<https://www.mcis.my/Customer-Care/Download-Forms?PDF=Policy-Servicing-Forms>). You may submit the Service Request Form at the nearest branch counter, email it to customerservice@mcis.my or submit the form through your servicing agent.

5. What if I want to revert to my original plan?

If you choose to revert to your original plan within 12 months from opting for the temporary lower priced plan, simply submit a Service Request Form (<https://www.mcis.my/Customer-Care/Download-Forms?PDF=Policy-Servicing-Forms>) to indicate your decision and if you do so

within 12 months, we will process your request without requesting for further underwriting. If you do so after 12 months, then we will also require additional underwriting to process an upgrade.

6. What if I want to upgrade to a higher plan than my original plan?

If you wish to upgrade to a plan that is higher than your original plan, then you will be required to undergo medical underwriting.

7. When will my plan switch take effect?

Plan modifications will take effect from your next premium due date. Service Request Forms must reach us at least 10 working days prior to your next premium due date in order for us to process it in time.

8. My policy has already been repriced this year. Is it too late to switch plans now?

You may still submit a request to opt for a lower priced plan even if your policy repricing date has passed. Remember that this will only take effect from your next premium due date.

9. How will my benefits be affected if I switch to a different plan?

Your plan limits will be based on the benefits applicable to the new plan that you are choosing.

10. Is there a waiting period if I make plan changes?

If you switch to a lower priced plan, no (additional) waiting period applies.
If you revert to your original plan within the 12-month period, no waiting period will apply.
If you upgrade to a plan that is higher than your original plan, waiting period will apply.

11. Who do I contact for more information?

You may speak to your servicing agent or call our Customer Contact Centre at +603 7652 3388 (8.30am – 5.30pm, Monday – Friday).