Head Office:	Postal Address
Wisma MCIS, Jalan Barat,	P.O. Box 345, J
46200 Petaling Jaya,	46916 Petaling
Selangor Darul Ehsan,	Selangor Darul
Malaysia	Malaysia

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PRODUCT DISCLOSURE SHEET	MCIS Insurance Berhad
Read this Product Disclosure Sheet before you decide to take out	MediGap Care
MediGap Care. Be sure to also read the general terms and conditions.	Date

## 1. What is this product about?

MediGap Care is a Group Yearly Renewable Hospitalisation and Surgical plan that offers medical coverage due to illness or accidental injury.

It provides a range of plans and deductible options to choose from. Upon attaining age sixty (60), the medical plan will be converted from a deductible plan to zero deductible plan.

# 2. What are the covers / benefits provided?

Please refer to MediGap Care Application Form for the plan and deductible option selected. The benefit limits of each Life Assured shall be based on the respective plan and deductible option chosen. This plan provides the following benefits:

Benefits isation and Surgical Benefits tospital Room and Board Limit per day and up to 120 days per disability) Intensive Care Unit Limit per day and up to 90 days per disability) Hospital Supplies and Services Surgical Fees post-surgical care is within 90 days following lischarge) Operating Theatre Fees	Plan 1 (RM) 100	Plan 2 (RM) 100	Plan 3 (RM) 150 500	Plan 4 (RM) 150	Plan 5 (RM) 200						
Hospital Room and Board Limit per day and up to 120 days per disability) Intensive Care Unit Limit per day and up to 90 days per disability) Hospital Supplies and Services Surgical Fees post-surgical care is within 90 days following discharge) Operating Theatre Fees	100	100		150	200						
Limit per day and up to 120 days per disability) ntensive Care Unit Limit per day and up to 90 days per disability) Hospital Supplies and Services Surgical Fees post-surgical care is within 90 days following discharge) Dperating Theatre Fees	100	100		150	200						
Limit per day and up to 90 days per disability) Hospital Supplies and Services Surgical Fees post-surgical care is within 90 days following discharge) Operating Theatre Fees			500								
Surgical Fees post-surgical care is within 90 days following lischarge) Operating Theatre Fees											
post-surgical care is within 90 days following lischarge) Dperating Theatre Fees											
			_								
	As Charged, subject to Reasonable & Customary Charges										
Anaesthetist Fees											
Ambulance Fees											
Daycare Surgery											
n-Hospital Physician Visit 2 visits per day and up to 120 days per disability)											
Goods and Services Tax											
/ledical Report Limit per disability)	100										
pitalisation Benefits											
Pre-Hospitalisation Diagnostic Test Benefit within 90 days before hospitalisation)											
Pre-Hospitalisation Specialist Consultation Fee within 90 days before hospitalisation)	As Cha	ged, subject to	o Reasonable	& Customary	Charges						
spitalisation Benefits											
Post Hospitalisation and Daycare Surgery Follow- up Treatment within 90 days after discharge)	As Charged, subject to Reasonable & Customary Charges										
ent Treatment Benefits											
Dutpatient Kidney Dialysis Treatment	A - C'			0.0	01						
Dutpatient Cancer Treatment	As Cha	ged, subject to	o Reasonable	& Customary	Inarges						
Emergency Accidental Outpatient Treatment Limit per Accident, maximum 90 days from date of Accident for follow-up treatment)	1,000	1,000	1,500	1,500	2,000						
	mbulance Fees aycare Surgery -Hospital Physician Visit visits per day and up to 120 days per disability) oods and Services Tax edical Report imit per disability) italisation Benefits re-Hospitalisation Diagnostic Test Benefit <i>i</i> thin 90 days before hospitalisation) re-Hospitalisation Specialist Consultation Fee <i>i</i> thin 90 days before hospitalisation) re-Hospitalisation Specialist Consultation Fee <i>i</i> thin 90 days before hospitalisation) re-Hospitalisation Specialist Consultation Fee <i>i</i> thin 90 days before hospitalisation) pitalisation Benefits ost Hospitalisation and Daycare Surgery Follow- o Treatment <i>i</i> thin 90 days after discharge) tt Treatment Benefits utpatient Kidney Dialysis Treatment utpatient Cancer Treatment mergency Accidental Outpatient Treatment imit per Accident, maximum 90 days from date of	As Char mbulance Fees aycare Surgery -Hospital Physician Visit visits per day and up to 120 days per disability) oods and Services Tax edical Report imit per disability) italisation Benefits re-Hospitalisation Diagnostic Test Benefit <i>i</i> thin 90 days before hospitalisation) re-Hospitalisation Specialist Consultation Fee <i>i</i> thin 90 days before hospitalisation) pitalisation Benefits ost Hospitalisation and Daycare Surgery Follow- o Treatment <i>i</i> thin 90 days after discharge) tt Treatment Benefits utpatient Kidney Dialysis Treatment utpatient Cancer Treatment mergency Accidental Outpatient Treatment imit per Accident, maximum 90 days from date of	As Charged, subject to measure and the set of the set o	As Charged, subject to Reasonable As Charged, subject to Reasonable 100 100 100 100 100 100 100 10	As Charged, subject to Reasonable & Customary ( As Charged, subject to Reasonable & Customary ( Intervention of the subject to Rea						

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18	Emergency Accidental Outpatient Dental Treatment (Limit per Accident, maximum 30 days from date of Accident for follow-up treatment)	1,000	1,000	1,500	1,500	2,000					
Other	Benefits										
19	Home Nursing Care (Limit per Disability)	500									
20	Second Medical Opinion (within 90 days before hospitalisation)	As Charged, subject to Reasonable & Customary Charges									
Limits	5										
21	Overall Annual Limit	75,000	100,000	150,000	200,000	500,000					
22	Overall Lifetime Limit	No Limit									
Dedu	ctible Option										
23	Deductible (per Certificate Year)	5,000; or 10,000; or 30,000; or									

Note:

- If Life Assured is hospitalised at the room & board rate which is higher than the entitled benefit, the Certificate Owner 1. has to pay the exceeded amount in the Hospital Room & Board charges.
- 2. Depending on the Deductible chosen, the Certificate Owner must first pay the fixed amount equivalent to the Deductible selected before the total Eligible Expenses incurred will be payable by Us, subject to Overall Annual Limit.
- 3 Deductible is not applicable to the item 15 to 18 as stated in the Schedule of Benefits above.

Duration of cover is for one (1) year. This plan is renewable, up to Life Assured's age eighty-four (84) next birthday and coverage ceases upon Life Assured age eighty-five (85) next birthday.

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).

### How much premium do I have to pay? 3.

The premium that you will have to pay may vary depending on the plan, deductible option chosen and Life Assured's age next birthday. Please refer to the appendix attached for the annual premium payable. For non-annual premium amount payable, please refer to our sales representatives.

The premium for this plan is not guaranteed. MCIS Insurance Berhad reserves the right to revise the premium rate if the actual claim experience is worse than expected by giving at least thirty (30) days advance written notice.

### What are the fees and charges that I have to pay? 4.

Commission - 10% of premium. Please refer to the appendix attached for the commission amount.

### 5. What are some of the key terms and conditions that I should be aware of?

- Importance of Disclosure You must disclose all material facts such as medical condition, occupation and state the age correctly.
- Free Look Period You may cancel your insurance coverage within fifteen (15) days after you have received the Certificate of Assurance. The premium that you have paid less any medical expenses incurred will be refunded to you without interest.
- Grace Period Grace period will be allowed for each subsequent premium. The Certificate of Assurance will lapse in the event that premium is not paid within the Grace Period. No reinstatement is allowed for this plan. Any re-applying for the plan shall be considered as a new application.
- The claimable amount is on "as charged" basis i.e. reimbursed based on actual charges according to your medical bill, subject to the maximum limits stated in the Schedule of Benefit.
- Renewal The renewal for the Certificate of Assurance is not guaranteed. Unless renewed, the coverage will cease and MCIS Insurance Berhad shall strictly not be liable for any expenses that take place after the Certificate of Assurance ceases.

Note: This list is non-exhaustive. Please refer to the policy contract for the terms and conditions of the policy.

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#### 6 What are the major exclusions under this policy?

This Policy does not cover any Hospitalisation, Surgery or charges caused directly or indirectly, wholly or partly, by any one (1) of the following occurrences:

- **Pre-Existing Conditions**
- Any Disability (except for Injury) and its signs or symptoms that appear within thirty (30) days from the Certificate Effective Date.
- Specified Illness within one hundred and twenty (120) days from the Certificate Effective Date. •
- Plastic/Cosmetic surgery, circumcision (unless Medically Necessary for treatment of a disease), eye examination, glasses, lens and refraction or surgical correction of nearsightedness and farsightedness (Radial Keratotomy or Lasik), the use or acquisition of external prosthetic appliances or devices such as hearing aids, implanted pacemakers, removable splint / brace / immobilizer, equipment such as walking stick / wheelchair / crutches, double eyelids, acne, keloids, scars, skin tags, xanthelasma, gynaecomastia, diffused alopecia / hair loss, or treatment of their complications and prescriptions thereof.
- Dental conditions including dental treatment, oral surgery, cancer, orthognathic surgery, jaw alignment, treatment for the temporomandibular joint, upper and lower jawbone surgery except for direct treatment of acute traumatic injury as necessitated by Accidental Injuries to sound natural teeth occurring wholly in any Certificate Year.
- Private nursing, rest cures or sanitaria care, illegal drugs, intoxication (including but not limited to alcohol and drugs), sterilisation, venereal disease and its sequelae, AIDS (Acquired Immunodeficiency Syndrome) or ARC (AIDS Related Complex) and HIV related diseases, and any communicable diseases required quarantine by law.
- Any treatment, assessment or surgical operation for congenital abnormalities or deformities including hereditary conditions or developmental elements and any Disability or complications arising therefrom inclusive but not restricted to such as dermoid cysts, childhood hernias / hydrocele (all hernia up to age of six (6) is not covered), clubfoot, Ventricular Septal Defect (VSD), Atrial Septal Defect (ASD), Thalassemia, Squint, Haemangioma, Traditional Complimentary Medicine etc.
- 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.
- 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.
- Injuries or Hospitalisation as a result of drug abuse, addictive disorders from substance misuse or while under the influence of alcohol.
- Suicide, attempted suicide, attempted threat or self-inflicted injury while sane or insane.
- 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, rebellions, nuclear war, biological and chemical warfare/activities.
- lonising radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material.
- Expenses incurred for donation of any body organ by a Life Assured and costs of acquisition of the organ including all costs incurred by the donor during organ transportation and storage of the organ including all costs incurred by the donor during organ transplant and its complications.
- Investigation and treatment of sleep and snoring disorders, hormone replacement therapy and alternative therapy, stem cell therapy, PET scan and alternative therapy such as treatment, medical service or supplies, including but not limited to acupressure, reflexology, bonesetting, herbalist treatment, massage or aromatherapy or other alternative treatment.
- Care or treatment for which payment is not required or to the extent which is payable by any other insurance or indemnity covering the Life Assured 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
- Psychotic, mental or nervous disorders (including any neuroses and their physiological or psychosomatic manifestations).
- 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, newspaper and other ineligible nonmedical items.
- Sickness or Injury arising from racing of any kind (except foot racing), hazardous sports such as but not limited to parachuting, skydiving, water skiing, underwater activities requiring breathing apparatus, mountaineering, winter sports, professional sports and rock-climbing.
- As a result of committing, attempting an unlawful act or provoking an assault or a felony or from any violation of law.
- Engaging in aerial flights and private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes.
- Expenses incurred for sex changes.
- Any neonatal medical or physical conditions including birth trauma (a physical injury sustained by an infant during birth) occurring within the first thirty (30) days from the Certificate Effective Date or date of birth, whichever is later.

Note: This list is non-exhaustive. Please refer to the policy contract for the full list of exclusions under the policy.

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## 7. Can I cancel my insurance coverage?

You may cancel your insurance coverage by giving a written notice to MCIS Insurance Berhad. Upon cancellation, you may be entitled to a certain amount of refund of the premium provided you have not made a claim on your insurance coverage.

### What do I need to do if there are changes to my contact details? 8

It is important that you inform us of any change in the contact details to ensure that all correspondence reaches you in a timely manner.

#### Where can I get further information? 9.

Should you require additional information about medical and health insurance, please refer to insuranceinfo booklet on "Medical & Health Insurance" available on www.insuranceinfo.com.my.

# If you have any enquiries, please contact us at:

MCIS Insurance Berhad Registration No. 199701019821 (435318-U) Head Office : Wisma MCIS, Jalan Barat, 46200 Petaling Jaya, Selangor Darul Ehsan, Malaysia Postal Address: P.O. Box 345, Jalan Sultan, 46916 Petaling Jaya, Selangor Darul Ehsan, Malaysia Tel : 03-7652 3388 Fax : 03-7957 1562 Email : customerservice@mcis.my Homepage : www.mcis.my

MCIS Insurance Berhad is licensed under Financial Services Act 2013 and regulated by Bank Negara Malaysia.

## 10. Other similar types of cover available

Please refer to MCIS Insurance Berhad or our sales representatives for other similar types of plans offered by MCIS Insurance Berhad.

## **IMPORTANT NOTE**

YOU SHOULD SATISFY YOURSELF THAT THIS POLICY WILL BEST SERVE YOUR NEEDS. YOU SHOULD READ AND UNDERSTAND THE INSURANCE POLICY AND DISCUSS WITH THE SALES REPRESENTATIVE OR CONTACT THE INSURANCE COMPANY DIRECTLY FOR MORE INFORMATION.

IN THE EVENT OF CONFLICT OF INTERPRETATION BETWEEN ENGLISH AND BAHASA MALAYSIA OR AMBIGUITY ARISING OUT OF THE TRANSLATION TO BAHASA MALAYSIA LANGUAGE, THE ENGLISH TEXT AND ITS INTERPRETATION SHALL PREVAIL.

The information provided in this disclosure sheet is valid as at the <Date>.

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## Appendix – Annual Premium and Commission Table

(Comm stated in the table below shall means Commission)

# Deductible 5,000 (per certificate year)

Plan	1			2				3			4		5			
Room and Board		100		100				150			150		200			
Overall Annual Limit	75,000			100,000			150,000				20,0000		500,000			
Age (Next Birthday)	Premium (RM)	Comm %	Comm amount (RM)													
0 - 4	412.00	10%	41.20	435.00	10%	43.50	503.00	10%	50.30	506.00	10%	50.60	670.00	10%	67.00	
5 -10	287.00	10%	28.70	304.00	10%	30.40	350.00	10%	35.00	353.00	10%	35.30	467.00	10%	46.70	
11 - 15	252.00	10%	25.20	266.00	10%	26.60	307.00	10%	30.70	308.00	10%	30.80	408.00	10%	40.80	
16 - 20	304.00	10%	30.40	313.00	10%	31.30	360.00	10%	36.00	362.00	10%	36.20	483.00	10%	48.30	
21 - 25	347.00	10%	34.70	359.00	10%	35.90	412.00	10%	41.20	414.00	10%	41.40	553.00	10%	55.30	
26 - 30	351.00	10%	35.10	366.00	10%	36.60	422.00	10%	42.20	425.00	10%	42.50	563.00	10%	56.30	
31 - 35	407.00	10%	40.70	431.00	10%	43.10	497.00	10%	49.70	500.00	10%	50.00	664.00	10%	66.40	
36 - 40	417.00	10%	41.70	441.00	10%	44.10	509.00	10%	50.90	512.00	10%	51.20	679.00	10%	67.90	
41 - 45	482.00	10%	48.20	498.00	10%	49.80	573.00	10%	57.30	575.00	10%	57.50	770.00	10%	77.00	
46 - 50	580.00	10%	58.00	607.00	10%	60.70	701.00	10%	70.10	705.00	10%	70.50	936.00	10%	93.60	
51 - 55	843.00	10%	84.30	870.00	10%	87.00	1,001.00	10%	100.10	1,004.00	10%	100.40	1,346.00	10%	134.60	
56 - 59	1,098.00	10%	109.80	1,162.00	10%	116.20	1,342.00	10%	134.20	1,350.00	10%	135.00	1,802.00	10%	180.20	
60*	1,098.00	10%	109.80	1,162.00	10%	116.20	1,342.00	10%	134.20	1,350.00	10%	135.00	1,802.00	10%	180.20	

\* For renewal only

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## Deductible 10,000 (per certificate year)

Plan		1			2		3				4		5				
Room and Board		100		100				150			150			200			
Overall Annual Limit	75,000			100,000			150,000				20,0000		500,000				
Age (Next Birthday)	Premium (RM)	Comm %	Comm amount (RM)														
0 - 4	286.00	10%	28.60	307.00	10%	30.70	354.00	10%	35.40	356.00	10%	35.60	470.00	10%	47.00		
5 -10	200.00	10%	20.00	215.00	10%	21.50	248.00	10%	24.80	249.00	10%	24.90	328.00	10%	32.80		
11 - 15	176.00	10%	17.60	188.00	10%	18.80	217.00	10%	21.70	218.00	10%	21.80	287.00	10%	28.70		
16 - 20	211.00	10%	21.10	219.00	10%	21.90	254.00	10%	25.40	256.00	10%	25.60	344.00	10%	34.40		
21 - 25	240.00	10%	24.00	250.00	10%	25.00	290.00	10%	29.00	293.00	10%	29.30	394.00	10%	39.40		
26 - 30	243.00	10%	24.30	258.00	10%	25.80	298.00	10%	29.80	300.00	10%	30.00	398.00	10%	39.80		
31 - 35	283.00	10%	28.30	304.00	10%	30.40	351.00	10%	35.10	353.00	10%	35.30	465.00	10%	46.50		
36 - 40	290.00	10%	29.00	311.00	10%	31.10	359.00	10%	35.90	361.00	10%	36.10	476.00	10%	47.60		
41 - 45	335.00	10%	33.50	348.00	10%	34.80	403.00	10%	40.30	406.00	10%	40.60	547.00	10%	54.70		
46 - 50	402.00	10%	40.20	428.00	10%	42.80	494.00	10%	49.40	497.00	10%	49.70	659.00	10%	65.90		
51 - 55	584.00	10%	58.40	608.00	10%	60.80	705.00	10%	70.50	710.00	10%	71.00	957.00	10%	95.70		
56 – 59	761.00	10%	76.10	817.00	10%	81.70	944.00	10%	94.40	950.00	10%	95.00	1,261.00	10%	126.10		
60*	761.00	10%	76.10	817.00	10%	81.70	944.00	10%	94.40	950.00	10%	95.00	1,261.00	10%	126.10		

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## Deductible 30,000 (per certificate year)

Plan		1			2			3			4		5				
Room and Board		100		100				150			150			200			
Overall Annual Limit	75,000			100,000			150,000			20,0000			500,000				
Age (Next Birthday)	Premium (RM)	Comm %	Comm amount (RM)														
0 - 4	104.00	10%	10.40	111.00	10%	11.10	127.00	10%	12.70	129.00	10%	12.90	168.00	10%	16.80		
5 -10	74.00	10%	7.40	78.00	10%	7.80	90.00	10%	9.00	91.00	10%	9.10	118.00	10%	11.80		
11 - 15	65.00	10%	6.50	69.00	10%	6.90	79.00	10%	7.90	80.00	10%	8.00	104.00	10%	10.40		
16 - 20	72.00	10%	7.20	76.00	10%	7.60	89.00	10%	8.90	90.00	10%	9.00	123.00	10%	12.30		
21 - 25	84.00	10%	8.40	89.00	10%	8.90	102.00	10%	10.20	104.00	10%	10.40	140.00	10%	14.00		
26 - 30	88.00	10%	8.80	94.00	10%	9.40	108.00	10%	10.80	109.00	10%	10.90	142.00	10%	14.20		
31 - 35	103.00	10%	10.30	110.00	10%	11.00	126.00	10%	12.60	128.00	10%	12.80	166.00	10%	16.60		
36 - 40	105.00	10%	10.50	112.00	10%	11.20	129.00	10%	12.90	131.00	10%	13.10	170.00	10%	17.00		
41 - 45	117.00	10%	11.70	124.00	10%	12.40	143.00	10%	14.30	146.00	10%	14.60	195.00	10%	19.50		
46 - 50	143.00	10%	14.30	153.00	10%	15.30	176.00	10%	17.60	179.00	10%	17.90	233.00	10%	23.30		
51 - 55	199.00	10%	19.90	209.00	10%	20.90	244.00	10%	24.40	247.00	10%	24.70	341.00	10%	34.10		
56 - 59	270.00	10%	27.00	289.00	10%	28.90	334.00	10%	33.40	339.00	10%	33.90	445.00	10%	44.50		
60*	270.00	10%	27.00	289.00	10%	28.90	334.00	10%	33.40	339.00	10%	33.90	445.00	10%	44.50		

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## Deductible zero - Above Age 60

Plan		1			2			3			4		5			
Room and Board		100		100			150				150		200			
Overall Annual Limit	75,000			100,000			150,000				20,0000		500,000			
Age (Next Birthday)	Premium (RM)	Comm %	Comm amount (RM)													
61 – 65*	1,354.00	10%	135.40	1,388.00	10%	138.80	1,515.00	10%	151.50	1,520.00	10%	152.00	1,978.00	10%	197.80	
66 – 70*	1,969.00	10%	196.90	2,019.00	10%	201.90	2,204.00	10%	220.40	2,211.00	10%	221.10	2,877.00	10%	287.70	
71 – 75*	2,769.00	10%	276.90	2,839.00	10%	283.90	3,099.00	10%	309.90	3,109.00	10%	310.90	4,042.00	10%	404.20	
76 – 80*	4,078.00	10%	407.80	4,182.00	10%	418.20	4,568.00	10%	456.80	4,582.00	10%	458.20	5,967.00	10%	596.70	
81 – 85* * For renowal	4,662.00	10%	466.20	4,779.00	10%	477.90	5,217.00	10%	521.70	5,235.00	10%	523.50	6,801.00	10%	680.10	

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