

PRODUCT DISCLOSURE SHEET

(Read this Product Disclosure Sheet before you decide to take out any of the following product. Be sure to also read the general terms and conditions of the policy.)

Product MediGuard Premier, MediGuard Family, MediGuard Lady and MediGuard Senior (*Hospitalization and Surgical Insurance*)

1.	What is this product about?	This policy provides for hospitalization and surgical expenses incurred due to illnesses or injuries covered under the policy.
2.	What are the covers / benefits provided?	Please refer to Schedule of Benefit in the product brochure. Duration of cover is for one year. You need to renew your cover annually unless you have signed up a recurring/instalment payment plan with us.
3.	How much premium do I have to pay?	<p>The total premium that you have to pay may vary depending on the underwriting requirements of the insurance company. Please refer to Premium Table in product brochure.</p> <p>The renewal premium payable is not guaranteed and the Company reserves the right to revise the premium rate applicable at the time of renewal and renewal is subject to conditional renewal.</p> <p><i>Note:</i> Please refer to the brochure for the full details of the premium table.</p>
4.	What are the fees and charges that I have to pay?	Commissions is payable up to maximum of 15% and stamp duty charge is RM 10 per policy.
5.	What are some of the key terms and conditions that I should be aware of?	<p>(i) Consequence of Misrepresentation/Fraud/Non-Disclosure – You must disclose all material facts such as medical condition, and state your age and occupation correctly. An Insurer has the right to repudiate liability in the event that you failed to disclose relevant information that would affect the decision of the Insurer to accept or reject the risk, and on the premiums and terms to be applied to you.</p> <p>(ii) Cooling-Off Period – If this Policy shall have been issued and for any reason whatsoever you shall decide not to take up the Policy, you may return the Policy to the company for cancellation provided such request is delivered to the company within 15 days from the date of delivery of the Policy. You are entitled to the return of the full premium paid less deduction of medical expenses incurred by the company in the issue of the Policy.</p> <p>(iii) Waiting or Qualifying Period – No benefit shall be payable for any illness occurred or contracted during the first 30 days of the effective date of this insurance for the first year Policy, except for accident.</p> <p>(iv) Unless renewed, the coverage will cease on expiry date and the insurance company shall strictly not be liable for any expenses that take place after the expiry date.</p> <p>(v) Upgraded Room and Board Co-Payment – If the Insured Person is hospitalized at a published Room & Board rate which is higher than his eligible benefit, the Insured Person shall bear 20% of the other eligible benefits described in the Schedule of Benefit but subject to a maximum limit of RM 3,000 per Disability for plans described in the Schedule of Benefit with Overall Annual Limit not exceeding RM 100,000 or subject to a maximum limit of RM 5,000 per Disability for plans described in the Schedule of Benefit with Overall Annual Limit exceeding RM 100,000.</p> <p>(vi) Please keep your receipt for proof of payment.</p> <p>(vii) Policy will be issued within 7 working days upon full and complete documents.</p> <p>(viii) Please note that if a plan has been switched from or to another insurer/plan, the similar benefits and terms may not be given depending on the assessment.</p>
6.	What are the major exclusions under this policy?	<p>The policy shall not cover:</p> <ul style="list-style-type: none"> • Pre-existing illness/condition • Specified illness occurring during the first 120 days of continuous cover • Waiting period – any medical or physical conditions arising within the first 30 days except for accidental injuries <p><i>Note:</i> This list is non-exhaustive. Please refer to the policy contract for the full list of exclusions under this policy.</p>

7.	Can I cancel my policy?	<p>You may cancel your policy by giving a written notice to the insurance company. Upon cancellation, you are entitled to a certain amount of refund of the premium provided that you have not made a claim on the policy.</p> <table border="0"> <tr> <td>Period Not Exceeding:</td> <td>Refund of Annual Premium</td> </tr> <tr> <td>15 days</td> <td>90% (applicable to renewal only)</td> </tr> <tr> <td>1 month</td> <td>80%</td> </tr> <tr> <td>2 months</td> <td>70%</td> </tr> <tr> <td>3 months</td> <td>60%</td> </tr> <tr> <td>4 months</td> <td>50%</td> </tr> <tr> <td>5 months</td> <td>40%</td> </tr> <tr> <td>6 months</td> <td>30%</td> </tr> <tr> <td>7 months</td> <td>25%</td> </tr> <tr> <td>8 months</td> <td>20%</td> </tr> <tr> <td>9 months</td> <td>15%</td> </tr> <tr> <td>10 months</td> <td>10%</td> </tr> <tr> <td>11 months</td> <td>5%</td> </tr> <tr> <td>Period exceeding 11 months</td> <td>No refund</td> </tr> </table> <p><i>Note :</i> The above is not applicable if premium payment is on monthly basis.</p>	Period Not Exceeding:	Refund of Annual Premium	15 days	90% (applicable to renewal only)	1 month	80%	2 months	70%	3 months	60%	4 months	50%	5 months	40%	6 months	30%	7 months	25%	8 months	20%	9 months	15%	10 months	10%	11 months	5%	Period exceeding 11 months	No refund
Period Not Exceeding:	Refund of Annual Premium																													
15 days	90% (applicable to renewal only)																													
1 month	80%																													
2 months	70%																													
3 months	60%																													
4 months	50%																													
5 months	40%																													
6 months	30%																													
7 months	25%																													
8 months	20%																													
9 months	15%																													
10 months	10%																													
11 months	5%																													
Period exceeding 11 months	No refund																													
8.	What do I need to do if there are changes to my contact details?	It is important that you inform Kurnia Insurans (M) Berhad of any change in your contact details to ensure that all correspondences reach you in a timely manner.																												
9.	Where can I get further information?	<p>Should you require additional information about medical and health insurance, please refer to the <i>insuranceinfo</i> booklet on 'Medical & Health Insurance', available at any of Kurnia Insurans (M) Berhad branches or visit www.insuranceinfo.com.my. If you have any enquiries, please contact us at:</p> <p>Kurnia Insurans (M) Berhad Menara Kurnia No. 9 Jalan PJS 8/9 46150 Petaling Jaya Selangor Tel: 03-7876 9988 Fax: 03-7874 9772 E-mail: corporate@kurnia.com</p>																												
10.	Other types of Medical and Health Insurance cover available	MediGuard Income (<i>Hospital Income Insurance</i>)																												

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 AGENT OR CONTACT THE INSURANCE COMPANY DIRECTLY FOR MORE INFORMATION.

The information provided in this disclosure sheet is valid as at 1 January 2010.