

Read this Product Disclosure Sheet before you decide to participate in Takaful Malaysia Budi. Be sure to also read the general terms and conditions.

1. What is this plan about?

This plan is a regular contribution Takaful plan that provides coverage for death and Total and Permanent Disability ("TPD") with option to invest in your chosen Investment-Linked Funds ("ILF(s)"). This plan also provides Accelerated Death Expense Benefit upon death of the person covered. In addition, this plan comes with various optional contribution paying riders that provide different type of protection and coverage, including but not limited to critical illness, accidental, hospitalisation benefit and coverage on contribution payable. This plan matures at age [maturity_age] years next birthday.

2. What are the Shariah concepts applicable?

This plan applies the following Shariah concepts:

- a. **Tabarru'** means donation for charitable purposes. Under this plan, the participant donates an amount from the Participant Account to the Participants' Special Account ("Risk Fund") to help other participants. Tabarru' takes into effect when the participant contributes to the Risk Fund.
- b. **Wakalah** refers to a contract where a party, as principal authorizes another party as his agent to perform a particular task on matters that may be delegated, with or without the imposition of a fee. Under this plan, the participant authorises Syarikat Takaful Malaysia Keluarga Berhad ("Takaful Malaysia", "We", "Our" or "Us") to manage the Certificate and in return, Takaful Malaysia will receive a Wakalah fee and Service Charge. In addition, where applicable, the participant allows Takaful Malaysia to receive Fund Management Charge for managing the ILF(s).
- c. **Ju'alah** refers to a contract where a party offers a specified reward to another party who achieved a determined result. Under this plan, the participant allows Takaful Malaysia to receive fifteen percent (15%) of investment profit arising from the Participant Account and fifty percent (50%) of the distributable surplus arising from the Risk Fund, if any, as a performance incentive for Takaful Malaysia's achievement in managing the Participant Account and Risk Fund respectively which results in the profit and surplus.
- d. **Qard** refers to a loan without any interest. Under this plan, Takaful Malaysia will lend an amount of money to the Risk Fund without interest if the Risk Fund is in deficit to pay claim.
- e. **Hibah** refers to transfer of ownership of an asset from a donor to a recipient(s) without any consideration. Under this plan, the benefits payable from the Risk Fund is based on Hibah. The nominee(s) may receive the benefits payable if the nominee(s) is/are beneficiary(ies) under conditional Hibah.

3. What are the covers / benefits provided?

This plan (also referred in this document as the "Basic Plan") covers:

No.	Benefits	Benefits Description										
Basic Plan												
1.	Accelerated Death Expense ("ADE") Benefit	Upon death of the person covered, We will provide immediate financial assistance of [min(10%sum_covered,10,000)] with no questions asked. This benefit will be paid in advance immediately after the death claim notification and will reduce the sum covered of Death Benefit as stated in 2.(a.) below.										
2.	Death Benefit	Upon death of the person covered, a lump sum of the following will be payable: a. RM[sum_covered]; and b. Total Account Value, if any.										
3.	TPD Benefit	Upon TPD of the person covered prior to age 70 years next birthday, a lump sum of the following will be payable: a. RM[sum_covered]; and b. Total Account Value, if any.										
4.	Education Excellence Reward Benefit	If myPayor or myPayor Plus is included in the certificate at inception, We will pay Education Excellence Reward Benefit by referring to the achievements in the examinations taken by the person covered in accordance with the table below:										
		<table border="1"> <thead> <tr> <th>Type of Examination</th> <th>SPM / GCSE</th> <th>STPM</th> <th>STAM</th> <th>A Level</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Type of Examination	SPM / GCSE	STPM	STAM	A Level					
Type of Examination	SPM / GCSE	STPM	STAM	A Level								

		<u>Minimum Required Distinction</u> Grades equivalent to "Mumtaz", "Grade A-", "Grade A", "Grade A+" or "Grade A*"	At least seven (7) subjects with the minimum required distinction	At least three (3) subjects with the minimum required distinction	At least seven (7) subjects with the minimum required distinction	At least three (3) subjects with the minimum required distinction
		Reward per Distinction	RM125			
5.	Maturity Benefit	At the maturity of the certificate, any Total Account Value will be payable.				

Notes:

- Total Account Value refers to any balance in PA plus any balance in ILF(s), if applicable.
- Child lien shall apply for person covered aged less than 5 years next birthday.
- The coverage term for the Basic Plan is [coverage_term] years.

You may enhance the Takaful protection of this plan by adding extra coverage from Our optional contribution paying riders. The following riders are made available subject to additional Tabarru' and contribution payment.

No.	Benefits	Benefits Description
Optional Contribution Paying Riders		
1.	myHospital Cash	<p>In the event the person covered is confined to a hospital due to illness (subject to the waiting period) or accidental injury, this rider pays:-</p> <ol style="list-style-type: none"> Hospitalisation Benefit of [rider_sc] for each complete day of admission in normal ward of a hospital, subject to a maximum of 180 days per certificate year. ICU Benefit of [200%rider_sc] for each complete day of admission in Intensive Care Unit ("ICU") of a hospital, subject to a maximum of 30 days for any one disability. <p><i>If the person covered is aged 1 and 2 on next birthday at the point of claim, 50% and 75% respectively of Hospitalisation Benefit or ICU Benefit is payable.</i></p>
2.	myCritical Illness	<p>In the event the person covered is diagnosed with any of the 48 critical illnesses (subject to the waiting period), [rider_sc] will be payable. At the same time, the sum covered of the Basic Plan will then be reduced by the same amount of benefit paid under this rider.</p> <p>For angioplasty and other invasive treatments for coronary artery disease coverage under the critical illness events, [min(25000,10%rider_sc)] will be payable. Such payout will not terminate this rider, but will reduce the sum covered of the Basic Plan and this rider accordingly.</p> <p>Child lien shall apply for person covered aged less than 5 years next birthday.</p>
3.	myMultipay Critical Illness	<p>In the event the person covered is diagnosed with any of the 47 critical illnesses (subject to the waiting period), [rider_sc] will be payable provided the person covered survives for at least 30 days after the diagnosis date of the critical illness. This rider allows the person covered to make 3 claims and up to 3 times of the rider's sum covered throughout this rider term.</p>

		<p>Each critical illness condition is claimable only once and a minimum of a 12 months waiting period shall apply between each critical illness claim.</p> <p>Child lien shall apply for person covered aged less than 5 years next birthday.</p>
4.	<i>myPA</i>	<p>Upon accidental death, dismemberment or disability of the person covered during the coverage term, a percentage of [rider_sc] will be payable in accordance to the Scale of Indemnity in the Appendix.</p> <p>In addition, double indemnity (i.e. [rider_sc]) will payable in the event of death caused by the following events: -</p> <ol style="list-style-type: none"> travelling as a passenger in a public conveyance; riding as a passenger in an elevator or electric lift (elevator or electric lift in mines or in a building under construction is excluded); or in consequence of the burning of any theatre, cinema, hotel or other public building in which the person covered shall be present at the time of commencement of the fire.
5.	<i>myIhram</i>	<p>In the event of death or TPD (prior to age 70 years next birthday) of the person covered, a lump sum amount of [rider_sc] will be payable. In addition, if death or TPD (prior to age 70 years next birthday) of the person covered resulted from an accident during hajj / umrah trip, an additional of [rider_sc] will be payable.</p> <p>Proof of hajj / umrah visa must be provided during claim submission.</p>
6.	<i>myWaiver</i>	<p>Upon diagnosis of any of the 47 critical illnesses of the person covered after the waiting period, the future contributions of [rider_sc] will be waived beginning from the next contribution due date immediately after the occurrence of such event up to the expiry of the Basic Plan.</p>
7.	<i>myPayor</i>	<p>In the event of death or TPD (prior to age 70 years next birthday) to the participant, the future contributions of [rider_sc] will be waived beginning from the next contribution due date immediately after the occurrence of such event up to the expiry of the Basic Plan.</p>
8.	<i>myPayor Plus</i>	<p>In the event of death, TPD or diagnosis of any of the 47 critical illnesses of the participant (subject to the waiting period), the future contributions of [rider_sc] will be waived beginning from the next contribution due date immediately after the occurrence of such event up to the expiry of the Basic Plan.</p>

Please refer to the marketing illustration for the coverage term for the attached rider(s).

You can also increase the balance in the ILF(s) by performing regular contribution top-up via *mySaver* at any time or single contribution top-up after fifteen (15) calendar days from the certificate inception.

4. How much contribution do I have to pay?

- The total contribution that you have to pay and the certificate terms may vary depending on Our underwriting requirements.
- The total contribution that you have to pay under this plan is RM[contribution] [mode_payment]. You have an option to make your contribution by monthly, quarterly, half-yearly or yearly.
- The contribution duration for this plan is [contribution_term] years.

Please refer to the marketing illustration for more details about your contribution payable for the Basic Plan and attached rider(s).



The contributions that you pay contribute to both the savings and protection elements of the product, e.g. death benefits. If you are looking for a takaful certificate with savings / investment element, you may wish to compare the return of this plan with the effective returns of other investment alternatives.

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

- Wakalah fee is deducted upfront as a percentage of contribution to meet Our management expenses and total distribution cost (i.e. commission). Please refer to the details of Wakalah fee and commission below.
 - Basic and Rider contribution for the first ten (10) certificate years (except for *mySaver* contribution)

Certificate Year	1	2	3	4	5	6	7	8	9	10
Contribution Paid (RM)	[Cont]									
Wakalah Fee (%)	[WF%]									
Wakalah Fee (RM)	[WF]									
Commission (%)	[Com%]									
Commission (RM)	[Com]									

- mySaver* contribution
 - Wakalah fee: [X%] of *mySaver* contribution throughout the coverage term amounting RM [X%* *mySaver* contribution] [payment mode].
 - Commission: [X%] of *mySaver* contribution throughout the coverage term amounting RM [X% * *mySaver* contribution] [payment mode].
- Tabarru' will be deducted monthly from the PA and credited into the Risk Fund. Tabarru' varies depending on the sum covered, attained age, gender and occupational class of the person covered (where applicable) and may vary depending on Our underwriting requirements. However, the Tabarru' is not guaranteed. Please refer to the marketing illustration for the total Tabarru' charged under the Basic Plan and the attached rider(s).
- Other charges are as follows:
 - Service Charge of RM5 per month for the Basic Plan and RM1 per month for each attached rider.
 - Fund Management Charge ranging from 1.0% – 1.5% Net Asset Value ("NAV") per annum is to cover the administration costs of investing and managing the ILF(s). You are advised to refer to the Fund Fact Sheet for the Fund Management Charge on your chosen ILF(s).

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

- Duty of Disclosure** – Pursuant to Paragraph 5 of Schedule 9 of the Islamic Financial Services Act 2013, you have a duty to take reasonable care not to provide false or inaccurate information when you apply for this plan. Failure to do so may result in voidance of your contract of Takaful, refusal or reduction of your claim(s), change of the terms or termination of your contract of Takaful. The above duty of disclosure shall continue until the time your contract of Takaful is entered into, varied or renewed with Us. You also have a duty to tell Us immediately if at any time after your contract of Takaful has been entered into, varied or renewed with Us any of the information provided is inaccurate or has changed.

- b. **Free-Look Period** – There is a free-look period of fifteen (15) calendar days from the delivery date of the e-Certificate for you to review and decide whether you want to continue with the plan. If you wish to discontinue, you may cancel the certificate and get a full refund of your contributions paid for the Basic Plan and the attached rider(s) except for *mySaver*. For *mySaver*, the cancellation amount payable shall equal to the sum of:
- the unallocated contributions;
 - value of units that have been deducted (if any) at the unit price on the next valuation date; and
 - any charges that have been deducted;
- less any expenses which may have been incurred for the medical examination of the person covered.
- c. The amount placed under the PA and ILF(s) and the investment profit arising from the PA is not guaranteed and will be based on the actual fund performance.
- d. The risk of investment is borne solely by you and the benefits may be less than your total contributions paid.
- e. If *myHospital Cash* is/are included in your certificate, the applicable rider will be subjected to a waiting period of thirty (30) day from the risk effective date or any reinstatement date of the rider, whichever is the later, except for accidental injury.
- f. If *myCritical Illness*, *myMultipay Critical Illness*, *myWaiver* and/or *myPayor Plus* is/are included in your certificate, the applicable rider will be subjected to a waiting period of sixty (60) days from the risk effective date or any reinstatement date of the rider, whichever is the later, for cancer, heart attack, coronary artery by-pass surgery, serious coronary artery disease and angioplasty and other invasive treatments for coronary artery disease. For critical illnesses other than the above, the waiting period means the thirty (30) days from the risk effective date or any reinstatement date of the rider, whichever is the later. You are advised to refer to the Appendix for the list of critical illnesses covered.
- g. If *myMultipay Critical Illness* is included in your certificate, this rider will be subjected to a survival period of thirty (30) days after person covered has been diagnosed with a covered critical illness.
- h. If *mySaver* is included in your certificate, you are advised to refer to the Fund Fact Sheet of the ILF(s) which you have chosen for the investment strategy and types of assets invest.
- i. **No-Lapse Provision** – Should you continue paying your contribution in full and the payment is up-to-date, your certificate will not lapse within the first five (5) certificate years. The No-Lapse Provision will be revoked if the contribution is not paid up-to-date, and the certificate shall lapse if there are insufficient amount in the PA and ILF(s) to cover the Tabarru' and Service Charge for the Basic Plan and the attached rider(s).
- j. **Lapse** – Your certificate will lapse and no coverage will be provided when the balance in the PA and ILF(s) is exhausted. For the avoidance of doubt, in the event the PA is insufficient to cover the Tabarru' and Service Charge for the Basic Plan and the attached rider(s), We will deduct the required charges from the ILF(s) to avoid lapsation of the certificate.
- k. You must nominate a nominee(s) and ensure that your nominee(s) is / are aware of your participation in this plan.
- l. If an incident occurs which gives rise to a claim, you shall notify Us immediately. You may refer to the claims procedures in your certificate.

Note:

The above list is non-exhaustive. Please refer to your certificate for the full list of terms and conditions under the Basic Plan and the attached rider(s).

7. What are the major exclusions under this plan?

This plan does not cover the following:

Death Benefit

- a. Death due to suicide, while sane or insane, within one (1) year from the risk effective date or at any reinstatement date, whichever is the later.

TPD Benefit

- a. TPD which has existed prior to or on the risk effective date or at any reinstatement date, whichever is the later; or
- b. TPD is resulting directly or indirectly from any of the following causes:
- i. attempted suicide or self-inflicted injuries, while sane or insane;
 - ii. aviation, gliding or any other form of aerial flight other than as a pilot, cabin crew or fare paying passenger of a recognized airline or chartered service;
 - iii. war (whether war be declared or not), revolution or any war like operation;
 - iv. any violation of law by the person covered or any assault or felony as committed, attempted or provoked by him;
 - v. while under the influence of alcohol, narcotics, or mind altering substance; or
 - vi. Acquired Immunodeficiency Syndrome (AIDS), infection by Human Immunodeficiency Virus (HIV) or related conditions.

Critical Illness Benefit

- a. Critical Illness which has existed at the risk effective date or at any reinstatement date, whichever is later;
- b. Critical Illness for which:
 - i. Any condition which existed or was diagnosed during the waiting period or after the expiry of the waiting period but which is related to a condition which existed or was diagnosed during the waiting period, except for critical illness contracted due to injury; or
 - ii. signs and symptoms existed before or during the waiting period which would prompt a reasonable person to seek medical care or attention, though the resulting diagnosis may occur before or after the expiry of the waiting period.
- c. A claim for a critical illness described in b.(i.) and/or b.(ii.) above will not be admissible only because notification of the said claim was given to Us after the expiry of the waiting period;
- d. Any diseases directly or indirectly, caused by or contributed to by nuclear weapons material, ionising, radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. Solely for the purpose of this exclusion, combustion will include any self-sustaining process of nuclear fission;
- e. While under the influence of alcohol, narcotics, or mind altering substance; or
- f. Self-inflicted injuries, while sane or insane.

Hospitalisation Benefit

- a. Pre-Existing Illness;
- b. Hospitalisation caused by Illness or Specified Illness which occurs within the Waiting Period;
- c. Pregnancy, childbirth (including 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.
- d. Psychotic, mental, or nervous disorders, including any neuroses and their physiological or psychosomatic manifestation.
- e. Illness or Injury arising under the influence of alcohol, narcotics, or mind altering substance.
- f. 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.
- g. Ionising, radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material.
- h. Any breach of law by the Person Covered or any assault provoked by him.
- i. Attempted suicide or intentionally self-inflicted Injury whilst sane or insane.
- j. Private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes.
- k. Illness or Injury arising from racing of any kind (except foot racing), hazardous sports such as but not limited to skydiving, water skiing, underwater activities requiring breathing apparatus, winter sports, professional sports and illegal activities.
- l. Acquired Immunodeficiency Syndrome (AIDS), infection by Human Immunodeficiency Virus (HIV) or related conditions.
- m. Hospitalisation that is considered as not reasonable and Medically Necessary in accordance with the diagnosis and treatment of the condition.
- n. Routine medical examination or consultation, cosmetic or dental care and treatment or plastic surgery, organ or tissue donation, gender transformation, experimental or elective surgery or congenital anomalies.

Accidental Benefit

Any claim caused by:

- a. war (whether war be declared or not) or warlike operations, invasion, act of foreign enemies, hostilities, civil war, mutiny, civil commotion assuming the military uprising, insurrection, rebellion, military or usurped power or any act of the person covered acting on behalf of or in connection with any organisation actively directed towards the overthrow by force of any government or to the influencing of it by terrorism or violence;
- b. nuclear weapons material, ionising, radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. Solely for the purpose of this exclusion, combustion will include any self-sustaining process of nuclear fission;

- c. the person covered breaking any law or any assault provoked by him;
- d. suicide, attempted suicide or self-inflicted injury whilst sane or insane;
- e. misuse of drugs or alcohol;
- f. any physical defect or infirmity;
- g. childbirth or miscarriage, pregnancy;
- h. aviation, gliding or any other form of aerial flight other than as a pilot, cabin crew or fare-paying passenger of a recognised airline or charter service;
- i. participation in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- j. anthrax, blood-poisoning, erysipelas, ptomaine poisoning, pyaemia, septicemia and/or tetanus;
- k. military or naval service in time of declared or undeclared war or while under orders for warlike operations or restoration of public order; or
- l. Acquired Immunodeficiency Syndrome (AIDS), infection by Human Immunodeficiency Virus (HIV) or related conditions.

Note:

The above list is applicable depending on the coverage of the Basic Plan and the attached rider(s). It is non-exhaustive. Please refer to your Certificate Wording for the full list of the exclusions under the Basic Plan and the attached rider(s).

8. Can I cancel my certificate?

You may request to cancel your certificate within the fifteen (15) calendar days of the free-look period. If you choose to surrender your certificate after the fifteen (15) calendar days of the free-look period, any balance in the PA and ILF(s) will be payable. However, participating in a family takaful plan is a long-term financial commitment. The accumulated balance that you may get when you surrender the certificate before the maturity period will be much less than the total amount of contribution that you have paid.

9. What do I need to do if there are changes to my contact details?

It is important that you inform Takaful Malaysia of any changes in your contact details to ensure that all correspondences reach you in a timely manner.

10. Where can I get further information?

Should you require additional information about family takaful, please contact Takaful Malaysia at:

Customer Service Unit (CSU)

Syarikat Takaful Malaysia Keluarga Berhad [198401019089 (131646-K)]
27th Floor, Annexe Block,
Menara Takaful Malaysia,
No. 4, Jalan Sultan Sulaiman,
50000 Kuala Lumpur.
P.O. Box 11483, 50746 Kuala Lumpur.
Tel: 1-300 88 252 385
Email: csu@takaful-malaysia.com.my

11. Other similar types of family takaful cover available.

Please ask Our sales representative for other similar types of plans offered by Takaful Malaysia.

IMPORTANT NOTE:

PARTICIPATING IN A FAMILY TAKAFUL PLAN IS A LONG-TERM FINANCIAL COMMITMENT. YOU MUST CHOOSE THE TYPE OF PLAN THAT BEST SUITS YOUR PERSONAL CIRCUMSTANCES. YOU SHOULD READ AND UNDERSTAND THE TAKAFUL CERTIFICATE AND DISCUSS WITH OUR SALES REPRESENTATIVE OR CONTACT TAKAFUL MALAYSIA DIRECTLY FOR MORE INFORMATION.

THE BENEFIT(S) PAYABLE UNDER ELIGIBLE CERTIFICATE IS PROTECTED BY PERBADANAN INSURANS DEPOSIT MALAYSIA (PIDM) UP TO LIMITS. PLEASE REFER TO PIDM'S TAKAFUL AND INSURANCE BENEFITS PROTECTION SYSTEM ("TIPS") BROCHURE OR CONTACT TAKAFUL MALAYSIA OR PIDM (VISIT WWW.PIDM.GOV.MY).

Syarikat Takaful Malaysia Keluarga Berhad is licensed under the Islamic Financial Services Act 2013 and regulated by Bank Negara Malaysia.

The information provided in this disclosure sheet is valid as at [MM/YYYY].

APPENDIX – LIST OF CRITICAL ILLNESSES COVERED FOR [product_ci_selected]
List of Critical Illnesses

1. Alzheimer's Disease / Severe Dementia	25. Major Organ / Bone Marrow Transplant
2. Angioplasty and other invasive treatments for coronary artery disease*	26. Motor Neuron Disease – permanent neurological deficit with persisting clinical symptoms
3. Bacterial Meningitis – resulting in permanent inability to perform Activities of Daily Living	27. Multiple Sclerosis
4. Benign Brain Tumor – of specified severity	28. Muscular Dystrophy
5. Blindness – Permanent and Irreversible	29. Paralysis of limbs
6. Brain Surgery	30. Parkinson's Disease – resulting in permanent inability to perform Activities of Daily Living
7. Cancer – of specified severity and does not cover very early cancers	31. Primary Pulmonary Arterial Hypertension – of specified severity
8. Cardiomyopathy – of specified severity	32. Serious Coronary Artery Disease
9. Chronic Aplastic Anemia – resulting in permanent Bone Marrow Failure	33. Stroke – resulting in permanent neurological deficit with persisting clinical symptoms
10. Coma – resulting in permanent neurological deficit with persisting clinical symptoms	34. Surgery to Aorta
11. Coronary Artery By-Pass Surgery	35. Systemic Lupus Erythematosus with Severe Kidney Complications
12. Deafness – Permanent and Irreversible	36. Third Degree Burns – of specified severity
13. Encephalitis – resulting in permanent inability to perform Activities of Daily Living	37. Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection
14. End-Stage Liver Failure	38. Terminal Illness
15. End-Stage Lung Disease	39. Medullary Cystic Disease
16. Full-blown AIDS	40. Apallic Syndrome (i.e. Persistent Vegetative State)
17. Fulminant Viral Hepatitis	41. Chronic Autoimmune Hepatitis
18. Heart Attack – of specified severity	42. Chronic Relapsing Pancreatitis
19. Heart Valve Surgery	43. Creutzfeldt-Jakob Disease
20. HIV Infection Due to Blood Transfusion	44. Ebola Hemorrhagic Fever
21. Kidney Failure – requiring dialysis or kidney transplant	45. Elephantiasis
22. Loss of Independent Existence	46. Poliomyelitis
23. Loss of Speech	47. Progressive Scleroderma
24. Major Head Trauma – resulting in permanent inability to perform Activities of Daily Living	48. Severe Eisenmenger's Syndrome

*Not applicable to *my*Multipay Critical Illness, *my*Waiver, and *my*Payor Plus.

APPENDIX – SCALE OF INDEMNITY FOR myPA

Section	Description of Payable Events	Percentage of Sum Covered
A.	Accidental Death	100%
B.	Accidental Death – Double Indemnity	200%
C.	Accidental Permanent Disablement	
	1. Loss of two limbs	100%
	2. Loss of both hands, or all fingers and both thumbs	100%
	3. Total loss of sight of both eyes	100%
	4. Total paralysis	100%
	5. Loss of sight of one eye	50%
	6. Loss of arm	
	a. at shoulder	100%
	b. between shoulder and elbow	100%
	c. at elbow	100%
	d. between elbow and wrist	100%
	e. at wrist	100%
	7. Loss of leg	
	a. at hip	100%
	b. between knee and hip	100%
	c. below knee	100%
	8. Loss of hearing	
	a. both ears	75%
	b. one ear	15%
	9. Loss of speech	50%
	10. Loss of fingers	
	a. Four finger and thumb of one hand	50%
	b. Four fingers of one hand	40%
	c. Thumb	
	i. both phalanges	25%
	ii. one phalanx	10%
	d. Index finger	
	i. three phalanges	10%
	ii. two phalanges	8%
	iii. one phalanx	4%
	e. Middle finger	
	i. three phalanges	6%
	ii. two phalanges	4%
	iii. one phalanx	2%
	f. Ring finger	
	i. three phalanges	5%
	ii. two phalanges	4%
	iii. one phalanx	2%
	g. Little finger	
	i. three phalanges	4%
	ii. two phalanges	3%
	iii. one phalanx	2%
	h. Metacarpals	
	i. first or second (additional)	3%
	ii. third, fourth or fifth (additional)	2%
	i. Toes	
	i. all of one foot	15%
	ii. great, both phalanges	5%

	iii. great one phalanx	2%
	iv. other than great if more than one toe lost, each	1%

Notes:

- Permanent total loss of use of member shall be treated as loss of member.
- Where any permanent partial disablement not specified above other than loss of sense of taste or smell, We will adopt a percentage of disablement which in Our opinion is not inconsistent with the provisions of the above.
- The aggregate of all percentage payable in respect of any one accident shall not exceed 100% of the sum covered OR 200% of the sum covered (for double indemnity) of this rider.

The Product Disclosure Sheet (PDS) provides some of the key information that you should consider before you participate in a medical takaful rider that best meet your needs. You should read your takaful certificate contract carefully for full details on your coverage.

FIND OUT MORE



Step 1 Is this rider right for you?

This takaful certificate covers hospitalisation and surgical expenses ("H&S") incurred due to illnesses covered under the certificate until [maturity age] age next birthday ("ANB").

Your takaful contributions will be pooled with other takaful participants' contributions to pay claims. If the total claims paid out from the Takaful Pool is high, the takaful contribution for all participants in the same Takaful Pool may increase, including your takaful contribution **even if you did not make a claim**.

Step 2 Does this rider meet your needs?

What is covered?

- ✓ Hospital Room & Board: RM[Room Board]
- ✓ Surgical expenses: As charged, subject to deductible of [Deductible Limit], per any disability
- ✓ Out-patient Cancer Treatment: As charged
- ✓ Out-patient Kidney Dialysis Treatment: As charged

Benefits payable are on cashless basis and subject to:

- ✓ Overall Annual limit : [Total Annual Limit]
- ✓ Overall Lifetime limit: No lifetime limit

What is not covered?

- ✗ Any claim caused by pre-existing illness.
- ✗ Any claim due to Illness or Specified Illnesses which occurs within the Waiting Period.
- ✗ Pregnancy or childbirth.
- ✗ Any medical care or treatment received primarily for experimental or investigative purposes.



The list above is not exhaustive. For more details, please refer to the Appendix by scanning the QR code above and refer to the Certificate Wording for full information on what is and is not covered.

Step 3 What else should you be aware of?

- You must answer the questions that we ask fully and accurately. Failure to take reasonable care in answering the questions may result in rejection of your claim or termination of your takaful certificate.
- If you decide you do not want this takaful certificate within 15 calendar days after the certificate has been delivered to you, you can contact us to cancel your takaful certificate and receive a full refund (less any medical examination expenses incurred).
- Your coverage will only start 30 calendar days after the risk effective date or the reinstatement date of the takaful certificate, whichever is later, for illness other than specified illnesses. For specified illnesses, your coverage will only start 120 calendar days after the risk effective date or the reinstatement date of the takaful certificate, whichever is later.
- The wakalah fee¹ you have to pay are RM[Wakalah Fee] or [Wakalah Fee]% of total takaful contributions, paid over [x] years, of which commission to your sales representative is RM[Commission] or [Commission]% and management expenses is RM[Management Fee] or [Management Fee]%. The overall details can be found in the Contribution, Fees & Charges table in the Appendix by scanning the QR code.

¹These figures are based on the current takaful contribution upon attained age.



The above list is non-exhaustive. Please refer to Appendix by scanning the QR code for the full details on the key terms and conditions.

Step 4 Have you considered other products that might suit your needs?

Product Options Table			
	Recommended Product	Alternative Product Options	
	myMedic Plan [PXXX]	Option 1 myMediShare [PXXX]	Option 2 myMedic Plan [PXXX]
Annual Takaful Contribution	RMX,XXX <i>This includes the annual takaful contribution for a basic family takaful certificate</i>	RMXXX <i>The annual takaful contribution is [lower/higher] by RMXX</i>	RMX,XXX <i>The annual takaful contribution is [lower/higher] by RMXX</i>
Type	Cashless facility	Cashless facility	Cashless facility
Coverage Term	Until age XX ANB <i>Renewal is guaranteed but takaful contribution rates are not guaranteed</i>	Until age XX ANB <i>Renewal is guaranteed but takaful contribution rates are not guaranteed</i>	Until age XX ANB <i>Renewal is guaranteed but takaful contribution rates are not guaranteed</i>
Co-Takaful²/ Deductible³	[Deductible option]	[Deductible/ co-takaful option]	[Deductible/ co-takaful option]
Hospital Room & Board	RMXX per day	RMXX per day	RMXX per day
Surgical Fees⁴	As charged	As charged	As charged
Overall Annual Limit⁵	RMXXX,XXXX	RMXX,XXXX	RMXXX,XXXX
Overall Lifetime Limit⁶	No lifetime limit	No lifetime limit	No lifetime limit

² **Co-Takaful:** Fixed percentage of a medical charge that you have to pay. E.g. 5% Co-Takaful means you have to pay only 5% of medical bill up to RM500 per certificate year, and we will cover the balance.

³ **Deductible:** Fixed amount you have to pay per any one disability before we can pay any benefit under the plan. E.g. RM3,000 deductible means you have to pay RM3,000 out of your own pocket and we will pay the balance (up to the relevant limits).

⁴ **Surgical Fees:** This is subject to Co-Takaful/ Deductible.

⁵ **Overall Annual limit:** Maximum amount you can claim in a year.

⁶ **Overall Lifetime limit:** Maximum amount you can claim throughout your coverage term.

This table does not capture all of the features of products compared. Please ask us/your sales representative for more information on the differences in features of these products.

Customer's Acknowledgement

Please ensure you are filling this section yourself and are aware of what you are placing your signature for.

I acknowledge that [sales representative's name] has provided me with a copy of the PDS.

I have read and understood the key information contained in this PDS.

*Your acknowledgement of this PDS shall not prejudice your right to seek redress in the event of subsequent disputes over the product terms and conditions.

.....

Name:

Date:

APPENDIX – SCHEDULE OF BENEFITS FOR myMedic

No.	Descriptions of Benefits	Maximum Amount (in RM)			
		Plan 150	Plan 250	Plan 350	Plan 500
A. HOSPITAL AND SURGICAL BENEFITS					
1.	Daily Hospital Room and Board (No limit on number of days)	150 per day	250 per day	350 per day	500 per day
2.	Intensive Care Unit (Maximum 60 days per any one disability)	As charged, subject to the deductible			
3.	Surgical Fees (Post-Surgery care limited to 90 days after hospital discharge)				
4.	Anaesthetist Fees				
5.	Operating Theatre				
6.	Hospital Supplies and Services				
7.	In-Hospital Physician's and Specialist's Visit				
8.	Ambulance Fees				
9.	Day Surgery				
10.	Medical Report Fees	100 per disability			
11.	Daily Cash Allowance at Malaysian Government Hospital (No limit on number of days)	100 per day			
B. OUTPATIENT TREATMENT					
1.	Pre-Hospital Diagnostic Tests (Within 60 days prior to hospitalisation)	As charged, subject to the deductible			
2.	Pre-Hospital Specialist Consultation (Within 60 days prior to hospitalisation)				
3.	Post-Hospitalisation Benefits (Within 90 days after hospital discharge)				
4.	Home Nursing Care Benefit (Up to 180 days lifetime)				
5.	Organ Transplant (Once per lifetime)	As charged			
6.	Out-patient Cancer Treatment				
7.	Out-patient Kidney Dialysis Treatment				
8.	Emergency Accidental Out-patient Treatment (Within 24 hours of an accident, up to 30 days follow-up treatment)				
9.	Emergency Accidental Dental Treatment (Within 24 hours of an accident, up to 14 days follow-up treatment)				
C. OVERALL LIMITS [Applicable to items under both (A) & (B)]					
1.	Overall Annual Limit	300,000	500,000	700,000	1,000,000
2.	Overall Lifetime Limit	No lifetime limit			
D. ADDITIONAL BENEFITS					
1.	International Emergency Medical Assistance Services	Yes			

Notes:

- a) As charged based on the reasonable and customary charges, subject to the deductible and Overall Annual Limit.
- b) If the person covered is admitted to or seek treatment at any Government Hospital, the deductible will be waived.
- c) If the person covered is hospitalised at a room and board which is higher than his/her room and board benefit limit, then he/she will need to pay the difference in the room and board charge and the benefit limit.
- d) Service Charge of RM1 per month and an additional RM4 per month will be deducted as Managed Care Charge.