

HLA Major Medi

Complementing your existing medical and surgical plan
with comprehensive global protection





HLA Major Medi



Escalating Medical Costs

“I have existing medical coverage from my employer. I do not need another plan on my own etc.”

Is the coverage provided by your employer sufficient to cover all your medical costs in event of an illness? While many may say “Yes”, others who have experienced major surgery will tell you that the cover given by their employer may be insufficient. This is especially true since we are experiencing escalating medical costs. Many patients suffering from illnesses or in need of major surgeries find themselves financially strapped as the hospital bills are more than what they are able to claim from their employer and the bills are still coming.

A Plan Just for You

In Hong Leong Assurance, we believe that while we cannot control the medical and surgical costs required for treatment, we can however manage the additional expenses required in case of emergency. That is why Hong Leong Assurance has developed an insurance plan to assist you to pay the additional medical costs that your own savings, other insurance plans or benefits provided by your employer are insufficient to cover.

HLA Major Medi

We introduce to you HLA Major Medi, a comprehensive Hospital and Surgical Insurance plan that offers you the much needed security and financial resources in the event you require medical treatment or surgical intervention from certain covered conditions. With the privileges of worldwide coverage, hassle free hospital admission and bill settlement, 24 hours customer service as well as affordable premiums, you now have the peace of mind in knowing that your health and well-being is taken care of.

Features

1) Affordable Complete Health Care Plan

This is a comprehensive Hospital and Surgical Insurance plan that offers you an attractive range of Benefits. You have 4 plans to choose from and premiums are charged according to Age Bands.

2) **Worldwide Coverage**

You are covered 24 hours a day, 7 days a week wherever you may be (Please refer to Exclusions).

3) **Hong Leong Assurance Medical & Emergency Assistance Services**

Hong Leong Assurance has contracted with a Managed Care Organisation (MCO) to provide 24 hour assistance for:

- a) Admission in Panel Hospitals¹ within Malaysia, subject to Pre-Certification of your impending condition. This Pre-Certification requires a validation of your condition which must satisfy the following criteria:
 - The condition requiring treatment is covered by the policy
 - The required treatment is the best option for you and conforms to all standard medical protocols and practices
 - You may be required by the Hospital to pay a token deposit.
- b) Settlement of validated Hospital bills upon discharge¹.
- c) Domestic Assistance when you travel more than 100km from your place of residence.
- d) International Assistance when you are overseas.

Services provided by the Emergency Assistance Company² include: medical referrals, emergency evacuation or repatriation in the event of a life threatening condition.

¹ These services are subject to eligibility, benefit limit of your option and a waiting period of 3 months after plan issuance.

² These services are not guaranteed benefits and availability of these services will be reviewed from time to time.

4) **Deductible**

Deductible means the Life Assured acts as his own insurer by choosing the required amount of deductible per disability (amount of eligible expenses which will be borne by the Life Assured) and insure the remaining protection required under HLA Major Medi affordable plans.

Deductible options available:

- 1) RM5,000;
- 2) RM10,000 or
- 3) RM15,000

Summary of Benefits

The description of the covered benefit is detailed in the policy contract. However, we reserve the right to amend the terms and provisions of this policy by giving a 30 day prior notice and such amendment will be applicable from the next renewal of this policy.

Non-deductible Benefits

The following benefits shall not be subjected to deductible:

- 1) Daily Cash as a result of hospitalisation due to Road Accidents on a Malaysian Highway
- 2) Daily Cash allowance for each day confined in a Government Hospital
- 3) Outpatient Cancer Treatment
- 4) Outpatient Kidney Dialysis Treatment
- 5) Emergency Evacuation and Repatriation

Eligibility

Any Malaysian who is in good health and age between 1 month and 60 years is eligible. Your policy may be renewed up to age 99.

Commencement of Cover

Coverage will commence immediately for Hospitalisation and Surgery caused by accidents. For all other causes, it will only commence 30 days after acceptance of risk.

Premiums

HLA Major Medi is available in the form of a Traditional Standalone plan or as a Rider to your basic policy.

- 1) The premium you pay for this insurance is based on the Schedule of Annual Premiums. The premium is charged according to your attained age, health status, occupation, etc. and our fees for administering this class of business. You may refer to the Schedule of Annual Premiums based on occupational classes I and II. Extra premium may be charged for adverse medical attributes or for any unusual occupational or territorial exposures.
- 2) Your premiums in future policy years will increase by your attained age according to the Age Bands. Generally, the older you get, the more you will have to pay for the risk of this insurance.
- 3) If you do not pay the premiums or if you fail to pay the premiums when due, your plan may lapse. We will remind you to pay but we cannot be made responsible for your non-payment.

- 4) We may revise the premiums in future, as the premium rates are not guaranteed. If we need to revise, this will be based firstly on your individual claim experience and the claim experience of the entire business portfolio as a whole.
- 5) Any revision of premiums will only be done on policy anniversary. We shall notify you of such review in writing at least 90 days before the review takes place. However, the increase in premium in the past does not necessarily reflect the trend in the future.

Renewal of Plan

Renewal is at the option of the policy owner at each policy anniversary date and is guaranteed up to age 99 at the premium rate applicable at the time of renewal and subject to the terms, conditions and termination. The renewal premiums may be charged according to:

- 1) The original scale if the current environment (claim ratio, inflation rate etc.) continues; or
- 2) A higher scale as compared to the original premium table if the current environment deteriorates i.e. increase in claim ratio, high inflation, increase in medical cost, etc; or
- 3) The plan is not renewed according to the Portfolio Withdrawal Condition as stated in the policy contract.

The above scenarios are not exhaustive and the premium rates may be reviewed under other justified circumstances.

Cooling-Off Period

If the policy have been issued and for any reason whatsoever you shall decide not to take up the policy, you may return the policy to us for cancellation provided such request for cancellation is delivered to us within 15 days from the date of delivery of the policy. You are entitled to the refund of the full premium paid less deduction of medical expenses incurred in the issuance of your policy.

Cancellation

This plan may be cancelled at any time by giving a written notice to us; and provided that no claims have been made during the current policy year, the policy owner shall be entitled to a refund of the premium as prescribed in the policy contract.

Claims

You have to write a notice, of the event covered under this plan, to Hong Leong Assurance within 30 days of the occurrence or commencement of diagnosis, Hospitalisation or Surgery (whichever is earlier).

Switching

Please be aware that there may be implications that will affect your health insurance application if you are switching from one type of health plan to another or from another insurer to Hong Leong Assurance.

Tax Relief

This plan may qualify you for the personal tax relief subject to the final decision of the Inland Revenue Board.

Exclusions

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

- 1) Pre-existing Illness.
- 2) Specified Illnesses occurring during the first 120 days of the continuous cover.
- 3) Any medical or physical conditions arising within the first 30 days of the Life Assured's cover or date of reinstatement whichever is latest except for Accidental Injuries.
- 4) Plastic/Cosmetic surgery, circumcision, eye examination, glasses and refraction or surgical correction of nearsightedness (Radial Keratotomy or Lasik) and the use or acquisition of external prosthetic appliances or devices such as artificial limbs, hearing aids, implanted pacemakers, and prescriptions thereof.
- 5) Dental conditions including dental treatment or oral Surgery except as necessitated by Accidental Injuries to sound natural teeth occurring wholly during the Period of Insurance.
- 6) Private nursing, rest cures or sanatoria care, illegal drugs, intoxication, sterilisation, venereal disease and its sequelae, AIDS (Acquired Immune Deficiency Syndrome) or ARC (AIDS Related Complex) and HIV related diseases, and any communicable Diseases required quarantine by law.
- 7) Any treatment or surgical operation for congenital abnormalities or deformities including hereditary conditions.
- 8) Pregnancy, child birth (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.



- 9) 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.
- 10) Suicide, attempted suicide or intentionally self-inflicted Injury while sane or insane.
- 11) 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.
- 12) Ionising radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material.
- 13) 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 transplant and its complication.
- 14) Investigation and treatment of sleep and snoring disorders, hormone replacement therapy and alternative therapy such as treatment, medical service or supplies, including but not limited to chiropractic services, acupuncture, acupressure, reflexology, bonesetting, herbalist treatment, massage or aroma therapy or other alternative treatment.
- 15) 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.
- 16) Psychotic, mental or nervous disorders (including any neuroses and their physiological or psychosomatic manifestations).
- 17) Costs/expenses of services of a non-medical nature, such as television, telephones, telex services, radios or similar facilities, admission kit/pack and other ineligible non-medical items.
- 18) Sickness 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.
- 19) Private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes.
- 20) Expenses incurred for sex changes.
- 21) Medical treatment provided outside of Malaysia to a Life Assured who is not a citizen of Malaysia;
- 22) Medical treatment provided outside of Malaysia to a Life Assured who does not ordinarily reside in Malaysia;

- 23) Medical treatment provided outside of Malaysia to a Life Assured who travels or resides outside Malaysia for more than 90 consecutive days.
- 24) Medical treatment provided in any country (other than Malaysia) to a Life Assured who is a permanent resident of such country;
- 25) Medical treatment provided outside of Malaysia to a Life Assured pursuing a course of study outside of Malaysia; and
- 26) Medical treatment provided outside of Malaysia to a Life Assured who is exercising employment (whether temporary or otherwise) outside of Malaysia unless notice of such employment outside of Malaysia shall have been given to the Company and provided always that the Company approved the same subject to the terms and conditions as may be determined by the Company and shall then become effective.

Overseas Treatment

If the Life Assured seeks treatment overseas, benefits in respect of the treatment shall be covered subject to the exclusions, limitations and conditions specified in this policy and all Benefits will be payable based on the official exchange rate quoted by Maybank Berhad on the last day of the period of confinement and shall exclude the cost of transport to the place of treatment provided:

- 1) the Life Assured travelling abroad for a reason other than for medical treatment, needs to be confined to a Hospital outside Malaysia as a consequence of a Medical Emergency;
- 2) the Life Assured upon recommendation of a Physician and has to be transferred to a Hospital outside Malaysia because the specialised nature of the treatment, aid, information or decision required can neither be rendered nor furnished nor taken in Malaysia.

Overseas treatment of a Disease, Sickness or Injury which is diagnosed in Malaysia and non-emergency or chronic conditions where treatment can reasonably be postponed until return to Malaysia are excluded.

Definition

- 1) “Pre-existing Illness” shall mean disabilities that the Life Assured has reasonably knowledge of. A Life Assured may be considered to have reasonably knowledge of a pre-existing condition where the condition is one for which:
 - a) the Life Assured had received or is receiving treatment;
 - b) medical advice, diagnosis, care or treatment has been recommended to the Life Assured by a qualified physician;
 - c) clear and distinct symptoms are or were evident; or
 - d) its existence would have been apparent to a reasonable person in the circumstances.

- 2) "Specified Illnesses" shall mean the following disabilities and its related complications, occurring within the first 120 days of Effective Date of Coverage of the Life Assured:
 - a) Hypertension, diabetes mellitus and cardiovascular disease
 - b) All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system
 - c) All ear, nose (including sinuses) and throat conditions
 - d) Hernias, haemorrhoids, fistulae, hydrocele, varicocele
 - e) Endometriosis including disease of the reproduction system
 - f) Vertebro-spinal disorders (including disc) and knee conditions.
- 3) "Reasonable and Customary Charges" shall mean charges for medical care which is Medically Necessary shall be considered reasonable and customary to the extent that it does not exceed the general level of charges being made by others of similar standing in the locality where the charge is incurred, when furnishing like or comparable treatment, services or supplies to an individual of the same sex and of comparable age for a similar Sickness, Disease or Injury and in accordance with accepted medical standards and practice could not have been omitted without adversely affecting the Life Assured's medical condition.
- 4) "Medically Necessary" shall mean a medical service which is
 - a) consistent with the diagnosis and customary medical treatment for a covered disability, and
 - b) in accordance with standards of good medical practice, consistent with current standard of professional medical care, and of proven medical benefits, and
 - c) not for the convenience of the Life Assured or the Physician, and unable to be reasonably rendered out of Hospital (if admitted as an inpatient), and
 - d) not of an experimental, investigational or research nature, preventive or screening nature, and
 - e) for which the charges are fair and reasonable and customary for the disability.

Schedule of Benefits

HLA Major Medi

Designated Plan	MM 150 (RM)	MM 200 (RM)	MM 300 (RM)	MM 400 (RM)				
Hospital & Surgical								
Hospital Room & Board (up to 150 days per any one disability)	150	200	300	400				
Daily Cash as a result of hospitalisation due to Road Accidents on a Malaysian Highway ³ (up to 150 days per any one disability)	150	200	300	400				
Daily Cash Allowance at Government Hospital (up to 60 days per any one disability)	50	100	150	200				
Intensive Care Unit (up to 75 days per any one disability)	Reasonable & Customary Charges ⁴							
Lodger Expenses (up to 150 days per any one disability)								
Hospital Supplies & Services								
Surgical Fees								
Anaesthetist Fee								
Operating Theatres								
In-Hospital Physician Visit								
In-Hospital Physiotherapy Treatment Fees								
Pre-Hospital Diagnostic Tests (within 60 days prior to hospitalisation)								
Pre-Hospital Specialist Consultation (within 60 days prior to hospitalisation)								
Post-Hospitalisation Treatment (within 60 days following discharge from hospital)								
Organ Transplant								
Day Surgery Benefit								
Ambulance Fees								
Government Service Tax					5% of Room & Board Benefit			

Designated Plan	MM 150 (RM)	MM 200 (RM)	MM 300 (RM)	MM 400 (RM)
OutPatient Treatment Benefits				
Emergency Accidental Outpatient Treatment (within 30 days following such emergency treatment)	Reasonable & Customary Charges ⁴			
Emergency Accidental Dental Treatment				
Outpatient Physiotherapy Treatment				
Outpatient Cancer Treatment				
Outpatient Kidney Dialysis Treatment				
Home Nursing Care (up to 180 days per lifetime)	40	60	80	100
Overall Annual (per Policy Year) limit	75,000	120,000	180,000	240,000
Aggregate Term Limit	300,000	600,000	900,000	1,200,000
Emergency Evacuation & Repatriation (Limit per event)	150,000	150,000	150,000	150,000
Deductible Per Disability (RM)	5,000 10,000 15,000			

³ Malaysian Highway means North-South Expressway, Kuala Lumpur-Karak Expressway and East-Coast Highway as listed by the Malaysian Highway Authority.

⁴ Please refer to the definition of “Reasonable & Customary Charges” as specified above.

Important Notes

- 1) This brochure is intended to assist you to understand the basic and important features of a Medical and Health Insurance (MHI) product so that you are able to make an informed decision before purchasing the product. You are advised to refer to the sample policy contract for details of the important health insurance features of the plan that you intend to purchase.



- 2) You should ensure that important information regarding the plan is disclosed to you and that you understood the information disclosed. Where there is ambiguity, please seek an explanation/clarification from the company or its intermediary. To find out more about the basics of health insurance, please refer to the consumer education booklet on MHI available at most branches of insurance and takaful companies. You may also log on to www.insuranceinfo.com.my for more information.
- 3) Please refer to the enclosed Checklist to ensure that you have received the important information regarding the health insurance plan you intend to purchase.
- 4) Prior to making a decision to purchase any MHI policy, you should satisfy that this plan will best serve your needs and resources and the premium payable under the policy is an amount you can afford.
- 5) HLA Major Medi is not a savings plan and therefore do not have any cash value upon surrender or termination.

Important: This brochure is merely for simple brief information and is never intended to be a basis of an insurance policy or contract of insurance. Please ask for a copy of our policy for specific terms, conditions and exclusions of coverage for perusal. The information contained in this brochure may be changed without prior notice. In the event of any dispute or ambiguity arising out of the Bahasa Malaysia and Chinese translations in this brochure, the English version shall prevail.

Checklist

This checklist serves to guide you to seek an explanation on the essential features of a MHI policy so that you are able to make an informed decision before purchasing the policy. When in doubt or where there is ambiguity, you are advised to seek further clarification/information from your insurer or agent.

- 1) The booklet “The Introduction to Medical and Health Insurance Products” issued by Bank Negara Malaysia on the basics of MHI.
- 2) The policy documents for details of the important features of the policies purchased.
- 3) Avenues where details of the important features of the policy are also available.
- 4) Benefits payable under the policy.
- 5) Significant medical or technical exclusions or restrictions available.
- 6) Limits of benefits (e.g. % of costs covered by the policy, ceiling to total claim costs and deductible amounts).

- 7) Amount of premium payable and the payable term.
- 8) Nature and extend of the insurer's right to review and revise the premiums payable, and the notice to be given by the insurer in the event of any revision.
- 9) Pre-existing Illnesses, Specified Illnesses and qualifying period and the relevant periods applicable.
- 10) For yearly renewable policies, whether policy renewal is guaranteed.
- 11) Possible conditions that would lead to the following scenarios on policy renewal:
 - a) A policy is renewed with a level premium;
 - b) A policy is renewed with an increased premium; or
 - c) A policy is not renewed.
- 12) Likely implications of switching policy from one insurer to another or transferring from one type of MHI plan to another.
- 13) A "free-look period" of 15 days given to review the suitability of the newly purchased MHI product. If the product is returned to the insurer during this period, the full premiums would be refunded to the policy owner minus the expenses incurred for the medical examination.
- 14) The right of an insurer 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.

