

**Read this Product Disclosure Sheet before you decide to purchase BIMA Health. Be sure to also read the general terms and conditions in the policy documents.**

## 1. What is this product about?

BIMA Health is a monthly renewable term Group health assurance plan, which provides hospital admission benefits, medication support and yearly health screening benefits.

You can select from three different tiers of benefits (Bronze, Silver and Gold), and four different certificate types (Single Life, Joint Life, Family and Family+). You can include your spouse, children and parents in the coverage depending on the certificate type selected:

- Single Life: Principal Member
- Joint Life: Principal Member and one family relative (spouse, child or parent)
- Family: Principal Member, spouse and children
- Family+: Principal Member, spouse, children and parents (excluding parents-in-law)

The premiums can be paid monthly or weekly (for prepaid subscribers only), and the coverage will be auto-renewed subject to the eligibility conditions.

## 2. What are the covers / benefits provided?

**Hospital Admission Benefits:** A daily hospital benefit is paid for each night of in-patient Hospitalization of the customer.

**Medication Support:** A customer earns cover on a monthly basis that may be used when prescribed medication is required. The amount earned for Medication Support accumulates after every month of premium payment.

**Yearly Health Screening:** A customer earns cover on a yearly basis that may be used for an annual health check-up - BMI, blood glucose, blood pressure and cholesterol. The amount earned for Health Screening accumulates after each year of premium payment.

**BIMA Doctor Service:** A customer has complementary and unlimited access to BIMA's telemedicine service. The Principal Member and their Dependents under the policy may call the BIMA Doctor line (03 2022 5555) and receive medical advice and/or consultation via phone from BIMA's panel of qualified doctors. The service is available Monday to Friday (except Public Holiday) from 9AM to 6PM. More details about BIMA's telemedicine service can be found on BIMA's Telehealth Terms of Use on BIMA's website.

Tier	BRONZE	SILVER	GOLD
Daily Hospital Benefit	RM100 per night	RM150 per night	RM200 per night
Medication Support	X	✓ (Amount varied by certification type)	✓ (Amount varied by certification type)
BIMA Doctor Service	X	✓	✓
Health Screening	X	X	RM200 per year

**Medication Support – Monthly Accumulation:**

Cover	Bronze	Silver	Gold
Single Life	None	RM15 per month	RM20 per month
Joint Life	None	RM15 per month	RM20 per month
Family	None	RM30 per month	RM40 per month
Family+	None	RM30 per month	RM40 per month

**Limits:**

Certificate Type	Annual Limit for Hospital Benefit*	Waiting Period for Medication Support	Waiting Period for Health Screening Benefit
Single Life	30 nights per year	30 days from Certificate Effective Date.	Minimum of 12 months of premiums paid.
Joint Life	50 nights per year		
Family	70 nights per year		
Family+	90 nights per year		

\*The Annual Limit is on a per certificate basis, and refers to the combined limit for the Principal Member and Dependents.

If the annual maximum for the number of hospital nights covered is reached within a Certificate Year, then no further nights spent in hospital may be claimed (for any reason, and for any life on the Certificate) until the Certificate Anniversary is reached.

There is a waiting period of 30 days from the Certificate Effective Date for non-accidental hospitalization and Medication Support.

**Notes:**

For adults, the coverage will cease on the month following the Assured Member’s 65 birthday, and for children the coverage will cease on the month following the Assured Member’s 25<sup>th</sup> birthday.

Please refer to the master policy document for the full description of benefits under this plan.

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

Based on your chosen certificate type and tier, the monthly premiums you have to pay will be as follows:

Tier	BRONZE	SILVER	GOLD
Single	RM10	RM30	RM60
Joint	RM20	RM50	RM90
Family	RM30	RM80	RM100
Family+	RM40	RM120	RM160

**Notes:**

- a. The premium amount is same for all age and gender. Premium amounts are not guaranteed and we reserve the right to revise the premium payable by giving at least thirty (30) days’ prior notice. A high level of claims experience (for the entire portfolio) can result in a revision of the premium. Any changes in premium will be effective on the next Premium Due Date.

- b. If you pay through postpaid bill, credit card, debit card, saving accounts or e-wallet the contribution payment will be collected monthly.
- c. If you opt for payment via prepaid balance, subscription can be done on Bronze Tier only and payment will be deducted from your airtime balance in accordance with the selected cover with the option for weekly or monthly payment.
- d. When the weekly payment option is chosen, if the full monthly contribution isn't paid (you missed 1 or more of the 4 weekly payments), the benefit for the following month will be in proportion to the amount of contribution. E.g:
  - a. If no contribution paid in a particular month, there will be no coverage provided in the following month.
  - b. If you have BIMA Bronze Single with monthly premium of RM10, you are deducted 2 weekly contributions ( $RM2.50 \times 2 = RM5 = 50\%$  of the contribution), this will provide you with hospitalization coverage of RM50 per night (50% of the hospitalization benefit) in the following month.

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

50% of every premium collected will be paid as commission to the Payment Channel and to BIMA.

#### 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 requested in the enrolment process and state your age correctly.
- **Free look period** – you may cancel your insurance coverage by contacting BIMA's Customer Service (Phone: 03 2022 5555 | WhatsApp: 03 2022 5900 | mail: [info@bima.com.my](mailto:info@bima.com.my)) or any other formal communication method within fifteen (15) days of receipt. The premiums that you have paid will be refunded to you.
- **Grace period** – following non-payment of premiums for three (3) consecutive months, the certificate will lapse. A policy who has one or two consecutive months (i.e. less than three months) of non-payment is treated as a 'non-cover earning' policy, not a lapsed policy. If the next month's premium is successfully collected for the policy, then coverage will be provided (with no additional requirements) and the policy is no longer at risk of potentially lapsing.
- **Maximum Number of Certificates** - Only one certificate per life as Assured Member is allowed, and the application will be rejected if the Assured Member tries to purchase more than one certificate.
- **Tax** – any applicable taxes (whether currently in force or implemented later) at the prevailing rate as may be prescribed by any applicable legislation from time to time will be amended or charged when necessary.
- **Nomination** – you are advised to nominate a nominee(s) for this plan and ensure that your nominee(s) are aware of the insurance plan that you have purchased. In the event there is an outstanding claim and the assured member passes away, the claim will be paid to the nominee.
- **Product withdrawal condition** – MCIS Life reserves the right to cancel the master policy and the certificate of assurance as a whole if MCIS Life decides to discontinue the insurance product by giving you and master policy owner at least six (6) months' prior written notice. The master policy and the certificate of assurance, subject to the premium payment, will continue until the next premium due date after the notice period.
- **Renewal** - The Certificate renewal is not guaranteed. The Company may;
  - (a) renew the Certificate so long as the Premium is paid by Principal Member; or
  - (b) not renew the Certificate by giving the Principal Member at least thirty (30) days' prior notice before that Certificate anniversary.
- **Claim** – If any event happens which may give rise to a claim, the following documents must be provided to BIMA via its branches or representatives:
  - Fully completed Claim Form.
  - National Registration Identity Card (NRIC) or Passport.
  - Birth Certificate/Legal Guardianship Certificate (Claims for children) ) if Family Name of the Child is different from the Family Name of the Principal Member.

- Evidence of Hospitalisation (if claiming for Hospital Benefit)
  - Discharge Summary; Or
  - Full Medical Report
- Evidence of Prescription (if claiming for Medication Support)
  - Doctor note or prescription (showing the date of prescription and medication prescribed/purchased)
  - Payment receipt and bill
- Evidence for consultation or investigative/laboratory tests (if claiming for Health Screening benefit)
  - Doctor/hospital note (showing date of consultation/test, patient's name, specialism area or test administered).

Claims will be assessed by BIMA and notified to the Principal Member within 3 working days of submission of full claims documentation. To check on the claim status, please contact BIMA:

- Email : [Claims@bima.com.my](mailto:Claims@bima.com.my)
- Hotline : 032022 5555 [Monday to Friday – 9:00am to 6pm (Excluding public holidays)]
- WhatsApp : 032022 5900 [Monday to Friday – 9:00am to 6pm (Excluding public holidays)]

Claims should be notified to BIMA within three (3) months from the claim event date.

- **Waiting Period** – This product is subject to the following Waiting Period:
  - (a) Hospital Benefit: Any medical or physical conditions arising within the first thirty (30)-days of Waiting Period from the Certificate Effective Date except for Accidental Injuries;
  - (b) Medication Support: thirty (30) days from the Certificate Effective Date
  - (c) Yearly Health Screening: twelve (12) months from the Certificate Effective Date
- **Sanction or Unlawful Activities** – if you or any of the individuals associated with this plan are involved in any unlawful activities in relation to the Anti-Money Laundering, Anti-Terrorism Financing and Proceeds of Unlawful Act 2001(AMLATFPUAA) or the Malaysian Anti-Corruption Commission Act 2009, MCIS Life reserves the right to reject the application of this plan or withhold or terminate the business including claims payment under this plan where it deems fit and proper. MCIS Life shall not be liable for any potential or actual losses arising from or relating to any steps thereby taken.

Note: This list is non-exhaustive. Please refer to the master policy document for the terms and conditions under this plan.

## 6. What are the major exclusions under this product?

This policy shall not pay the benefits mentioned above if the claim event occurs directly or indirectly due to any of the following listed events:

- a) Pre-Existing Conditions claimed for within the first twelve (12) months from the Certificate Effective Date.
- b) Pregnancy/childbirth within twelve (12) months from the Certificate Effective Date.
- c) War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, mutiny, strike, riot, civil commotion, military rising, insurrection, rebellion, conspiracy, revolution, military or usurped power, martial law, state of siege, any event or cause that determine the proclamation or maintenance of martial law or state of siege.
- d) Nuclear, Biological and Chemical Risks and losses.
- e) Elective or cosmetic surgery.
- f) Alcohol abuse and illegal drug use.

Note: This list is non-exhaustive. Please refer to the master policy document for the terms and conditions under this plan.

## 7. Can I cancel my insurance coverage?

You may cancel your insurance coverage at any time by giving a written notice to BIMA after the Free Look Period. The cancellation will take effect on the next premium due date. There is no surrender value for this

plan. Hence, no surrender amount will be payable when you cancel or surrender the certificate before maturity.

**8. What do I need to do if there are changes to my / my nominee(s) contact details?**

It is important that you / your nominee(s) inform BIMA of any change in the contact details to ensure that all correspondences reach you / your nominee(s) in a timely manner.

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

Should you require additional information about BIMA Health, please contact:

BIMA Malaysia (Milvik Malaysia Sdn Berhad)

**Hotline** : 03 2022 5555

**WhatsApp**: 03 2022 5900

**Website** : [www.bima.com.my](http://www.bima.com.my)

**Email** : [info@bima.com.my](mailto:info@bima.com.my)

Facebook Messenger : [www.facebook.com/BIMA.Msia/](https://www.facebook.com/BIMA.Msia/)

For more information about medical and health insurance, please refer to the Insurance Info booklet on Medical and Health Insurance issued by Life Insurance Association of Malaysia website at [www.liam.org.my/customer\\_zone](http://www.liam.org.my/customer_zone).

**IMPORTANT NOTE:**

**YOU SHOULD SATISFY YOURSELF THAT THIS PLAN 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.**

Underwritten by: **MCIS INSURANCE BERHAD** (435318-U)

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