This healthcare insurance programme is administered by MSIG Insurance (Malaysia) Bhd

SUMMARY OF BENEFITS	PLAN 350
Section A : Hospital Medical & Surgical Insurance underwritten by MSIG Insurance (Malaysia) Bhd	
Section A- I: Outpatient Medical (Clinical) Benefits	
Outpatient Primary Care (Description Of Services)	
a. PCP Clinics	
- Consultation including treatment fee	Unlimited Visits
- Drugs, Injections & Medications	As Charged
- Basic Laboratory Tests & X-Rays (payable only when Diagnostic Result indicates impairment to health)	_
b. Non-panel PCP Clinics	RM 20 per visit
c. Traditional Alternative Treatment	RM 30 per visit
2. Outpatient Specialist Care (Description Of Services)	
a. Specialist Visits subject to <u>Referra</u> l	
- Consultation including treatment fee	
- Drugs, Injections & Medications	Unlimited Visits
- Basic Laboratory Tests & X-Rays (payable only when Diagnostic Result indicates impairment to health)	As Charged
- Ambulatory Surgical Procedures	
Section A- II: Hospital & Surgical Benefits (Description of Services)	
Hospital Room & Board, each day up to 365 days	RM 100 per day
b. Hospital Intensive Care, up to 365 days	as charged
c. Cash Allowance at Government Hospital – up to 365 days	RM 50
d. Hospital Ancillary Services	as charged
e. Pre-Admission Diagnostic Services within 31 days preceeding confinement	as charged
f. Surgical Procedures, Anaesthesia & Operating Theatre Fees	as charged
g. In-Hospital Physician Fees— up to 365 days	as charged
h. Post-Hospital Physician Treatment within 60 days from discharge	as charged
Emergency Accidental Treatment – up to 365 days Emergency Accidental Dental Treatment	as charged
j. Emergency Accidental Dental Treatmentk. Ambulance Services (road vehicle)	as charged as charged
Annoulance Services (road venicle) Malaysian Government Service Tax	up to 6%
m. Inpatient Treatment for Mental Illness	RM 2,500
n. Reimbursement of College Tuition Fees due to prolonged Period of Disability (per semester)	RM 5,000
Repatriation & transport of Mortal Remains (international students, Sabahan and Sarawakian students)	RM 7,500
p. Medical Evacuation Expenses (international students, Sabahan and Sarawakian students)	RM 7,500
g. Claim Medical Report Fee	as charged
OVERALL ANNUAL LIMIT - PER PERSON	RM 25,000
Section B - Personal Accident Insurance underwritten by MSIG Insurance (Malaysia) Bhd	
a. Death	RM 50,000
b. Permanent Disablement	RM 50,000
c. Bereavement Allowance	RM 3,000
Section C - Term Life underwritten by Hong Leong Assurance Bhd	
a. Natural Death	RM 10,000
b. Permanent Total Disablement due to natural causes	RM 10,000

General Exclusions The list below is not exhaustive. Please refer to MSIG for the policy wording.

- Pre-existing conditions
- Specified Illness occurring during the first one-hundred and twenty (120) days of continuous cover.
- Dental conditions including dental treatment or oral surgery unless as necessitated by accidental bodily injury to sound natural teeth.
- 4. Treatment of an optical nature and optical appliances.
- Treatment relating to any form of birth control including its complications; infertility or sub-fertility.
- Pregnancy existing on the effective date of insurance of the Insured Person.
- Routine medical check-up or any other examinations where there are no objective indications of impairment of normal health.

 Treatment of sexually transmitted diseases, or caused directly or directly by the presence of Human Immunodeficiency Virus (HIV) or AIDS related 8.
- 9. Treatment of injury, illness or disease arising out of misconduct, attempted suicide, carelessness, drunkenness, willful negligence of duty, performance of unlawful act, provoked assault, breach of peace, immoral acts or exposure to any unjustified hazard except when endeavouring to save human life.
- 10. Treatment relating to birth defect and congenital abnormalities including hereditary conditions.
- 11.
- Treatment for the functional disorder of the mind.

 Treatment arising from unlawful use of drugs, drug addiction or alcoholism.
- Any plastic or cosmetic surgery for beautification purposes or for any pre-existing conditions or treatment of their complications (inclusive of double eyelids, acne, keloids etc) except as necessitated by accidental injuries.
- 14. Hospital confinement solely for the purpose of conducting medical evaluation, screening or diagnostic testing; or care and treatment that is experimental, investigative and not according to professional standards and care that is not medically necessary.
- 15. Treatment relating to weight control or for obesity.
- Treatment of any illness arising from the point of birth of the child or due to premature birth of the child. 16.
- 17. Private nursing care or services for rest cure provided by rest/nursing home for purely recuperative purposes and house calls rendered by doctors for anv reason.
- 18. Any circumcision unless medically necessary.
- Blood and topical allergy testing.
- Any process solely for determination of eve refraction and the correction of the same by radial keratotomy, orthoptic or visual training or by any other 20 means.
- 21. Supply of corrective glasses, or contact lens except for cataract surgery or eye injury while insured or any associated material for correction of visual acuity
- 22. Sex transformation surgery and sex hormone therapy related to such surgery.
- Treatment for effects from exposure to ionizing radiation or contamination by radioactivity from any source.
- 24 Treatment for any form of disability, injury or sickness sustained or contracted while on duty in any military, naval or air force of any country whether in time of peace or of war or due to direct participation in strikes, riots and civil commotion or insurrection.
- 25. Outpatient physical therapy or physiotherapy, Outpatient rehabilitation therapy, chemotherapy, radiation therapy and kidney dialysis are not covered.
- 26. 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.
- 27. Charges for treatments that are given free of charge.
- 28 Communication or transportation expenses except ambulance fees as insured herein.
- Care or treatment for which payment is not required or to the extent which is payable by any other insurance or indemnity covering the Insured and 29. Disabilities arising out of duties of employment or profession that is covered under a Workmen's Compensation Insurance Contract.
- Investigation and treatment of sleep and snoring disorders, hormone replacement therapy for menopausal conditions and alternative therapy such as 31. treatment, medical services or supplies, including but not limited to chiropractic services, acupuncture, acupressure, reflexology, bonesetting, herbalist treatment, massage or aroma therapy or other alternative treatment.
- Expenses incurred for sex changes
- Expenses incurred for donation of any body organ by an Insured Person and costs of acquisition of the organ including all costs incurred by the donor during organ transplant and its complications.
- Private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes. 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.