

Product Disclosure Sheet

Note: Please read this Product Disclosure Sheet before you decide to participate in FWD MedSecure Direct. You should also read the general terms and conditions.

Name of takaful operator:	FWD Takaful Berhad ('the Takaful Operator') FWD Takaful is registered under Islamic Financial Services Act 2013 and is regulated by Bank Negara Malaysia
Product name:	FWD MedSecure Direct
Plan:	
Date:	Dd/mm/yyyy

1. What is this product about?

- FWD MedSecure Direct is a regular step-up contribution term takaful plan. It is a hospital income plan that gives you daily income when you are admitted to hospital.
- There is also an optional benefit of Accidental Medical Reimbursement, where if accidents occur and you require hospital admission, we will reimburse the medical cost up to your chosen limit.
- Participate with your family and we will waive the contribution if the certificate owner passed away.
- Enjoy 20% discount on your future contribution if you have not made any claim within the past 2 certificate year.
- This plan offers Takaful protection for up to 5, 10, 15, 20, 25 and 30 years based on the plan chosen.

2. What are the Shariah concepts applicable?

- Tabarru': A donation for the purpose of takaful.
- Wakalah: The contract where the participant appoints the Takaful Operator to manage the participants' risk fund and agrees to remunerate the Takaful Operator on pre-agreed basis for the services provided.
- Ju'alah: It is the reward to the Takaful Operator for the good performance of the participants' risk fund it will be managing. The Takaful Operator will be rewarded with a 50% share of the distributable surplus from the participants' risk fund and the remaining 50% will be distributed to participants.
- Qard: An interest-free loan that Takaful Operator grant to the participants' risk fund if it is in deficit. The loan is repayable from the future surplus arising in the participants' risk fund.

3. What are the covers/benefits provided?

- FWD MedSecure Direct covers:

Plan	Plan 150	Plan 250	Plan 350
Hospitalisation Benefit			
Daily Hospitalisation Cash Allowance Annual limit : 120 days *Lifetime limit : 750 days	150	250	350
Daily Hospitalisation Cash Allowance (Intensive Care Unit "ICU") Annual limit : 90 days *Lifetime limit : 750 days	300	500	700
Waiver of Contribution Benefit (For Married Couple and Family Plan)	As charged	As charged	As charged
No-Claim Discount	20%	20%	20%

*The Lifetime limit of 750 days is the combine limit for both Daily Hospitalisation Cash Allowance and Daily Hospitalisation Cash Allowance (ICU).

Optional Benefit

Accidental Medical Reimbursement	Up to RM2,000 / RM4,000 / RM6,000 / RM8,000 / RM10,000
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Please refer to the benefit illustration, takaful schedule and/or certificate for more details of your benefit.

4. How much contribution do I have to pay?

- The estimated regular contribution that you have to pay depends on the plan that you have chosen.
- Refer to :
 - a. “Appendix 1 – Contribution Table of FWD MedSecure Direct (Basic)” and
 - b. “Appendix 2 – Contribution Table of Accidental Medical Reimbursement Benefit (Optional)”
 at the end of this document for further information.

Note:

- This is a step-up contribution hospital income plan, which means your contribution will increase with your age. You may refer to the Benefit Illustration for the detail contribution.
- Contribution duration: Regular contribution payable until expiry date of certificate.
- The contribution rates are not guaranteed and may be revised by giving at least 3 months advance written notice to you. We will change this on your next certificate anniversary after the 3 months’ notice period.

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

- The wakalah fees will be deducted from your contributions as per following schedule:

Applicable wakalah fees on your contributions

Contribution Year	1	2	3	4	5	6	7	8	9	10	11+
Percentage from contribution	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%

Tabarru’ charge : Your contribution less wakalah fees is the amount of Tabarru’ charge.

6. 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 conditions and state your age and smoker status correctly.
- Reasonable and medically necessary: We will not pay any benefit if the hospitalization is considered as not reasonable and medically necessary.
- Free-look period: If you aren’t completely satisfied with your certificate, and you haven’t made a claim under it, you have 15 days from the date you receive your certificate to cancel it and receive your contributions back. You will not be able to claim under your certificate once it is cancelled.
- Waiting period: There are waiting period that we will apply for this certificate. It is a situation where if you are hospitalised within specific days after the commencement or reinstatement date, due to the specific illness, we will not pay the benefit.
 - Within 120 days after the commencement or reinstatement date, for illnesses below:
 - a. Hypertension, diabetes mellitus or cardiovascular disease;
 - b. Growths of any kind including tumors, cancers, cysts, nodules, polyps;
 - c. Stones of the urinary system and biliary system;
 - d. Any disease of the ear, nose (including sinuses) or throat;
 - e. Hernias, hemorrhoids, fistulae, hydrocele or varicocele;
 - f. Any disease of the reproductive system including endometriosis; or
 - g. Any disorders of the spine (including a slipped disc) or any knee conditions.
 - Within 30 days after the commencement or reinstatement date, for other illnesses not stated above.
- Grace period: A grace period of 60 days from each contribution due date is given for you to pay the respective contributions. Your certificate will end if we do not receive your contribution before then.

Note: This list is non-exhaustive. Please refer to the certificate for the definitions and detail terms and conditions.

7. What are the limitations and major exclusions under this certificate?

This certificate has certain exclusions, meaning situations where we won't pay a benefit. We list below the exclusions that apply to the benefits under your certificate.

Exclusion	Description
Attempted suicide or self-inflicted act	We will not pay any benefit under this certificate if the claim arises from attempted suicide or an intentional self-inflicted act by you or a person covered within one year from the start of your certificate, or the date we last reinstated your certificate. This applies regardless of the mental state of the person covered.
Unlawful acts	We will not pay any benefit under this certificate if the claim arises because you or a person covered wilfully participated in an unlawful act, or unlawful failure to act or any attempted violation of the law.
War	We will not pay any benefit under this certificate if the claim is a result of an act of war (whether declared or not), coup, revolution, riot, or any similar event.

- We will not apply the waiver of contribution benefit if you die due to suicide within one year from the start of your certificate, or the date we last reinstated your certificate. This applies regardless of the mental state of the person covered.
- Pre-existing illnesses: We won't pay any benefit in respect of any condition, disease, illness or injury if there was any manifestation, diagnosis or treatment of such condition, disease, illness or injury before the commencement or reinstatement date.
- We may also apply specific exclusions to your certificate when we offer to issue your certificate. If any specific exclusions apply, we will record the details in a certificate endorsement.
- We will not pay any hospitalisation benefit as a result of these specific exclusions:
 - a) Circumcision or any surgery on the foreskin;
 - b) Any form of dental care or Surgery unless necessitated by injury but excluding the replacement of natural teeth, placement of denture and prosthetic services such as bridges and crowns or their replacement;
 - c) Venereal disease and its sequelae;
 - d) HIV (Human Immunodeficiency Virus) related diseases, AIDS (Acquired Immune Deficiency Syndrome) or AIDS related diseases;
 - e) Any communicable diseases required quarantine by law;
 - f) Pregnancy or pregnancy related conditions including childbirth, complications arising from pregnancy such as miscarriage, abortion, pre-natal or post-natal care, contraceptive methods for birth controls, infertility treatments and its complications. Impotence, sterilization, erectile dysfunctions and its complications;

Note: Please refer to the certificate for the full list of limitations and exclusions under this certificate.

8. Can I cancel my certificate?

- Yes, you can cancel (terminate) your certificate at any time. If you cancel your certificate, your cover will end from the date we cancel your certificate.
- We will deduct from your contribution and amount that covers the period you have been covered for and then refund you the unused contribution. If your refund amount is less than or equal to RM 10 and we do not have your bank account details, we will donate the amount to a charity of our choosing. If it is more than RM10 and we do not have your bank account details, we will transfer the monies to Register of Unclaimed Moneys. You will not be able to reinstate (restart) your certificate after you cancel it.
- Participating in a family Takaful plan is a long-term financial commitment. If you do not pay your contributions within the grace period of 60 days, your certificate will be automatically terminated.

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

- It is important that you inform us of any change in your contact details to ensure all correspondences reach you in a timely manner.

10. Where can I get further information?

- Should you require additional information, please visit www.insuranceinfo.com.my.
- If you have any enquiries, please contact us at:

FWD Takaful Berhad

(Registered under Islamic Financial Services Act 2013 and regulated by Bank Negara Malaysia)

Head Office : Level 29 Menara Shell
211 Jalan Tun Sambanthan Brickfields
50470 Kuala Lumpur

Service Hotline : 1300 13 7988
Tel : 03-2771 7888
Fax : 03-2710 7800
E-mail : contact.my@fwd.com

We will respond to your query within 3 working days of us receiving it.

11. Other similar types of cover available

You may contact us directly for other similar types of cover currently available.

IMPORTANT NOTICE:

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

The information provided in this disclosure sheet is valid as at dd/mm/yyyy.

Appendix 1 – Contribution Table of FWD MedSecure Direct (Basic)

Male/Female (Certificate Owner)	Basic Plan		
Age next birthday	150	250	350
1 - 5	1,013	1,686	2,361
6 - 15	210	348	487
16 - 20	239	397	556
21 - 45	219	364	508
46 - 50	233	381	532
51 - 55	329	546	764
56 - 60	423	702	983
61 - 65	549	914	1,277
66 - 70	746	1,239	1,734

Male/Female (Dependant)	Basic Plan		
Age next birthday	150	250	350
1 - 5	811	1,349	1,889
6 - 15	168	279	390
16 - 20	192	318	445
21 - 45	176	292	407
46 - 50	187	305	426
51 - 55	264	437	612
56 - 60	339	562	787
61 - 65	440	732	1,022
66 - 70	597	992	1,388

*The contribution above is applicable for standard risk and Occupation Class 1 and 2.

Appendix 2 – Contribution Table of Accidental Medical Reimbursement Benefit (Optional)

Male (Certificate Owner)	Accidental Medical Reimbursement Benefit (Up to)				
Age next birthday	2,000	4,000	6,000	8,000	10,000
1 - 20	196	392	588	784	980
21 - 25	181	362	543	724	905
26 - 45	141	282	423	564	705
46 - 50	161	322	483	644	805
51 - 55	172	344	516	688	860
56 - 60	185	370	555	740	925
61 - 65	240	480	720	960	1,200
66 - 70	321	642	963	1,284	1,605

Male (Dependant)	Accidental Medical Reimbursement Benefit (Up to)				
Age next birthday	2,000	4,000	6,000	8,000	10,000
1 - 20	157	314	471	628	784
21 - 25	145	290	435	580	724
26 - 45	113	226	339	452	564
46 - 50	129	258	387	516	644
51 - 55	138	276	413	551	688
56 - 60	148	296	444	592	740
61 - 65	192	384	576	768	960
66 - 70	257	514	771	1,028	1,284

*The contribution above is applicable for standard risk and Occupation Class 1 and 2.

Female (Certificate Owner)	Accidental Medical Reimbursement Benefit (Up to)				
	2,000	4,000	6,000	8,000	10,000
Age next birthday					
1 - 15	127	254	381	508	635
16 - 20	105	210	315	420	525
21 - 25	84	168	252	336	420
26 - 45	99	198	297	396	495
46 - 50	135	270	405	540	675
51 - 55	169	338	507	676	845
56 - 60	183	366	549	732	915
61 - 65	234	468	702	936	1,170
66 - 70	315	630	945	1,260	1,575

Female (Dependant)	Accidental Medical Reimbursement Benefit (Up to)				
	2,000	4,000	6,000	8,000	10,000
Age next birthday					
1 - 15	102	204	305	407	508
16 - 20	84	168	252	336	420
21 - 25	68	135	202	269	336
26 - 45	80	159	238	317	396
46 - 50	108	216	324	432	540
51 - 55	136	271	406	541	676
56 - 60	147	293	440	586	732
61 - 65	188	375	562	749	936
66 - 70	252	504	756	1,008	1,260

*The contribution above is applicable for standard risk and Occupation Class 1 and 2.