



PROGRESSIVE INSURANCE BHD (19002-P)
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PRODUCT DISCLOSURE SHEET

Read this Product Disclosure Sheet before you decide to take out the Foreign Workers Hospitalisation and Surgical Insurance Scheme (SKHPPA). Be sure to also read the general terms and conditions.

PROGRESSIVE INSURANCE BHD

Plan: Foreign Workers Hospitalisation & Surgical Insurance (SKHPPA)

Date:

1. What is this product about?

Foreign Workers Hospitalisation & Surgical Insurance Scheme (SKHPPA) is a yearly renewable hospital and surgical insurance scheme designed to reduce the financial burden of the employer of foreign workers in the event of hospital admission of their foreign workers to a Non-Corporatised Malaysian Government Hospital due to an accident or illness.

2. Who is eligible?

Eligible persons for insurance under this policy are those present and future full-time foreign worker employees of policyholder, from the age of eighteen (18) to fifty-nine (59), who are actively engaged at their usual work on the date the persons are eligible to join this policy.

3. What are the covers / benefits provided?

This plan covers the following benefits:

| ITEM | BENEFITS | AMOUNT (RM) |
|--|--|--|
| 1(a) | Daily Hospital Room & Board (Maximum up to 30 days) | As charged – in accordance to charges consistent with Third (3rd) Class Room & Board to a maximum of RM 160 per day, in a Non-Corporatised Malaysian Government Hospital in conformance to the charges specified under Fees Act 1951, Fees (Medical) (Cost of Services) Order 2014 and/or its subsequent amendments. |
| 1(b) | Intensive Care Unit (Maximum up to 15 days) | |
| 2. | Hospital Supplies and Services | |
| 3. | Operating Theatre | |
| 4. | Surgical fees (Excluding organ transplantation) | |
| 5. | Anaesthetist Fees | |
| 6. | In-Hospital Physician Visits (Maximum up to 30 days) | |
| 7. | In-Hospital Specialist Consultation Visits (Maximum up to 30 days) | |
| 8. | Ambulance Fees/Medical Report Fees | |
| Maximum Overall Annual Limit (Items 1 to 8) | | RM 20,000.00 |

The duration of cover is for one year. You need to renew your cover annually.

Note: The description on the available cover is only a brief summary for quick and easy reference. The precise terms and conditions that apply are stated in the policy contract.

4. How much premium do I have to pay?

The annual premium is RM127.20 per foreign worker insured inclusive of all fees and GST 6%. The renewal premium is not guaranteed and may be subject to adjustments with approval by the relevant authorities taking into consideration the loss ratio and any other factors which may materially affect the sustainability of the scheme.

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

- Stamp Duty - You have to pay RM 10.00 in addition of the premium for stamp duty.
- Good & Services Tax of 6%
- Commission to the Insurance Intermediary (if any) -10% of RM105 (annual premium less all fees) will be deducted for commission.

6. What are some of the key terms and conditions that I should be aware of?**Non-Consumer Insurance Contract**

- Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance for the purpose of providing medical insurance benefits to your employees, you have a duty to disclose any matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant, otherwise it may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance.
- The above duty of disclosure shall continue until the time your contract of insurance 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 insurance has been entered into, varied or renewed with us any of the information given in the Proposal Form (or when you applied for this insurance) is inaccurate or has changed.

Geographical Territory

- All benefits provided in this policy are applicable within Malaysia only for twenty-four (24) hours a day. Cover ceases from the time the Insured Person leaves Malaysia and resumes upon his/her return to Malaysia.

Limitation of Benefits

- All benefits provided in this policy are only payable in the event the Insured Person is confined in a non-corporatised Malaysian Government Hospital.

Grace Period

- This is a Cash Before Cover policy. Notwithstanding the Cash Before Cover condition, a Grace Period of fourteen (14) days from its due date will be allowed for payment of each premium after the first policy year. During such fourteen (14) days, the Company shall remain liable there under if by the last of such days, the premium is actually paid. If any premium is not paid in respect of this policy contract before the end of the Grace Period, this policy contract shall be deemed as terminated at the expiry date of this policy.
- Cover ceases from the time the foreign worker leaves Malaysia and resumes upon his/her return to Malaysia.

Note: The list above is non-exhaustive. Please refer to the policy contract for the full terms and conditions under this policy.

7. What are the major exclusions under this policy?

This policy does not cover any hospitalisation, surgery or charges caused by any one of the following occurrences:

- Plastic/Cosmetic surgery;
- Dental treatment or oral surgery;
- Treatment or surgical operation for congenital abnormalities or deformities;
- Pregnancy or miscarriage;
- Treatment which is not Medically Necessary;
- Suicide or self-inflicted injury while sane or insane;
- Accidental injuries or illnesses arising from racing or hazardous sports.
- Cardiovascular diseases and all cancers occurring within the first one hundred and twenty (120) days of Insurance of the Insured Person.
- Pre-existing conditions unless the Insured Person passes the medical examination as confirmed by FOMEMA Sdn Bhd (FOMEMA) within 30 days from the Insured Person's arrival to Malaysia.

Note: The list above is non-exhaustive. Please refer to the policy contract for the full list of exclusions under this policy.

8. Can I cancel my policy?

Yes, you (the Policyholder) may cancel this policy at any time by giving written notice to us. Upon cancellation, you are entitled to a refund of the premium as per the schedule below, provided that you have not made a claim during the current policy year.

| Period Not Exceeding | Refund of Annual |
|----------------------------|------------------|
| 15 days | 90% |
| 1 month | 80% |
| 2 months | 70% |
| 3 months | 60% |
| 4 months | 50% |
| 5 months | 40% |
| 6 months | 30% |
| 7 months | 25% |
| 8 months | 20% |
| 9 months | 15% |
| 10 months | 10% |
| 11 months | 5% |
| Period Exceeding 11 months | No refund |

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 organization's contact details to ensure that all correspondence reaches in a timely manner. You can write in / fax us at the address / fax number below.

10. Where can I get further information?

Should you require additional information about medical and health insurance, please refer to the *insuranceinfo* booklet on 'Medical & Health Insurance', available at all our branches or visit www.insuranceinfo.com.my

If you have any enquiries, please contact us at:

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IMPORTANT NOTES:

YOU SHOULD SATISFY YOURSELF THAT THIS POLICY WILL BEST SERVE YOUR NEEDS AND THAT THE PREMIUM PAYABLE UNDER THIS PLAN IS AN AMOUNT YOU CAN AFFORD. YOU SHOULD READ AND UNDERSTAND THE INSURANCE POLICY AND CONTACT THE INSURANCE COMPANY DIRECTLY FOR MORE INFORMATION.

The information provided in this disclosure sheet is a brief summary for quick and easy reference. The exact terms and conditions that apply are stated in the policy contract.

PROGRESSIVE INSURANCE BHD (19002-P) is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

The information provided in this disclosure sheet is valid as at 01 August 2016.