


**MASTER CONTRACT
GROUP MUTIARA PLUS TAKAFUL
KONGRES KESATUAN PEKERJA-
PEKERJA DIDALAM PERKHIDMATAN
AWAM
TTMW000004**



TAKAFUL SCHEDULE

Takaful Contract No : TTMW000004

Takaful Contract Holder : KONGRES KESATUAN PEKERJA-PEKERJA DIDALAM PERKHIDMATAN AWAM

Address : CUEPACS LIVING CARE
D/A JAMES D. RAVI & ASSOCIATES, NO.17B, LEVEL 3,
BANGUNAN PSM, JALAN BANGSAR, KUALA LUMPUR
59200 Wilayah Persekutuan (WP)

Effective Date : 01/08/2009

Group Benefits Scheme : GROUP MUTIARA PLUS TAKAFUL

Covered Members : ON MEMBERS OF KONGRES KESATUAN PEKERJA-PEKERJA
DIDALAM PERKHIDMATAN AWAM
(As Per List Lodged To the Company)

Free Cover Limit : Sum covered (natural cause) RM 30000

Scope of Coverage : As Per Below Table

No	Benefits	Eligible Age of Entry (Member/ Spouse)	Eligible Age of Entry (Child)	Maximum Age of Cover (Member/ Spouse)	Maximum Age of Cover (Child)
1.	Death / Total and Permanent Disability Benefit (Natural Causes)	19 – 59 years old	30 days – 19 years old	66 years old	66 years old
2.	Death / Total and Permanent Disability Benefit (Accidental Causes)	19 – 59 years old	30 days – 19 years old	66 years old	66 years old
3.	Funeral Expenses (Member)	19 – 59 years old	30 days – 19 years old	66 years old	66 years old
4.	Daily Hospital Benefit	19 – 59 years old	30 days – 19 years old	66 years old	66 years old
5.	Accelerated Critical Illness	19 – 59 years old	30 days – 19 years old	66 years old	66 years old
6.	Partial Permanent Disability (All Causes)	19 – 59 years old	30 days – 19 years old	66 years old	66 years old

* Age is based on Age Next Birthday.

Refer to the Certificate of Participation for the Sum Covered and Contribution amount.



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Scope of Coverage : As Per Below Table

Number of Units	Monthly Contribution	Death		TPD		Funeral Expenses	Daily Hospital	Critical	PPD	
		Natural	Accidental	Natural	Accidental	Member	Benefit	Illness	Natural	Accidental
1	10	10000	20000	10000	20000	2,000	10	10,000	10,000	10,000
2	20	20000	40000	20000	40000	2,000	20	20,000	20,000	20,000
3	30	30000	60000	30000	60000	2,000	30	30,000	30,000	30,000
4	40	40000	80000	40000	80000	2,000	40	40,000	40,000	40,000
5	50	50000	100000	50000	100000	2,000	50	50,000	50,000	50,000
6	60	60000	120000	60000	120000	2,000	60	50,000	60,000	60,000
7	70	70000	140000	70000	140000	2,000	70	50,000	70,000	70,000
8	80	80000	160000	80000	160000	2,000	80	50,000	80,000	80,000
9	90	90000	180000	90000	180000	2,000	90	50,000	90,000	90,000
10	100	100000	200000	100000	200000	2,000	100	50,000	100,000	100,000

Participant's Risk Fund (PRF) (max from the benefit table)

Participant's Investment Fund (PIF)

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Free Cover Limit : Sum covered (natural cause) RM 30000

Stamp Duty : RM10.00

Wakalah Fee :

Type	% of Contribution
Wakalah Fee*	20 %
Commission	10 %

*The Wakalah Fee is inclusive of Commission

Net Contribution Allocation Ratio :

Risk Fund	Investment Fund
43.75 %	56.25 %

Net Surplus Allocation Ratio :

Takaful Contract Holder	Takaful Operator
50 %	50 %

Net Profit Allocation Ratio :

Takaful Contract Holder	Takaful Operator
80 %	20 %

Dated **02 April 2014** in KUALA LUMPUR

FOR ETIQA TAKAFUL BERHAD



 AUTHORISED SIGNATORY



MASTER CONTRACT GROUP MUTIARA PLUS TAKAFUL

The Concept of Takaful	Takaful is a mutual assistance scheme based on the spirit of brotherhood and solidarity where Contract Holders like You agree to assist each other financially in case of certain defined need. With this intention in mind, Contract Holders pay their Contributions on behalf of the Covered Members on the basis of Tabarru' (donation) to the Takaful Fund managed by Us as the Takaful Operator.
The Entire Contract between You and Us	<p>This Takaful Contract, all written proposals, the Takaful Schedule, any applicable Supplementary Contracts, and Endorsements that We may issue subsequent to the Issue Date of this Contract, form the entire contract between You and Us.</p> <p>Any change in the provisions of this Contract must be contained in an Endorsement and duly signed by one of Our authorised officer.</p> <p>As this is a legal contract between You and Us, please read your Takaful Contract carefully.</p>
Takaful Schedule	<p>The Takaful Schedule is issued as a separate attachment, but forms a part of this Contract. It contains information on:</p> <ul style="list-style-type: none"> • who the Contract Holder is, • who the Covered Members are and the scope of coverage, • the Period of Coverage and the option for Renewal of Cover, • the Contribution amount <p>Please check the information to ensure that they correctly reflect the type and amount of Benefit requested. Please return this Takaful Contract to Us immediately for rectification if any of the information is incorrect.</p>

TAKAFUL CONTRACT INFORMATION STATEMENT

Free-Look Period of Fifteen (15) Days	The Covered Members have the right to cancel their Takaful cover for any reason by informing Us within fifteen (15) days after the Inclusion Date. If cancelled, the Takaful cover will be considered void from the beginning and any Contribution paid in respect of the Covered Member will be refunded to You, less any medical examination fee incurred.
Admission of Age	You are required to provide Us with proof of age (i.e. a birth certificate or identity card) before We can make any payment of Benefits to You.
Where to Pay Contributions	You may pay Contributions directly at Our Head Office or at any of Our branches, or by any method of payment that is acceptable to Us.
Failure to Pay Contribution	You are given a Grace Period of thirty-one (31) days to pay the Contribution due. If We do not receive Your Contribution within the Grace Period, Your Contract shall automatically be cancelled and We shall be entitled to the pro-rated Contribution for the period between the date of inception of this Contract up to its cancellation date.

How to Make a Claim	To make a claim under this Contract please refer to Notice of Claim and Filing Proof of Loss provisions in this Contract. Should You require any assistance, kindly call Our Etiqa Oneline at 1300 13 8888.
Right to Make Partial Withdrawal	The Covered Members have the right to make partial withdrawal for the amount in their Investment Fund under this Contract, if any.
Right to Cancel or Surrender	<p>You have the right to cancel this Contract by giving Us a written notice, not less than thirty (30) days prior to cancellation.</p> <p>In addition, the Covered Members may also surrender their Takaful cover under this Contract for the amount in their Investment Fund and the remaining surplus from the Risk Fund, if any. However, it may not be to their advantage to surrender their Takaful cover:</p> <ul style="list-style-type: none"> i) as they may receive a lesser amount compared to the Contribution that they have paid; and ii) if they plan to participate in another Family Takaful Contract, they may not be able to get similar Benefit for the same amount of Contribution.
Change of Address	Please inform Us immediately of any change of address to ensure that there will be no interruption in communication from Us to You.
Contact Us	<p>For service or information on this Contract, please contact:</p> <ul style="list-style-type: none"> • Etiqa Oneline at 1300 13 8888; or • Any of Our branch offices.
Service Standards	<p>We assure You that We will strive to provide You with the highest standard of service. However, if We do not meet Your expectations, or if You are not satisfied with Our service, You may:</p> <ul style="list-style-type: none"> • Write to Our Complaint Management Unit at Level 4, Tower C, Dataran Maybank, No 1, Jalan Maarof, 59000 Kuala Lumpur; or • Call Us at 1300 13 8888 (Overseas: +603-2780 4500); or • Fax your feedback to Us at 03-2785 3093; or • E-mail us at info@etiqa.com.my
In the Event of Dispute	<p>If there is a dispute concerning this Contract, You may refer the matter to the following parties.</p> <p>If a claims dispute arises from this Contract that You feel has not been fairly nor satisfactorily resolved, You may refer Your complaint to:</p>
Financial Mediation Bureau	<p>The Financial Mediation Bureau Level 25, Dataran Kewangan Darul Takaful No 4, Jalan Sultan Sulaiman 50000 Kuala Lumpur. Tel: 03-2272 2811 Fax: 03-2274 5752 E-mail: enquiry@fmb.org.my</p>
Bank Negara Malaysia	<p>Other Family Takaful related matters should be directed to:</p> <p>Laman Informasi Nasihat dan Khidmat (LINK) Tingkat Bawah, Blok C Bank Negara Malaysia P.O. Box 10922 50929 Kuala Lumpur Tel: 03 2698 8044 Fax: 03 2693 4051</p>

Our Head Office Address	<p>If You need to write to Us, Our Head Office address is:</p> <p>Etiqa Takaful Berhad (266243-D) Level 19, Tower C, Dataran Maybank, No 1, Jalan Maarof, 59000 Kuala Lumpur. Tel No: 03 2297 3888 Fax No: 03 2297 3800 Email: info@etiqa.com.my</p>
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DEFINITIONS

You (Your, the Contract Holder)	The owner of this Contract, as stated in the Takaful Schedule.
We (Our, Us, the Takaful Operator)	Etiqa Takaful Berhad (Company No. 266243-D)
Covered Member(s)	All persons who have been listed by You and accepted by Us for inclusion in the Scheme.
Group Benefits Scheme (the Scheme)	The Benefits that Covered Members are entitled to from the Contract, and/or Supplementary Contract(s), if any, upon being accepted for inclusion in the Scheme.
Contract / Basic Contract / Takaful Contract	The entire contract consisting of all proposals, the Contract, the Takaful Schedule and any Endorsements that may be issued after the Issue Date.
Endorsement(s)	Any written change to the Contract which is issued and properly authorised by Us.
Contribution(s)	The amount of money that You pay to Us to participate in this Group Family-Mutiara Plus Takaful Contract and its Supplementary Contract(s), if any.
Wakalah	"Wakalah" is an Arabic word meaning the nomination by one party of another to act on his / her behalf. In the context of this Contract, this means that You have appointed Us to manage the Risk-Takaful Fund on Your behalf.
Wakalah Fee	The portion of the Contribution that is used to pay commissions and Our fee to operate and manage the Risk Fund and Investment Fund on Your behalf.
Tabarru'	An Arabic word that means donation, gift or contributions. In this Takaful Contract, it means Contribution for the purpose of Takaful. This portion is placed in the Risk Fund.
Risk Fund	The fund where the Tabarru' portion of Your Contribution is placed. The Contributions allocated to this fund and its investment(s) are used to pay for the Takaful Benefits.
Investment Fund	The fund where the Savings portion of the Contribution is placed for the purposes of investments and to receive any income from it.
Savings	The portion of the Contribution that is placed in the Investment Fund.

Qard Hasan	Qard Hasan, in the context of this Contract, means an interest-free loan which is given by the Takaful Operator to the Risk Fund when it becomes insufficient to fulfil its Takaful obligation. The loan will be repaid by the future surpluses from the Risk Fund.
Commencement Date	The date that the first Contribution is due.
Renewal Date	One (1) full year from the Commencement Date, and every year thereafter as long as this Contract is renewed and the Contribution is paid.
Issue Date	The date that this Contract and any Endorsement are issued.
Inclusion Date	The date that Covered Members have been accepted for inclusion into the Group Benefits Scheme.
In Force	This Contract is "In Force" if it has not been terminated or expired.
Grace Period	The additional period of time that We provide for You to pay the Contribution due. The Grace Period under this Contract is thirty-one (31) days from the date the Contribution is due.
Takaful Benefit(s) / Benefit(s)	Any payments that We will pay when the Covered Event(s) occur.
Sum Covered	The amount as stated in the Certificate of Participation.
Covered Event(s)	The event(s), upon the occurrence of which the Benefits become payable under this Contract and/or Supplementary Contract(s), if any. The Covered Event(s) is/are identified in the Takaful Schedule.
Amal Jariah	A continuous/long lasting donation/contribution that benefits the public.
Free Cover Limit	The amount of benefit covered without the requirement for any evidence of health.
Natural Cause	Attributed to an illness or an internal malfunction of the body.
Accident	A sudden, unforeseen and unplanned event that results in bodily injury that is violent, external and visible in nature.
Injury	Bodily injury effected directly and independently of all other causes by an Accident of which, except in the case of drowning or of internal injury revealed by autopsy, there is evidence of a visible contusion or wound on the exterior of the body.
Diagnosis	The definitive diagnosis made by a Physician, based upon such specific evidence, as referred to in the Definition of Critical Illness or, in the absence of such specific evidence, based upon radiological, clinical, histological or laboratory evidence acceptable to Us. In the event of any doubt regarding the appropriateness or correctness of the diagnosis, We shall have the Covered Member and/or any of the evidence used in arriving at such

PERMANENT PARTIAL DISABILITY (PPD) SUPPLEMENTARY CONTRACT

Permanent Partial Disability Supplementary Contract	<p>This Supplementary Contract is issued together with the Basic Contract as You have participated in this additional Benefit with an additional Contribution. The Sum Covered and required Contribution for this Supplementary Contract is shown in the Certificate of Participation.</p> <p>In addition, the Basic Contract's provisions shall apply to this Supplementary Contract.</p>
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BENEFITS

Permanent Partial Disability (PPD) Benefit	<p>If a Covered Member suffers from Permanent Partial Disability due to the Covered Event(s) identified in the Takaful Schedule, We shall pay You a percentage of the Sum Covered for Permanent Partial Disability, in respect of the Covered Member, as stated in the Certificate of Participation. The percentage of Benefit payable is specifically stated in the Table of Benefits for Permanent Partial Disability.</p> <p>In the event that the Covered Member suffers from more than one (1) type of Permanent Partial Disability, the total amount of Permanent Partial Disability Benefit payable shall not exceed One Hundred Percent (100%) of the Sum Covered for Permanent Partial Disability in respect of the Covered Member.</p> <p>The Sum Covered of the Basic Contract in respect of the Covered Member shall automatically be reduced by the amount of Permanent Partial Disability Benefit paid. In the event of a total One Hundred Percent (100%) having been paid, We shall be discharged from any further liability in respect of the Covered Member.</p> <p>Under this Supplementary Contract, total and irrecoverable loss of use of limb/member could also be treated as loss of limb/member subject to certification by Our appointed physician.</p>
Conditions for Benefit to be Paid	<p>We shall only pay the Permanent Partial Disability Benefit if:</p> <ol style="list-style-type: none"> i) the covered disablement occurs within thirty (30) days of the Covered Event(s), as specified in the Takaful Schedule; and ii) the covered disablement occurs before the Covered Member reaches the maximum age of cover of the Supplementary Contract, as specified in the Takaful Schedule; and iii) The Covered Member survives for at least thirty (30) days after the date of event.
Exclusions	<p>We shall not pay the Benefit under this provisions if the disability occurs due to:</p> <ol style="list-style-type: none"> a) Participation in any criminal act, riot, civil commotion, insurrection, war (whether declared or not), revolution or any warlike operations, acts of foreign enemies, any act of terrorism and chemical warfare; or b) Participation in any dangerous or hazardous sport or hobby such as (but not limited to) steeple chasing, polo, horse racing, underwater diving, hunting, motor vehicular racing, mountaineering or potholing; or c) Participation in any form of aviation (except as a fare-paying passenger or crew member on a regular route operated by a commercial airline), or aerial sports such as (but not limited to) skydiving, parachuting, bungee jumping, hang gliding and ballooning; or d) Self-inflicted injuries or suicide or attempted suicide, while sane or insane; or

PERMANENT PARTIAL DISABILITY (NORMAL SCALE) - MUTIARA 30.12.11.DOC

	<p>e) Injuries or hospitalisation as a result of drug addiction, or while under the influence of alcohol; or</p> <p>f) HIV infection, Acquired Immune Deficiency Syndrome (AIDS) and any AIDS related conditions; or</p> <p>g) Committing or trying to commit any illegal act.</p>
Existing Health Condition	This Supplementary Contract also excludes any Pre-Existing Condition, which existed prior to the Inclusion Date, in respect of a Covered Member.

**TABLE OF BENEFITS FOR PERMANENT PARTIAL DISABILITY
(NORMAL SCALE)**

<u>DESCRIPTION OF DISABLEMENT</u>	<u>PERCENTAGE OF THE SUM COVERED PAYABLE</u>
Loss of sight of one eye.....	40%
Loss of one hand or one arm or one foot or one leg.....	50%
Loss of four fingers.....	40%
Loss of hearing in one ear.....	15%
Loss of thumb	
- both phalanges.....	25%
- one phalanx.....	10%
Loss of index finger	
- three phalanges.....	10%
- two phalanges.....	8%
- one phalanx.....	4%
Loss of middle finger	
- three phalanges.....	6%
- two phalanges.....	4%
- one phalanx.....	2%
Loss of ring finger	
- three phalanges.....	5%
- two phalanges.....	4%
- one phalanx.....	2%
Loss of little finger	
- three phalanges.....	4%
- two phalanges.....	3%
- one phalanx.....	2%
Loss of metacarpals	
- first or second (additional).....	3%
- third, fourth or fifth (additional).....	2%
Loss of toes	
- all.....	15%
- great, both phalanges.....	5%
- great, one phalanx.....	2%
- other than great, if more than one toe lost, each.....	1%

	<p>present even at rest.</p> <p>Cardiomyopathy directly related to alcohol or drug abuse is excluded.</p>
Stroke	<p>Defined as a cerebrovascular accident or incident producing neurological sequelae of a permanent nature, having lasted not less than three months. Infarction of brain tissue, hemorrhage and embolization from an extra-cranial source are included. The diagnosis must be based on changes seen in a CT scan or MRI and certified by a neurologist.</p> <p>Specifically excluded are cerebral symptoms due to transient ischemic attacks, any reversible ischemic neurological deficit, vertebrobasilar ischemia, cerebral symptoms due to migraine, cerebral injury resulting from trauma or hypoxia and vascular disease affecting the eye or optic nerve or vestibular functions.</p>
Surgery To Aorta	<p>The actual undergoing of surgery via a thoracotomy or laparotomy to repair or correct an aortic aneurysm, an obstruction of the aorta or a dissection of the aorta. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches. Angioplasty and all other intra-arterial, catheter based techniques, keyhole or laser procedures are excluded.</p>
Systemic Lupus Erythematosus With Lupus Nephritis	<p>Refers to a multi-system, autoimmune disorder characterized by the development of auto-antibodies, directed against various self-antigens.</p> <p>Within the context of this Supplementary Contract, SLE is restricted to only those forms of systemic lupus Erythematosus, which involve the kidneys (Type III to Type V Lupus Nephritis, established by renal biopsy). Other forms such as discoid lupus and those forms with only hematological and joint involvement are specifically excluded.</p> <p>WHO Lupus Classification:</p> <p>Class I - Minimal change glomerulonephritis Class II - Mesangial glomerulonephritis Class III - Focal Segmental glomerulonephritis Class IV - Diffuse glomerulonephritis Class V - Membranous glomerulonephritis</p>
Terminal Illness	<p>The conclusive diagnosis of a condition that is expected to result in death of the Covered Member within twelve (12) months. The Covered Member must no longer be receiving active treatment other than that for pain relief. The diagnosis must be supported by written confirmation from the appropriate specialist and confirmed by the Takaful Operator's appointed doctor.</p>

PREAMBLE

Activities of Daily Living (ADL)	<p>(a) Transfer Getting in & out of a chair without requiring physical assistance.</p> <p>(b) Mobility The ability to move from room to room without requiring any physical assistance.</p> <p>(c) Continence The ability to voluntarily control bowel and bladder functions such as to maintain personal hygiene.</p> <p>(d) Dressing Putting on and taking off all necessary items of clothing without requiring assistance of another person.</p>
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	<p>(e) Bathing/Washing The ability to wash in the bath or shower (including getting in or out of the bath or shower) or wash by any other means.</p> <p>(f) Eating All tasks of getting food into the body once it has been prepared.</p>
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	Medical evidence in the form of an audiometry and sound-threshold tests must be provided and certified by an Ear, Nose, and Throat (ENT) specialist.
Encephalitis	Defined as severe inflammation of brain substance, resulting in permanent neurological deficit lasting for a minimum period of thirty (30) days and certified by a neurologist. The permanent neurological deficit must result in an inability to perform at least three (3) of the Activities of Daily Living (as stated in the preamble attached). Encephalitis in the presence of HIV infection is specifically excluded.
End Stage Kidney Failure	End stage kidney failure presenting as chronic irreversible failure of both kidneys to function, as a result of which regular renal dialysis initiated or renal transplantation is carried out.
End Stage Liver Failure	End stage liver failure as evidenced by all of the following: <ul style="list-style-type: none"> • Permanent jaundice; • Ascites; and • Hepatic encephalopathy. Liver failure secondary to alcohol or drug abuse is excluded.
End Stage Lung Disease	End stage lung disease causing chronic respiratory failure. All of the following criteria must be met: (a) Requiring permanent oxygen therapy as a result of a consistent FEV1 test value of less than one litre (Forced Expiratory Volume during the first second of a forced exhalation). (b) Baseline Arterial Blood Gas analysis with partial oxygen pressures of 55mmHg or less (c) Dyspnoea at rest.
Fulminant Viral Hepatitis	This is defined as a sub massive to massive necrosis of the liver caused by any virus leading precipitously to liver failure. The diagnostic criteria to be met are: (a) A rapidly decreasing liver size as confirmed by abdominal ultrasound; (b) Necrosis involving entire lobes, leaving only a collapsed reticular framework; (c) Rapidly deteriorating liver functions tests; and (d) Deepening jaundice. Hepatitis B infection or carrier status alone does not meet the diagnostic criteria.
Heart Attack	The death of a portion of the heart muscle (myocardium) as a result of inadequate blood supply and being evidenced by all of the following criteria: (a) A history of typical prolonged chest pain, (b) New electrocardiographic changes resulting from this occurrence, (c) Elevation of the cardiac enzyme, CPK-MB above the generally accepted laboratory levels of normal or troponins recorded at the following levels or higher: - Troponin T > 1.0 ng/ml or equivalent threshold with other Troponin I methods Angina is specifically excluded.
Heart Valve Surgery	The actual undergoing of open-heart surgery to replace or repair cardiac valves as a consequence of heart valve defects or abnormalities. Repair via intra-arterial procedure, key-hole surgery or similar techniques are specifically excluded.
Loss of Speech	Total and irrecoverable loss of the ability to speak for a continuous period of twelve (12) months. Medical evidence to confirm injury or illness to the vocal cords to support this

	<p>underlying tumour must be confirmed by imaging studies such as CT Scan or MRI.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> (a) Cysts (b) Granulomas (c) Malformations in or of the arteries or veins of the brain (d) Hematomas (e) Tumours in the pituitary gland, or spine (f) Tumours of the acoustic nerve
Blindness /Total Loss Of Sight	Total and irreversible loss of sight in both eyes as a result of illness or accident. The blindness must be confirmed by an ophthalmologist.
Brain Surgery	<p>The actual undergoing of surgery to the brain under general anaesthesia during which a craniotomy is performed.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> (a) Burr hole procedures, transphenoidal procedures and other minimally invasive procedures (b) Brain surgery as a result of an accident
Cancer	<p>Any malignant tumour positively diagnosed with histological confirmation and characterized by the uncontrolled growth of malignant cells and invasion of tissue.</p> <p>The term malignant tumour includes leukaemia, lymphoma and sarcoma.</p> <p>For the above definition, the following are not covered:</p> <ul style="list-style-type: none"> 1. All cancers which are histologically classified as pre-malignant, non-invasive; carcinoma in situ; having either borderline malignancy; or having low malignant potential 2. All tumours of the prostate, thyroid and urinary bladder histologically classified as T1N0M0 (TNM classification) 3. Chronic Lymphocytic Leukaemia less than RAI Stage 3 4. All cancers in the presence of HIV 5. Any skin cancer other than malignant melanoma
Chronic Aplastic Anaemia	<p>Irreversible persistent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least two (2) of the following:</p> <ul style="list-style-type: none"> (a) Regular blood product transfusion; (b) Marrow stimulating agents; (c) Immunosuppressive agents; or (d) Bone marrow transplantation. <p>The diagnosis must be confirmed by a bone marrow biopsy.</p>
Coma	<p>A state of unconsciousness with no reaction or response to external stimuli or internal needs, persisting continuously for at least ninety-six (96) hours, requiring the use of life support systems and resulting in a permanent neurological deficit, lasting more than thirty (30) days. Confirmation by a neurologist must be present.</p> <p>Coma resulting directly from self-inflicted injury, alcohol or drug abuse is excluded.</p>
Coronary Artery By-Pass Surgery	<p>Refers to the actual undergoing of open-chest surgery to correct or treat Coronary Artery Disease (CAD) by way of Coronary Artery By-Pass Grafting.</p> <p>Angioplasty and all other intra-arterial, catheter based techniques, keyhole or laser procedures are excluded.</p>
Deafness/Total Loss Of Hearing	Total and irreversible loss of hearing in both ears as a result of illness or accident. Total means "the loss of at least 80 decibels in all frequencies of hearing".

	<p>days of the accident.</p> <p>"Medical Staff" is defined as doctors (general physicians and specialists), nurses, laboratory technicians, dentists (surgeons and nurses), ambulance workers who are working in the medical centre or hospital or dental clinics/polyclinics in Malaysia.</p> <p>Infection in any other manner including as a result of sexual activity, blood transfusions or recreational intravenous drug use is specifically excluded.</p>
Other Serious Coronary Artery Disease	<p>The narrowing of the lumen of at least three major coronary arteries (not inclusive of their branches) by a minimum of sixty percent (60%) or more as proven by coronary arteriography (non-invasive diagnostic procedures are excluded). Coronary Arteries herein refer to the Circumflex Artery, Right Coronary Artery (RCA), Left Anterior Descending Artery (LAD) and Left Main Stem (a narrowing of sixty percent (60%) or more of the Left Main Stem will be considered as a narrowing of two major arteries). This benefit is payable regardless of whether or not any form of coronary artery surgery has been performed.</p>
Paralysis/Paraplegia	<p>The complete and permanent loss of use of both arms or both legs, or of one arm and one leg, through paralysis caused by illness or injury persisting for at least six (6) months from the date of trauma or illness.</p>
Parkinson's Disease	<p>Unequivocal diagnosis of Parkinson's Disease by a neurologist where the condition:</p> <ul style="list-style-type: none"> (a) Cannot be controlled with medication (b) Shows signs of progressive impairment <p>Activities of daily living assessment confirm the inability of the Covered Member to perform without assistance three (3) or more of the Activities of Daily Living (as stated in the preamble attached).</p> <p>Only idiopathic Parkinson's Disease is covered. Drug-induced or toxic causes of Parkinsonism are excluded.</p>
Primary Pulmonary Arterial Hypertension	<p>Means Primary Pulmonary Arterial Hypertension with substantial right ventricular enlargement established by investigations including cardiac catheterization, resulting in permanent physical impairment to the degree of at least Class III of the New York Heart Association (NYHA) classification of cardiac impairment.</p> <p>Pulmonary arterial hypertension resulting from other causes shall be excluded from this benefit.</p> <p>The NYHA Classification of Cardiac Impairment for Class III and Class IV means the following:-</p> <p>Class III: Marked limitation of physical activity. Comfortable at rest but less than ordinary activity causes symptoms.</p> <p>Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.</p>
Severe Cardiomyopathy	<p>An impaired function of the heart muscle, unequivocally diagnosed as Cardiomyopathy by a cardiologist, and resulting in permanent physical impairment of at least Class III of the New York Heart Association's classification of cardiac impairment. The diagnosis has to be supported by echocardiographic findings of compromised ventricular performance.</p> <p>The NYHA Classification of Cardiac Impairment for Class III and Class IV means the following:-</p> <p>Class III: Marked limitation of physical activity. Comfortable at rest but less than ordinary activity causes symptoms.</p> <p>Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be</p>

	<p>disability must be supplied by an Ear, Nose, and Throat specialist.</p> <p>All psychiatric related causes are excluded.</p>
Major Burns	Third degree (i.e. full thickness) skin burns covering at least twenty percent (20%) of the total body surface area.
Major Head Trauma	Physical head injury causing permanent functional impairment lasting for a minimum period of three (3) months from the date of the trauma or injury. The resultant permanent functional impairment is to be verified by a neurologist and must result in an inability to perform at least three (3) of the Activities of Daily Living (as stated in the preamble attached).
Major Organ / Bone Marrow Transplant	<p>The receipt of a transplant of:</p> <ul style="list-style-type: none"> Human bone marrow using hematopoietic stem cells preceded by total bone marrow ablation; or One of the following human organs: heart, lung, liver, kidney, pancreas that resulted from irreversible end stage failure of the relevant organ. <p>Other stem cell transplants are excluded.</p>
Medullary Cystic Disease	A progressive hereditary disease of the kidneys characterized by the presence of cysts in the medulla, tubular atrophy and interstitial fibrosis with the clinical manifestations of anaemia, polyuria and renal loss of sodium, progressing to chronic renal failure. Diagnosis should be supported by a renal biopsy.
Motor Neuron Disease	<p>Refers to a progressive degeneration of the corticospinal tracts and anterior horn cells or bulbar efferent neurons. These include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis.</p> <p>The diagnosis must be confirmed by a neurologist as progressive and resulting in permanent neurological deficit.</p>
Multiple Sclerosis	<p>Unequivocal diagnosis by a consulting neurologist confirming the following combination, which has persisted for at least a continuous period of six (6) months:</p> <ol style="list-style-type: none"> Symptoms referable to tracts (white matter) involving the optic nerves, brain stem and spinal cord, producing well-defined neurological deficits; A multiplicity of discrete lesions; and A well-documented history of exacerbation and remissions of said symptoms/neurological deficits.
Muscular Dystrophy	<p>The diagnosis of muscular dystrophy shall require a confirmation by a <i>neurologist</i> of the combination of three (3) out of four (4) of the following conditions:</p> <ol style="list-style-type: none"> Family history of other affected individuals Clinical presentation including absence of sensory disturbance, normal cerebro-spinal fluid and mild tendon reflex reduction Characteristic electromyogram Clinical suspicion confirmed by muscle biopsy <p>No benefit will be payable under this Covered Event before the Covered Member has reached the age of twelve (12) years next birthday.</p>
Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection	Infection with the Human Immunodeficiency Virus (only if the Covered Member is a Medical Staff as defined below), where it was acquired as a result of an accident occurring during the course of carrying out normal occupational duties with sero-conversion to HIV infection occurring within six (6) months of the accident. Any accident giving rise to a potential claim must be reported to the Takaful Operator within thirty (30) days of the accident taking place supported by a negative HIV test taken within seven (7)

ACCELERATED CRITICAL ILLNESS SUPPLEMENTARY CONTRACT

Accelerated Critical Illness Supplementary Contract	<p>This Supplementary Contract is issued together with the Basic Contract as You have participated in this additional Benefit with an additional Contribution. The Sum Covered and required Contribution for this Supplementary Contract is shown in the Certificate of Participation.</p> <p>In addition, the Basic Contract's provisions shall apply to this Supplementary Contract.</p>
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BENEFITS

Critical Illness Benefit	<p>While this Supplementary Contract is In Force, We shall pay You the Sum Covered of the Supplementary Contract when the Covered Member is diagnosed to have any of the covered Critical Illnesses (except Angioplasty or Other Invasive Treatments For Major Coronary Artery Disease) listed in the Definition of Critical Illness.</p> <p>The Sum Covered of the Basic Contract, with respect to the Covered Member, shall automatically be reduced by the amount of Critical Illness Benefit paid.</p>
Limited Payment (for Angioplasty and Other Invasive Treatments for Major Coronary Artery Disease)	<p>We shall pay ten percent (10%) of the Sum Covered of the Supplementary Contract, up to a maximum of Ringgit Malaysia Fifty Thousand (RM50,000), upon the Covered Member undergoing, for the first time ever, Angioplasty or Other Invasive Treatments For Major Coronary Artery Disease.</p> <p>In the event of a Limited Payment under the Benefit above, the Sum Covered of the Supplementary Contract and the Basic Contract, with respect to the Covered Member, shall be reduced by the amount that is paid.</p>
Conditions for Benefit to be Paid	<p>We shall only pay the Critical Illness Benefit if:</p> <ol style="list-style-type: none"> the covered Critical Illness occurs thirty (30) days after the Inclusion Date or date of Reinstatement of this Supplementary Contract; and the covered Critical Illness occurs before the Covered Member reaches the maximum age of cover of the Supplementary Contract, as specified in the Takaful Schedule; and The Covered Member is diagnosed with the Critical Illness for the first time; and The Covered Member survives for at least thirty (30) days after he/she is diagnosed with a Critical Illness; and Diagnosis or event of the covered Critical Illness meets the Definition of Critical Illness. <p>In addition, the following Critical Illnesses are only covered sixty (60) days after the Inclusion Date or date of Reinstatement of the Supplementary Contract:</p> <ol style="list-style-type: none"> Cancer Coronary Heart Disease Requiring Surgery Heart Attack Other Serious Coronary Artery Disease
Exclusions	<p>This Supplementary Contract shall not cover any of the following:-</p> <ol style="list-style-type: none"> Pre-Existing Condition which existed prior to the Inclusion Date, in respect of a

	<p>Covered Member.</p> <p>b) Participation in any riot, civil commotion, insurrection, war (whether declared or not), revolution or any warlike operations, acts of foreign enemies, any act of terrorism and chemical warfare.</p> <p>c) Participation in any dangerous or hazardous sport or hobby such as (but not limited to) steeple chasing, polo, horse racing, underwater diving, hunting, motor vehicular racing, mountaineering or potholing;</p> <p>d) Participation in any form of aviation (except as a fare-paying passenger or crew member on a regular route operated by a commercial airline), or aerial sports such as (but not limited to) skydiving, parachuting, bungee jumping, hang gliding and ballooning.</p> <p>e) Self-inflicted injuries or suicide or attempted suicide, while sane or insane.</p> <p>f) Injuries or hospitalisation as a result of drug addiction or while under the influence of alcohol.</p> <p>g) HIV infection, Acquired Immune Deficiency Syndrome (AIDS) and any AIDS related conditions, unless it is specifically mentioned in the Definition of Critical Illness.</p> <p>h) Committing or trying to commit any illegal act.</p>
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DEFINITIONS OF CRITICAL ILLNESS

Alzheimer's Disease/ Irreversible Organic Degenerative Brain Disorders	<p>Deterioration or loss of intellectual capacity or abnormal behaviour as evidenced by the clinical state and accepted standardized questionnaires or tests arising from Alzheimer's Disease or irreversible organic degenerative brain disorders resulting in significant reduction in mental and social functioning (such that continuous supervision is required). The diagnosis must be clinically confirmed by a neurologist.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> i) Non organic brain disorders such as neurosis and psychiatric illnesses; and ii) Drug or alcohol related brain damage.
Angioplasty And Other Invasive Treatments For Major Coronary Artery Disease	<p>Means the actual undergoing for the first time of Coronary Artery Balloon Angioplasty, artherectomy, laser treatment or the insertion of a stent to re-vascularise a narrowing or blockage of one or more coronary arteries as shown by angiographic evidence.</p> <p>Intra-arterial investigative procedures are not included. Payment under this clause is limited to ten percent (10%) of the Critical Illness coverage under this Supplementary Contract subject to a maximum of Ringgit Malaysia Fifty Thousand (RM 50,000). This benefit is payable once only and shall be deducted from the amount of this Supplementary Contract, thereby reducing the amount of the Lump Sum Payment which may be payable herein.</p>
Bacterial Meningitis	<p>Bacterial meningitis causing inflammation of the membranes of the brain or spinal cord resulting in permanent neurological deficit lasting for a minimum period of thirty (30) days and resulting in a permanent inability to perform at least three (3) of the Activities of Daily Living (as stated in the preamble attached).</p> <p>The diagnosis is to be confirmed by:</p> <ul style="list-style-type: none"> ▪ an appropriate specialist ▪ the presence of bacterial infection in the cerebrospinal fluid by lumbar puncture
Benign Brain Tumour	<p>A life-threatening, non-cancerous tumour in the brain or meninges within the cranium, giving rise to characteristic signs of increased intra-cranial pressure such as papilloedema, mental symptoms, seizures and sensory impairment. The presence of the</p>

DAILY HOSPITAL BENEFIT SUPPLEMENTARY CONTRACT

Daily Hospital Benefit Supplementary Contract	<p>This Supplementary Contract is issued with the Basic Contract, as You have participated in this additional Benefit with an additional Contribution. The Sum Covered and required Contribution for this Supplementary Contract is shown in the Certificate of Participation.</p> <p>In addition, the Basic Contract's provisions shall apply to this Supplementary Contract.</p>
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BENEFITS

Daily Hospital Benefit	<p>While the Supplementary Contract is In Force, upon the Covered Member being admitted to a Hospital, based on the recommendation of his/her Physician, We shall pay You the daily Benefit under this Supplementary Contract which is specified in the Certificate of Participation.</p> <p>This Benefit shall only be payable provided:</p> <ul style="list-style-type: none"> i) The Covered Member is hospitalised for at least six (6) hours; and ii) The Covered Member is hospitalised within thirty (30) days after the date of Accident or illness; and iii) The aggregate Benefits paid under this Supplementary Contract in respect of any Accident or illness have not exceeded the maximum period of twenty-six (26) weeks.
Exclusions	<p>The Supplementary Contract shall exclude Hospital confinements within thirty (30) days from the Inclusion Date, unless due to an Accident.</p> <p>In addition, the Supplementary Contract does not cover any claims arising from Accidents or illnesses due to:</p> <ul style="list-style-type: none"> a) Elective procedures other than medical procedures necessitated by injury or illness. b) Tests or treatment related to infertility, contraception, sterilization, birth defects, congenital illness, hereditary conditions, circumcision or any abortion and consequences thereof. c) Treatment of mental illness and psychiatric disorders, self-inflicted injury while sane or insane, attempted suicide, abuse of alcohol, and drug addiction and Routine medical examinations or consultations; d) Cosmetic or plastic surgery, dental care and treatment, organ and tissue donation, gender transformation and exploratory or experimental surgery or any other abuse. e) Acquired Immune Deficiency Syndrome (AIDS), AIDS related complex or infection by HIV and all sexually transmitted diseases. f) Participation in any criminal act, riot, civil commission, insurrection, war (whether declared or not), revolution or any warlike operations, acts of foreign enemies, any act of terrorism and chemical warfare. g) Participating in any dangerous or hazardous sport or hobby such as (but not

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	<p>limited to) steeple chasing, polo, horse racing, underwater diving, hunting, motor vehicular racing, mountaineering or potholing;</p> <p>h) Participation in any form of aviation (except as a fare-paying passenger or crew member on a regular route operated by a commercial airline), or aerial sports such as (but not limited to) skydiving parachuting, bungee jumping, hang gliding and ballooning.</p> <p>i) Committing or trying to commit any illegal act.</p>
Existing Health Condition	<p>This Supplementary Contract also excludes any Pre-Existing Condition, which existed prior to the Inclusion Date, in respect of a Covered Member.</p>