

! Do you have any questions about MediKad? Check here for more info about the product.

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Q1: Who is Kaotim?

Kaotim is a brand managed by Takaful Malaysia.

Eligibility

Q2: Who can apply for this plan and what is the eligible entry age?

An individual aged 19 years old next birthday to 69 years old next birthday can apply for this plan. As a parent, you can also apply for this plan for your child who must be at least 6 years old next birthday to 18 years old next birthday at the point of enrolment.

Q3: Can I enrol another person for this plan besides my children?

No, you can enrol for this plan for your child only.

Q4: Is there a minimum age to be the certificate owner if I wish to apply for this plan for my child?

Yes, you must be at least 19 years old next birthday.

Q5: Is there any underwriting for this plan?

Yes, you are required to answer the online underwriting questions during the enrolment process. The final contribution quote will depend on the occupation and health condition of the person covered.

Q6: Do I need to go for a medical examination?

No, this plan provides you instant underwriting decision where you just need to answer the relevant underwriting questions depending on the health condition of the person covered.

Q7: Can I be covered under more than one MediKad plan?

Yes, you may be covered under more than one MediKad certificate. However, you can only utilize 1 medical plan when you are admitted to the hospital unless the annual limit is exceeded.

Q8: I have already been covered under Takaful myClick MediCare, can I participate in MediKad as well?

Yes, you can participate in MediKad even though you already have an existing Takaful myClick MediCare certificate.

Q9: How much cover do I need?

The coverage that you need depends on your budget and financial needs. You can determine the amount of coverage you need by using the self-assessment tool provided [here](#).

Q10: When will my coverage begin?

Your coverage will take effect upon the successful application and payment of the first contribution via your chosen payment method. The effective date will be stated in your e-Certificate.

Q11: When will I receive my certificate?

Upon your successful application with contribution payment, you will receive your e-Certificate immediately. You can also view your e-Certificate in the myTakaful Customer portal.

Q12: What are the possible implications of switching from one type of medical plan to another or from one company to another company?

If you switch over your medical plan from one company to another or if you surrender your current medical plan with another medical plan within the same company, your new medical plan will be subjected to a waiting period of 30 days or 120 days, depending on the illness, where no claims will be payable within this period.

Benefits & Limits

Q13: What is covered under this plan?

This plan provides you cashless admission to our panel hospitals in Malaysia. It covers the eligible hospitalisation, surgical expenses and selected outpatient benefits up to the annual limit of the selected plan.

Q14: Is there a medical card provided for this plan?

Yes, an e-medical card will be provided for this plan, which you will receive via email after the application is successful. You may also log in to our *myTakaful* Customer portal and download the e-medical card.

Q15: How do I use the e-medical card?

It's simple; just present your e-medical card at our panel hospital registration counter for admission.

Q16: What is the lifetime limit for this plan?

The benefits payable under this plan are only subject to an annual limit, no lifetime limit shall apply.

Q17: If I reach the annual limit of this plan before the end of the certificate year, am I still covered under this plan?

Once the annual limit of this plan is reached, no further benefits shall be payable for the remainder of the certificate year. However, you can still claim for the next certificate year, when your annual limit is fully reinstated, provided the contribution is made.

Q18: Is there a co-payment for this plan?

No, there is no co-payment charged under this plan.

If you are hospitalised in a Room and Board (R&B) which is higher than your room and board benefit limit, you just need to pay the difference in the R&B; i.e. R&B charge minus your entitlement.

Fees & Charges

Q19: How much contribution do I have to pay?

The contribution amount varies according to the plan option, contribution payment mode, gender, and attained age of the person covered at subsequent year's renewal.

You may refer to the table of annual contributions in the Product Disclosure Sheet which are applicable to standard lives and yearly payment. Additional contribution loadings may apply depending on the occupation and health condition of the person covered. You must ensure that the contribution payable for this plan is within your budget.

Q20: Is any commission payable for this plan?

This plan is a direct product, so there are no commissions payable. However, we may engage in marketing collaborations with our business partners or intermediaries to promote this plan.

Q21: What are the payment methods allowed for this plan?

The contribution payment methods accepted by us are credit/debit card only.

If you are making payment by debit card, please note that opt-in from the cardholder to the bank is required to ensure subsequent contribution deductions are successful for continuous coverage.

Q22: Will the contribution increase as I grow older?

Yes, the contributions vary by the attained age of the person covered.

Q23: Are the contribution rates guaranteed?

No, the contribution rates are not guaranteed and Takaful Malaysia reserves the right to revise the contribution rates by giving you 30 days' prior notice before the next certificate anniversary.

Q24: How do I pay my renewal contribution?

We will automatically deduct the contribution from your chosen payment method based on the contribution payment mode that you have selected.

Q25: Is there any grace period for subsequent payments?

A 30-day grace period is granted from each contribution due date. If the contribution remains unpaid at the end of the grace period, your certificate will lapse and the coverage will cease.

Q26: Can I get tax relief when I participate in this plan?

Yes, this plan qualifies for income tax relief, subject to the approval of Inland Revenue Board.

Certificate Endorsement & Servicing

Q27: Can I upgrade my Room & Board (R&B) plan in the future and do I need to go through the underwriting?

No, the R&B plan upgrade is not allowed after the certificate is issued.

Q28: Can I downgrade my Room & Board (R&B) plan?

Yes, you can request such changes by completing the endorsement form available [here](#) and submit the form to the nearest Takaful *myCare* Centre or email

us at csu@takaful-malaysia.com.my, 90 days before the certificate anniversary.

No underwriting is required and such revision will only take effect on the certificate anniversary.

Q29: Can I add the MediBooster rider after my certificate is in force?

No, you can only attach the MediBooster rider upon application. Please ensure you understand the benefits of this plan, including the MediBooster rider, read the terms and conditions and decide whether to include this rider when applying for this plan.

Q30: Do I need to inform Takaful Malaysia if I change my occupation?

Yes, you should notify us via *myTakaful* Customer portal and any contribution revision will only take effect on the next certificate anniversary.

Q31: Can I change my credit/debit card or bank account details?

Yes, you can update your credit/debit card or bank account details via *myTakaful* Customer portal. Once this information is updated, we will automatically deduct from the updated credit/debit card or bank account for the next contribution due under this plan.

Q32: Can I change my contribution payment mode from yearly to monthly?

Yes, you can request such changes via *myTakaful* Customer portal 30 days before the certificate anniversary.

Such revision will only take effect on the certificate anniversary.

Q33: Can I change my email address?

Yes, you can update your new email address under the Profile Section in *myTakaful* Customer portal.

Q34: Will I get a refund if I surrender my certificate?

If you cancel your certificate within the 15-day free-look period from the date of delivery of the e-Certificate, the total contribution that you paid will be refunded.

However, if you cancel after the 15-day free-look period, you may be entitled to a portion of the contribution that you have paid as determined by us provided that there is no claim made during the current certificate year.

Q35: My certificate has lapsed. Can I reinstate my certificate?

Any reinstatement of certificate is subject to our approval. Please ensure your card or bank details for the contribution payment deductions are valid to enjoy continuous coverage. You may check your card details via *myTakaful* Customer portal.

Q36: How do I submit my request for cancellation or termination?

You can submit your request via *myTakaful* Customer portal.

Claim Procedures & Exclusions

Q37: Who should I contact in the event of hospital admission?

You should contact our service provider, MiCare at 1800 88 7940 or email to callcenter@micaresvc.com who will assist you for the issuance of guarantee letter for cashless hospital admission at our panel hospital provided that the illness/accident is covered under this plan.

Q38: Do I need to pay first if I'm admitted to a hospital?

You don't have to pay first if you go to any of our panel hospitals provided that the illness/accident is covered under this plan. Just present your e-medical card and we will settle the bill directly with the hospital.

If you go to a non-panel hospital, you need to pay the bill first and then make a claim with us for reimbursement.

Note: Some hospitals may require a deposit that you will need to pay on your own first.

Q39: Where can I refer to the list of panel hospitals?

You can refer to the list of panel hospitals administered under MiCare as stated on our corporate website [here](#).

Q41: What are Specified Illnesses?

Specified Illnesses means the following disabilities and their related complications, occurring within the first 120 days from the effective date or reinstatement date, whichever is later:

- a) Hypertension, diabetes mellitus and cardiovascular disease;
- b) All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system;
- c) All ear, nose (including sinuses) and throat conditions;
- d) Hernias, haemorrhoids, fistulae, hydrocele or varicocele;
- e) Endometriosis including disease of the female reproduction system; or
- f) Vertebra-spinal disorders (including disc) and knee conditions.

This shall not be applicable after the first year of cover. However, if there is a break in coverage prior to the expiry of the said first 120 days, a fresh period of first 120 days shall apply again from the reinstatement date.

Q42: Am I covered outside Malaysia?

Yes, you will be covered under this plan if you travel or reside outside Malaysia for not more than 90 consecutive days.

Q43: What if I seek treatment overseas?

You can seek treatment overseas for not more than 90 consecutive days and we will reimburse an amount corresponding to the reasonable and customary charges that you would incur for the medically necessary equivalent treatment of that disability in a hospital in Malaysia. If the treatment for that disability is not available in Malaysia, we will reimburse an amount equivalent to the charges for the closest comparable medical treatment of that disability that is available in a hospital in Malaysia.

Q44: What are reasonable and customary charges?

Reasonable and customary charges means medically necessary charges for medical care which are considered reasonable and customary to the extent that they do not exceed the general level of charges being made by others of the same standing in locality where the charges are incurred, when furnishing the same or comparable treatment, services or supplies to individual of the same sex and comparable age for a similar sickness, disease or injury and in accordance with accepted medical standards and practice could not have been omitted without adversely affecting the person covered's medical condition.

Q45: What are the exclusions for this plan?

Please refer to the Certificate Wording for the list of exclusions under this plan.

Q46: Can I be admitted to a non-panel hospital? How do I claim if so?

You may be admitted into a non-panel hospital. Payment will be on reimbursement only and you are required to submit the completed claim form together with the relevant supporting documents to Takaful Malaysia for processing. The claim form can be obtained from our corporate website.

Q47: Where can I refer to for the claims guide of this plan?

Please click [here](#) for the claims guide.