



Product Profile

# Critical Illness Insurance

As we live longer lives, the risk of getting a critical illness is higher. AIG offers a solution that can be customised according to lifestage and lifestyle. Here's how AIG's MyGuardian CI plan can lighten your burden.

## What We Cover



### Growing Concerns

Comprehensive coverage up to the age of 75 years for major critical illnesses.



### Medical Expenses

Ensures that your medical expenses are covered when you are hospitalised.



### Cash Flow Protection

Protects your cash flow through various ways such as lump sum claim payment, renewal bonus and financial support benefit.



### Post Recovery

Covers post recovery treatment such as recovery assistance services, home nursing, home alteration and vehicle modification as well as housekeeping services.

## Quick Fact :

### Why Critical Illness Coverage is Important?

- Critical Illnesses in Malaysia**  
 Critical Illnesses which include heart disease, cancer and stroke account for a quarter of all Malaysian deaths.
- Hazardous Environment**  
 We now live in an environment where we are exposed to various elements such as secondary smoke that increase the likelihood of getting critical illness.
- Costly Treatment and Recovery**  
 Cost often goes far beyond medical related expenses, which is something few people prepare for.
- Lump Sum Payment**  
 You decide on how best to use any claims payout according to your own needs.

**MyGuardian CI provides you with peace of mind in the event of a critical illness. Our professional agents will guide you towards getting the best protection for yourself and your loved ones.**

## Everyone's Situation is Different

The recovery journey from a critical illness for each individual is different. Here are some examples of possible expenses:



To pay for your medical expenses if you do not have medical insurance policy



Daily expenses like rent, loans or essentials



Medical expenses that are not covered by an existing policy



Retraining for another occupation



Better quality of care or treatment



Allowing a working spouse to take time off to care for you



Non-medical expenses like transportation or nursing care



Ease a family member's financial burden



Post recovery expenses like home or car modification

**Get in touch with our friendly agents today!**

# How MyGuardian CI is Here to Help

## 1. Growing Concerns

MyGuardian CI addresses some of the most important matters when facing a critical illness:



### Major Critical Illnesses

Provides financial support when dealing with major critical illnesses such as heart disease, cancer and stroke.



### Funeral Expenses

Payable in the event of death due to critical illness within 30 days upon diagnosis of a critical illness.



### 75 Years

Coverage up to the age of 75 years.

## 2. Medical Expenses\*

MyGuardian CI ensures the following expenses are covered when you are hospitalised:



### Daily Hospital Cash

Daily cash payout if hospitalised due to a critical illness.



### Intensive Care Unit (ICU)

Daily cash payout if hospitalised in the Intensive Care Unit due to a critical illness.



### Surgical Cash

Lump sum payout if you require surgery due to a critical illness.

\*Only payable in the event a critical illness claim is paid or payable under this policy.

# How MyGuardian CI is Here to Help

## 3. Cash Flow Protection \*

MyGuardian CI is designed to help you get through a challenging period in your life by assisting your cash flow in various ways:

### Lump Sum Claim Payment



Majority of our benefits are paid on a lump sum basis. This makes the claims process easier and allows you to make a claim in addition to other insurance policies for the same benefit.



### Tax Free Payout

Claim payments are tax free.



### Tax Deductible Premiums

Premiums are tax deductible.



### Renewal Bonus

Your principal policy sum insured for critical illness benefits increase by 10% annually for 5 consecutive years as long as you continue to renew your policy and have not made a claim.



### Income Protection

If you are unable to work upon a critical illness diagnosis, the lump sum payout made under the 'Financial Support' benefit ensures that you have cash in times of need.



### Plan Upgrades

Plans can be upgraded at renewal as long as you have not made a claim.



### Bill Protection

Cash payout to support your household bills if you are diagnosed with a critical illness that leads to hospitalisation for a minimum period of 7 consecutive days.

\*Only payable in the event a critical illness claim is paid or payable under this policy.

# How MyGuardian CI is Here to Help

## 4. Post Recovery\*

Usually it is the post recovery treatment that can drain our financial resources. Here's how MyGuardian CI can help:



### Recovery Assistance Services

Covers costs for Physiotherapy, Psychological Counselling, Dietician/ Nutritionist, Occupational Therapy, Speech Therapy and Smoking Cessation Programme if recommended by a doctor following critical illness.



### Home Nursing

Cash payout for home nursing care if you are unable to perform 3 out of 6 activities of daily living upon discharge. Benefit payable if recommended by your doctor post hospitalisation of minimum 2 consecutive days due to a diagnosed critical illness.



### Home Alteration and Vehicle Modification

Reimburses costs related to home alteration and vehicle modification as vehicles and homes often require adjustments as a result of critical illness so that you are able to move around comfortably.



### Recovery Support - Housekeeping Services

Cash payout for housekeeping services if you are unable to perform 3 out of 6 activities of daily living upon discharge. Benefit payable if recommended by your doctor post hospitalisation of minimum 2 consecutive days due to a diagnosed critical illness.

\*Only payable in the event a critical illness claim is paid or payable under this policy.

# What We Cover

## Schedule of Benefits

Choose a plan that matches your needs and select optional add-on packages to enjoy better coverage.

### Step 1: Choose a Core Plan

Core Module					
No	SECTION A - CRITICAL ILLNESS	WAITING PERIOD	Compensation (RM)		
			BASIC	ESSENTIAL	COMPREHENSIVE
			Plan 200	Plan 200	Plan 200
1	<b>Cancer</b> Of specified severity and does not cover very early cancers	90 days from Policy Effective Date	200,000	200,000	200,000
2	<b>Heart Attack</b> Of specified severity			200,000	200,000
3	<b>Serious Coronary Artery Disease</b>			200,000	200,000
4	<b>Heart Valve Surgery</b>			200,000	200,000
5	<b>Coronary Artery By-Pass Surgery</b>			200,000	200,000
6	<b>Surgery to Aorta</b>			200,000	200,000
7	<b>Cardiomyopathy</b> Of specified severity			200,000	200,000
8	<b>Kidney Failure</b> Requiring dialysis or kidney transplant			200,000	200,000
9	<b>Medullary Cystic Disease</b>			200,000	200,000
10	<b>Primary Pulmonary Arterial Hypertension</b> Of specified severity			200,000	200,000
11	<b>End-Stage Lung Disease</b>			200,000	200,000
12	<b>Stroke</b> Resulting in permanent neurological deficit with persisting clinical symptoms			200,000	200,000
13	<b>End-Stage Liver Failure</b>			200,000	200,000
14	<b>Major Head Trauma</b> Resulting in permanent inability to perform Activities of Daily Living			N/A	200,000
15	<b>Angioplasty and Other Invasive Treatments for Coronary Artery Disease</b>				20,000
16	<b>Encephalitis</b> Resulting in permanent inability to perform Activities of Daily Living	30 days from Policy Effective Date			200,000
17	<b>Parkinson's Disease</b> Resulting in permanent inability to perform Activities of Daily Living				200,000
18	<b>Brain Surgery</b>				200,000
19	<b>Benign Brain Tumor</b> Of specified severity				200,000
20	<b>Coma</b> Resulting in permanent neurological deficit with persisting clinical symptoms			N/A	200,000
21	<b>Major Organ / Bone Marrow Transplant</b>				200,000
22	<b>Paralysis of Limbs</b>				200,000
23	<b>Third Degree Burns</b> Of specified severity				200,000
24	<b>Muscular Dystrophy</b>				200,000
25	<b>Loss of Independent Existence</b>				200,000

# What We Cover (Cont.)

## Schedule of Benefits

Choose a plan that matches your needs and select optional add-on packages to enjoy better coverage.

Core Module					
No	SECTION A - CRITICAL ILLNESS	WAITING PERIOD	Compensation (RM)		
			BASIC	ESSENTIAL	COMPREHENSIVE
			Plan 200	Plan 200	Plan 200
26	Chronic Aplastic Anemia Resulting in permanent Bone Marrow Failure	30 days from Policy Effective Date	N/A	N/A	200,000
27	Multiple Sclerosis				200,000
28	Motor Neuron Disease Permanent neurological deficit with persisting clinical symptoms				200,000
29	Bacterial Meningitis Resulting in permanent inability to perform Activities of Daily Living				200,000
30	Deafness Permanent and Irreversible				200,000
31	Blindness Permanent and Irreversible				200,000
32	Loss of Speech				200,000
33	Fulminant Viral Hepatitis				200,000
34	Alzheimer's Disease/ Severe Dementia				200,000
35	Systemic Lupus Erythematosus With Severe Kidney Complications				200,000
36	Terminal Illness				200,000
37	HIV Due to Blood Transfusion				200,000
38	Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection				200,000
No	SECTION B - ADDITIONAL BENEFITS (Payable in addition to Section A - Critical Illness except for Section B.2. Non-Invasive Cancer)	WAITING PERIOD	Compensation (RM)		
			BASIC	ESSENTIAL	COMPREHENSIVE
			Plan 200	Plan 200	Plan 200
1	Gender-Specific Cancer*	90 days from Policy Effective Date	30,000	30,000	30,000
2	Non-Invasive Cancer (Carcinoma-In-Situ or Early-Stage Cancer)	90 days from Policy Effective Date	30,000	30,000	30,000
3	Specified Outpatient Treatment : (Only payable due to Section A - Critical Illness)	Follows the Waiting Period for the applicable Critical Illness	4,000 Per cycle or 500 per day, maximum up to 20,000	4,000 Per cycle or 500 per day, maximum up to 20,000	4,000 Per cycle or 500 per day, maximum up to 20,000
	Applicable to Cancer - Chemotherapy (cycle) or Radiotherapy (day)				
	Applicable to Kidney Failure - Kidney Dialysis (calendar month)		N/A	4,000 Per calendar month, maximum up to 20,000	4,000 Per calendar month, maximum up to 20,000
4	Financial Support (Only payable due to Section A - Critical Illness)		24,000	24,000	24,000

\*Gender-Specific Cancer means any of the following:

- Breast Cancer, Cervical Cancer, Uterus Cancer, Fallopian Tubes Cancer, Vulva/Vagina Cancer, Ovarian Cancer, Testicular Cancer, Penile Cancer and Prostate Cancer



# What We Cover (Cont.)

## Step 2: Choose an Optional Plan

OPTIONAL MODULE		Plan 200
SECTION B - OPTIONAL BENEFITS (Only payable due to Section A - Critical Illness)		Compensation (RM)
1	<b>Daily Hospital Cash</b> Aggregate Period : Up to 30 Days	200 per day
2	<b>Daily Hospital Cash for Intensive Care Unit (ICU)</b> Aggregate Period : Up to 7 Days	400 per day
3	<b>Surgical Cash</b> (Up to 2 surgeries)	2,000 per surgery
<b>Recovery Assistance Services</b>		200 Per visit or per month (as applicable)  Compensation applicable to each recovery assistance service (a) to (f)
a) Physiotherapy (Per Visit / Up to 12 visits)		
b) Psychological Counselling (Per Visit / Up to 12 visits)		
c) Dietician /Nutritionist (Per Visit / Up to 12 visits)		
d) Occupational Therapy (Per Visit / Up to 12 visits)		
e) Speech Therapy (Per Visit / Up to 12 visits)		
f) Smoking Cessation Programme (Per month / Up to 6 months)		
5	<b>Home Nursing</b> Aggregate Period : Up to 14 days	200 per day
6	<b>Bill Protection</b>	2,000
7	<b>Home Alteration and Vehicle Modification</b>	2,000
8	<b>Recovery Support - Housekeeping Services</b> Aggregate Period : Up to 14 days	200 per day
9	<b>Funeral Expenses</b>	20,000

### Important Notes:

- Waiting Period** means a time period that needs to elapse from the Policy Effective Date before the Insured Person becomes entitled to claim a Benefit under this Policy. The Waiting Period does not apply to Critical Illness caused by an Accident as defined.
- A fresh Waiting Period will apply for any additional cover or increased Compensation granted to the Insured Person at renewals, only in respect to the additional cover or increased Compensation.
- Aggregate Period** means the maximum number of days for which a Compensation is payable as specified against the Benefit in the Schedule of Benefits.
- If the Insured Person has been Diagnosed with a Cancer under the 'Critical Illness' Benefit, the Company will pay the Compensation less any amount which has already been paid or is payable on account of any claims made for 'Non-Invasive Cancer' Benefit, whether during the current or preceding Policy Period as stated in the Schedule of Benefits.
- For 'Optional Benefits' and 'Financial Support' Benefit - these Benefits are payable only if a valid claim under Section A - 'Critical Illness' Benefit is paid or payable under the Policy.
- Renewal Bonus:** A renewal bonus of 10% is applicable upon renewal of this Policy. Please refer to section 'Renewal Bonus' in the policy wordings for details on the terms and conditions and calculation of the same.

**This Schedule of Benefits must be read together with the Policy Schedule, Policy Wordings and any Endorsements issued to You.**



# What You Pay

## Annual Premium Table - Non-Smoker

		Core Module (RM per year)					
Entry Age	Renewal Age	Male			Female		
		Basic	Essential	Comprehensive	Basic	Essential	Comprehensive
		Plan 200	Plan 200	Plan 200	Plan 200	Plan 200	Plan 200
	0-17	87	107	144	73	86	122
	18-25	123	174	215	135	144	184
	26-30	163	258	299	242	280	320
	31-35	222	488	581	479	574	663
	36-40	318	768	864	873	1,076	1,168
	41-45	475	1,106	1,206	1,348	1,573	1,668
	46-50	786	2,021	2,130	2,031	2,522	2,621
	51-55	1,257	2,965	3,088	2,725	3,275	3,378
	56-60	1,942	4,385	4,526	3,439	4,424	4,531
	61-65	2,602	5,550	5,724	3,702	4,883	4,993
	66-70	3,277	6,779	6,988	4,059	5,377	5,490
	71-75	4,018	7,888	8,124	4,232	5,625	5,739

		Optional Module (RM per year)					
Entry Age	Renewal Age	Male			Female		
		Basic	Essential	Comprehensive	Basic	Essential	Comprehensive
		Plan 200	Plan 200	Plan 200	Plan 200	Plan 200	Plan 200
	0-17	6	7	10	4	5	8
	18-25	9	13	16	9	9	12
	26-30	12	19	22	15	18	21
	31-35	15	35	42	28	35	41
	36-40	22	55	63	51	64	71
	41-45	33	79	87	79	93	100
	46-50	58	154	163	120	152	160
	51-55	91	225	235	161	197	205
	56-60	142	336	348	208	273	282
	61-65	189	425	440	226	308	317
	66-70	241	534	553	256	351	360
	71-75	284	601	621	259	358	367



# What You Pay (Cont.)

## Annual Premium Table - Smoker

		Core Module (RM per year)					
Entry Age	Renewal Age	Male			Female		
		Basic	Essential	Comprehensive	Basic	Essential	Comprehensive
		Plan 200	Plan 200	Plan 200	Plan 200	Plan 200	Plan 200
	18-25	126	178	220	138	148	188
	26-30	165	262	304	246	284	324
	31-35	231	506	603	497	596	689
	36-40	369	891	1,002	1,013	1,249	1,355
	41-45	609	1,418	1,547	1,729	2,018	2,139
	46-50	1,104	2,839	2,993	2,853	3,543	3,682
	51-55	1,920	4,528	4,715	4,162	5,001	5,158
	56-60	3,204	7,233	7,466	5,673	7,297	7,473
	61-65	4,609	9,833	10,141	6,560	8,651	8,846
	66-70	6,206	12,839	13,236	7,688	10,185	10,398
	71-75	8,101	15,906	16,380	8,532	11,343	11,573

		Optional Module (RM per year)					
Entry Age	Renewal Age	Male			Female		
		Basic	Essential	Comprehensive	Basic	Essential	Comprehensive
		Plan 200	Plan 200	Plan 200	Plan 200	Plan 200	Plan 200
	18-25	9	13	16	9	10	12
	26-30	12	19	22	15	18	21
	31-35	16	36	44	30	36	43
	36-40	26	64	73	59	75	82
	41-45	42	102	112	101	119	128
	46-50	82	216	228	169	214	225
	51-55	139	343	359	245	300	313
	56-60	234	554	573	343	450	465
	61-65	334	753	779	401	545	560
	66-70	455	1,012	1,046	484	664	682
	71-75	571	1,212	1,252	522	722	740



# Claims Illustration



**Elin purchased Essential Plan 200 policy (Sum Insured - RM200,000)**

<b>Event 1:</b> Three years later, Elin was diagnosed with Early-Stage Cancer of the breast	
<b>1st Claim Payable</b>	
✓ Non-Invasive Cancer (Early-Stage Cancer)	<b>RM30,000</b>
<b>Event 2:</b> In less than 2 years, Elin’s cancer metastasized to Stage 4 Advanced Breast Cancer and she had to undergo chemotherapy treatment	
<b>2nd Claim Payable</b>	
✓ Gender-Specific Cancer	<b>RM30,000</b>
✓ Financial Support	<b>RM24,000</b>
✓ Specified Outpatient Treatment : Chemotherapy (5 cycles of RM4,000 each)	<b>RM20,000</b>
<b>Event 3:</b> Unfortunately, Elin passed away not long after her treatment	
<b>Final Claim Payable</b>	
Cancer - RM260,000 (including 10% Renewal Bonus) minus RM30,000 paid under Event 1	<b>RM230,000</b>
<b>Total Claim Payable</b>	<b>RM334,000</b>

## We Make Claims Easy For You With Just 3 Simple Steps



**1** Notify us immediately after the incident



**2** Prepare all your relevant supporting documents as per the nature of the claim



**3** Submit your documents within 90 days of the incident



**Submit your claims to [MYPAclaims@aig.com](mailto:MYPAclaims@aig.com)**

Need more information? Visit the link below to download your claims form and a guide list of supporting documents needed to make a claim:

[www.aig.my/claims/personal-claims/critical-illness-claims](http://www.aig.my/claims/personal-claims/critical-illness-claims)

We will contact you if any additional documents for the claim submission is required.

## Product Disclosure Sheet

Please read this Product Disclosure Sheet before you decide to purchase the MyGuardian CI Policy. Be sure to also read the general terms and conditions.

**AIG Malaysia Insurance Berhad**  
**Product: MyGuardian CI Policy**  
**Date Issued: June 2023**

Wherever words or phrases appear in bold, the definitions with interpretation are set out in the policy wordings under section 'Part 7 – General Policy Definitions'.

### 1. What is this product about?

- (a) This product provides coverage in the event you are diagnosed with a **Critical Illness**.
- (b) Coverage is provided 24 hours worldwide.
- (c) You can select a **Category** to cover 'Self' (**Policyholder**), your **Child** or an **Employee**.
- (d) This product has a range of 3 different core modules (ie Basic, Essential and Comprehensive) that are meant to correspond to an individual's needs. You may also choose to include the optional module at additional premium.

### 2. What are the covers/benefits provided?

This **Policy** provides coverage for the following core **Benefits**:

1. Critical Illness;
2. Gender-Specific Cancer;
3. Non-Invasive Cancer (Carcinoma-In-Situ or Early-Stage Cancer);
4. Financial Support; and
5. Specified Outpatient Treatment (Chemotherapy, Radiotherapy and Kidney dialysis)

With an additional **Premium**, you may opt for the following optional **Benefits** to your **Policy**:

1.	Daily Hospital Cash – up to 30 <b>Days</b> ;
2.	Daily Hospital Cash for Intensive Care Unit (ICU) – up to 7 <b>Days</b> ;
3.	Surgical Cash (up to 2 surgeries);
4.	Recovery Assistance Services: a) Physiotherapy (Per visit/ up to 12 visits) b) Psychological Counselling (Per visit/ up to 12 visits) c) Dietician/Nutritionist (Per visit/up to 12 visits) d) Occupational Therapy (Per visit/up to 12 visits) e) Speech Therapy (Per visit/up to 12 visits) f) Smoking Cessation Programme (Per month/ up to 6 months)
5.	Home Nursing (up to 14 days);
6.	Bill Protection;
7.	Home Alteration and Vehicle Modification;
8.	Recovery Support – Housekeeping Services (up to 14 days); and
9.	Funeral Expenses

*Note: Please refer to the policy wordings for further details of the **Benefits**. Duration of cover is for one year. You need to renew this **Policy** annually.*

### 3. How much premium do I have to pay?

- (a) The **Premium** to be paid will vary depending on age band (you have to pay a higher **Premium** as you reach a higher age band), gender, smoking status, and the core module and optional module (if selected).
- (b) **Premium** is payable on an annual basis.
- (c) **Premium** rates are not guaranteed. The **Company** reserves the right to revise the **Premium** due to underwriting reasons.
- (d) The new **Premium** amount payable will take effect from the next **Premium Due Date** immediately following the 30 days' notice period provided by the **Company** to the **Policyholder**.

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

Type	Amount
Commission paid to the insurance intermediaries/agent (Included in the <b>Premium</b> )	15%
Stamp Duty	RM10.00 per policy

### 5. What are some of the key terms and conditions that I should be aware of?

#### (a) Ongoing duty of disclosure:

- (i) a. Consumer insurance contract  
 You have a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form or when they applied for this insurance i.e. You should have answered the questions fully and accurately. You are also required to take reasonable care to disclose any other matter that You know to be relevant to the **Company's** decision in accepting the risks and determining the rates and terms to be applied.
- (i) b. Non-consumer insurance contract  
 You have a duty to disclose any matter that You know to be relevant to the **Company's** 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.
- (ii) You also have a duty to inform the **Company** of any change in the information given to the **Company** earlier before the **Company** issues the **Policy** to you, before you renew or change any of the terms of your **Policy**. If you do not, your **Policy** may be cancelled, or treated as if it never existed, or your claim rejected or not paid in full.

**(b) Eligibility:**

**Age**

- i. **Policyholder** - Entry age for a **Policyholder** is 18 to 60 years of age (inclusive). **Policy** is renewable up to 75 years (inclusive).
- ii. **Employee** - Entry age for an **Employee** is 18 to 60 years of age (inclusive). **Policy** is renewable up to 65 years (inclusive) or when the **Insured Person** ceases to be an **Employee** of the **Policyholder**, whichever is earlier.
- iii. **Child** - Entry age for a **Child** is 15 **Days** after birth up to 17 years of age (inclusive). **Policy** is renewable up to 17 years (inclusive).

Entry age and maximum age is determined based on **Age** at the **Policy Effective Date**.

**Occupation**

Persons engaged in the following occupations are not covered under this **Policy**:

- i. Asbestos Workers, miners, tunnellers;
- ii. Police, armed forces, military personnel and/or similar peace-keeping groups;
- iii. Semi – professional and professional sports or where a periodic income is received in relation to such sports.

**(c) Cash Before Cover:**

The **Company** must receive the **Premium** due on or before the **Premium Due Date**. No **Benefits** will be payable for any claim that occurs during a period for which **Premium** was not received.

**(d) Country of residence:**

You must notify the **Company** if you will be out of Malaysia for more than 180 consecutive days upon which the **Company** will determine at its sole discretion whether to continue or terminate coverage of the **Policy**. Failure to do so will invalidate this cover.

**(e) Claims:**

- (a) The **Company** must be notified as soon as it is reasonably practical and in any event within 30 days after the date of event which could lead to a claim.
- (b) The **Company** must be provided with all reasonable and necessary evidence required by the **Company** to support a claim within 90 days after the date of event which could lead to a claim.
- (c) Failure to comply with the above may result in the rejection of all or part of the claim. Reasons include, but are not limited to, if it is made so long after the event that the **Company** is unable to investigate it fully or may result in the **Insured Person** not receiving the full amount claimed if the amount payable changes as a result of the delay.
- (d) In the event the **Insured Person** is a **Child**, all dealings in relation to any claim will be between the **Insured Person's** parent and the **Company**.

**(f) Waiting period:**

The **Waiting Period** applicable depends on the **Critical Illness Diagnosed** which is as specified in the **Schedule of Benefits**. The **Waiting Period** does not apply to **Critical Illness** caused by an **Accident** as defined.

**(g) Overseas treatment:**

- (a) is only allowed if the travel overseas is not for the purpose of seeking medical treatment;
- (b) is excluded for the following:
  - i. Non-emergency **Hospitalisation** or treatments i.e., where the treatment can reasonably be postponed until return to Malaysia; or
  - ii. Overseas **Hospitalisation** or treatments of a **Critical Illness Diagnosed** in Malaysia where treatment can reasonably be postponed until return to Malaysia.

**(h) Free Look Period:**

If this **Policy** does not meet your insurance requirements, you can return the **Policy** to the **Company** within 15 days from the date this **Policy** is delivered to you. You will receive a full **Premium** refund as long as no claim has been made for that period.

**(i) Contribution:**

If you are covered by any other policy, which covers the benefit in respect of 'Home Alteration and Vehicle Modification' **Benefit**, the **Company** will only reimburse the excess amount that is not recoverable by the other policies provided that the **Benefit** is Payable by this **Policy**.

**(j) Duplication of Cover:**

No person shall be insured under more than one **Policy** issued by the **Company** under this product. In the event the person is insured under more than one such **Policy**, the **Company** shall consider that person to be insured under the **Policy** with the highest **Compensation** or, where the **Compensation** under each **Policy** is identical, under the **Policy** that was first issued. The **Company** shall refund any duplicated **Premium** payment(s) which may have been made by or on behalf of that **Insured Person**.

**(k) Renewal:**

This is an annual policy where the **Policy** may be renewed at the option of the **Policyholder** subject to the terms and conditions of the **Policy** and payment of the premium the **Company** requires for the renewal.

Where the **Insured Person** who is:

- a) a **Child** ceases to be a **Child**; or
- b) an **Employee** ceases to be an **Employee** of the **Policyholder**;  
the **Policyholder** can no longer renew the **Policy** under the expiry **Policy Category**. However, the **Insured Person** has an option to renew their **Policy** by switching to an individual **Policy** under the 'Self' **Category** where they will become the **Policyholder**.

In the event the **Company** elects to not renew this **Policy** due to underwriting reasons, the **Company** will notify the **Policyholder** in writing at least 30 days before their next **Anniversary Date**.

**(l) Renewal Bonus**

The **Insured Person** is eligible for a 10% increase of the **Compensation** for 'Critical Illness' **Benefit** on every **Anniversary Date** up to a maximum of 5 consecutive years if the **Policy** is continuously renewed without interruption and the **Policy** remains **Claims Free** throughout the **Policy Period**.

Notes:

Refer to the terms and conditions under section 'Renewal Bonus' of this product in the policy wordings for further details on **Renewal Bonus**.

- (m)** It is important to note that in the event you wish to switch from one insurance plan to another, your application will be subject to evaluation based on the underwriting requirements of the new policy. The applicable **Waiting Period(s)** along with any applicable period for **Pre-existing Condition(s)** will apply afresh and any **Renewal Bonus** accumulated in your current **Policy** will be forfeited.

#### 6. Can I change the Plan or Category of my Policy?

You can change the **Plan** of your **Policy** and add or remove optional module at the time of renewal only, provided that no claim has been paid under 'Non-Invasive Cancer Benefit (Carcinoma-In-Situ Or Early-Stage Cancer)' and you are below the age of 60 years.

#### 7. What are the major exclusions under this policy?

The **Company** shall not pay under this policy any claim in connection with:

- (a) Any **Critical Illness, Gender-Specific Cancer** and **Non-Invasive Cancer** which first manifested and was diagnosed within the **Waiting Period** as specified in the **Schedule of Benefits**;
- (b) When the **Insured Person** dies within 30 days of being **Diagnosed** with a **Critical Illness, Gender-Specific Cancer** or **Non-Invasive Cancer**. This is applicable for all **Benefits** under this **Policy**, except for the Benefit 'Funeral Expenses', if applicable;
- (c) **Pre-existing condition** or any complication arising from it;
- (d) Any sickness, illness or disease which is not specified as a **Critical Illness, Gender-Specific Cancer** or **Non-Invasive Cancer** in this **Policy**;
- (e) When the **Insured Person** is diagnosed with a critical illness that is not covered under this **Policy** or they are **Diagnosed** with a **Critical Illness, Gender-Specific Cancer** or **Non-Invasive Cancer**, but the **Diagnosis** does not meet our definition of **Critical Illness, Gender-Specific Cancer** or **Non-Invasive Cancer**;
- (f) Any **Critical Illness, Gender-Specific Cancer** or **Non-Invasive Cancer** due to a self-inflicted injury, suicide or attempted suicide whether sane or insane, deliberate or reckless exposure to danger;
- (g) Any aerial activity except as a fare paying passenger in a commercial aircraft licensed to carry passengers;
- (h) Any sexually transmitted diseases, 'Acquired Immunodeficiency Syndrome' ("**AIDS**"), AIDS-related complex or, any infection by 'Human Immunodeficiency Virus' ("**HIV**") or any type of venereal disease. This exclusion does not apply to the Appendix A – Critical Illness Definitions, 'HIV Infection Due to Blood Transfusion' and 'Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection'; and
- (i) War, invasion, and rebellion.

*Note: This list is non-exhaustive. Please refer to the policy wordings for the full list of exclusions under this **Policy**.*

#### 8. Can I cancel my policy?

You can cancel this **Policy** by giving 30 Days' prior written notice to the **Company** or via email at the address provided below, provided there is no claim made on the **Policy**. Such cancellation shall become effective on the date the notice is received or on the date specified in such notice, whichever is the earlier. Upon cancellation, you are entitled to a refund of **Premium** based on the Short Period Scale. Please refer to the **Policy** for the Short Period Scale rates.

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

It is important that you inform the **Company** of any change in your life profile including your occupational and personal pursuits which would affect the risk profile.

#### 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.

If you have any enquiries, please contact **us** at:

AIG Malaysia Insurance Berhad  
Menara Worldwide,  
198, Jalan Bukit Bintang,  
55100 Kuala Lumpur,  
Malaysia.

Telephone : 1800 88 8811  
E-mail : [AIGMYCare@aig.com](mailto:AIGMYCare@aig.com)

#### 11. Other types of Medical and Health Insurance cover available

Please refer to **our** website at: [www.aig.my](http://www.aig.my)

#### **IMPORTANT NOTE:**

You should read and understand the contract terms and discuss further with the agent or the **Company** if there are any terms that you do not understand before accepting the policy contract. If there are any questions regarding the terms and conditions of this **Policy**, the **Policyholder** or **Insured Person** may contact the **Company** or the agent, whichever is applicable.

You should satisfy yourself that this **Policy** will best serve your needs.

By accepting the policy contract, you acknowledge that the key contract terms have been adequately explained by the agent or the **Company** to you and that the policy contract offered is suitable for your insurance needs.

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 [www.aig.my](http://www.aig.my)

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