# MASTERCARD MALAYSIA TRAVEL INSURANCE TERMS & CONDITIONS

## **SUMMARY OF COVER**

Travel Insurance Coverage***	Maximum Benefit Amount
Travel Medical Benefits:	
Medical Expenses (Injury or Sickness)	Up to USD 100,000
Emergency Medical Evacuation/Return of Mortal Remains	Up to USD 100,000
Daily In-Hospital Cash Benefit (min 3 days, max 15 days)	USD 100 per Day
Overseas Quarantine Allowance (max 14 days)	USD 100 per Day
Assistance Department Services	Included

<sup>\*\*\*</sup> Sub-limits apply for Spouse and Children on all Travel Insurance Coverage benefits listed above. The sub-limit for Spouse and Children is equivalent to 50% of all Travel Insurance Coverage benefits.

Please also See Assistance Department section for information on additional features and benefits.

Please see Covid-19 Covered Conditions And Exclusions section for more information.

Each insurance benefit limit described in this Guide is in United States Dollars (USD). Payment of claims will be made in local currency where required by law using the official Foreign Exchange Rates published on the date Claim payment is made.

## **GENERAL CONDITIONS**

## **Eligibility Criteria**

You are eligible for cover under the Policy if:

- (i) you are an eligible cardholder; and
- (ii) you have completed the Travel Insurance Benefit registration process prior to the commencement of your trip; and
- (iii) the entire cost of Common Carrier fare has been charged to your eligible card or has been acquired with points earned by a rewards program associated with Your card (i.e. mileage points for travel).

Except for One-way Trips, coverage is valid for trips up to one hundred eighty (180) days where the entire cost of the Common Carrier fare was purchased using the Eligible Card and commencing within twelve (12) months from the date of your registration.

## Who is Covered

An Eligible Cardholder, his Spouse and Children, whether traveling together or separately on a Covered Trip.

# **One-Way Trips**

The Travel Insurance benefits end seven (7) days after Your arrival at Your final destination outside of Your Country of Residence.

## Claims

In the event of a claim, you will be required to provide documentation which is reasonably necessary to support your eligibility.

# **Payments**

All payments to be made by the Insurer shall be paid to Eligible Cardholders in the Territory. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

# **Automatic Extension of Coverage Period**

The coverage period for a Covered Trip will automatically extend for up to thirty (30) days from the original date of return stated on the Common Carrier ticket if on Your original date of return You are under Hospital Confinement and/or quarantined as advised by a Medical Practitioner.

## **Economic Sanctions Exclusions**

If, by virtue of any law or regulation which is applicable to an Insurer, its parent company or its ultimate controlling entity, at the inception of the Policy or at any time thereafter, providing coverage to the Insured is or would be unlawful because it breaches an applicable embargo or sanction, that Insurer shall provide no coverage and have no liability whatsoever nor provide any defense to the Insured or make any payment of defense costs or provide any form of security on behalf of the Insured, to the extent that it would be in breach of such embargo or sanction.

# Statement

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance wholly for purposes unrelated to your trade, business or profession, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form. You must answer the questions in this Proposal Form fully and accurately.

Failure to take reasonable care in answering the questions 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.

In addition to answering the questions in this Proposal Form, you are required to disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied.

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 this Proposal Form is inaccurate or has changed.

Should you require additional information about the Policy or to request a copy of the master policy, please write in to:

## AIG Malaysia Insurance Berhad (795492-W)

Level 18, Menara Worldwide 198, Jalan Bukit Bintang, 55100 Kuala Lumpur

## **GENERAL KEY TERMS AND DEFINITIONS**

**Accident** means a sudden, unforeseen, uncontrollable and unexpected physical event to the Insured Person caused by external, violent and visible means occurring during a Covered Trip.

**Cardholder(s)** means all individuals who have been issued an Eligible Card, including secondary or additional cardholders on the same account, in the Territory and where such Eligible Card is issued by a participating Issuer.

Child or Children means the Eligible Cardholders' son or daughter, biological offspring, stepchildren and directly and biologically related children born outside of marriage aged above 6 months and under eighteen (18) years of age (or under twenty three (23) years of age if a full time student), unmarried and primarily dependent on the Insured Person for support.

**Common Carrier** means any land, sea or air travel arrangements for a scheduled tour, trip or cruise to any location pre-paid with the Eligible Card. City of Permanent Residence means the city in which You are residing.

City of Permanent Residence means the city in which You are residing.

Country of Departure means the country from which You first departed for Your Trip as per Your Travel Itinerary.

Country of Permanent Residence means the country where You are currently residing and hold a valid residency visa or where You were born.

Covered Trip means an Insured Person's land, sea or air travel arrangements for a scheduled tour, trip or cruise pre-paid with the Eligible Card that starts from the country of the Eligible Card issuance. Covered Trip will be from the departure date to the return date as shown on the ticket purchased with the Eligible Card subject to a maximum of 180 days. For one-way trips, coverage will be from the departure date up to a maximum of seven (7) days.

Eligible Card means the Mastercard World credit or debit cards issued from time to time in Malaysia.

Eligible Cardholders means those Cardholders aged between eighteen (18) years and sixty-nine (69) years with Eligible Cards that are valid, open and in good standing (not cancelled, suspended or delinquent) at the time of purchase of Covered Trip who shall be entitled to receive payment or such other benefit as is provided for in the Policy.

## **Emergency Evacuation** means:

- a. Your medical condition warrants immediate transportation from the place where You are injured or sick to the nearest Hospital where appropriate medical treatment can be obtained; or
- b. after being treated at a local Hospital, Your medical condition warrants transportation to Your current place of residence; or
- c. both (a) and (b) above.

Family means the Spouse and up to 3 Children.

# Hospital means a place that:

- 1. holds a valid license (if required by law);
- 2. operates primarily for the care and treatment of Sick or injured persons;
- 3. has a staff of one or more Physicians available at all times;
- 4. provides 24-hour nursing service and has at least one registered professional nurse on duty at all times;
- 5. has organized diagnostic and surgical facilities, either on premises or in facilities available to the Hospital or a pre-arranged basis; and
- 6. is not, except incidentally, a clinic, nursing home, rest home, or convalescent home for the aged, or a facility operated as a drug and/or alcohol treatment center.

**Immediate Family Member** means a person's legal spouse; children; children-in-law; siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal guardian, ward; step or adopted children; stepparents; aunts, uncles; nieces, and nephews, who reside in The Country of Residence.

**Injury** means a bodily injury caused solely and directly by violent, accidental, external and visible means resulting directly and independently of all other causes occurring during a Covered Trip while the Policy is in effect.

**Inpatient** means an Insured Person who is confined to a Hospital, under the recommendation of a Physician, and for whom a room and board charge is made.

Insured Person(s) means an Eligible Cardholder or other eligible person(s) who are defined as being eligible under each program's "Who is Covered" provision in this guide. The Policy offers coverage only to the Eligible Cardholders ordinarily resident in Malaysia where the Eligible Card was issued.

**Insured Events** means an occurrence which is outlined in the Benefits as a circumstance for which coverage is provided that takes place during a Covered Trip. Insured Events include those that occur during acts of Terrorism.

Insurers/We/Us means AIG Malaysia Insurance Berhad.

**Issuer** means a Bank or financial institution (or like entity) that is admitted and/or authorized by Mastercard to operate a Mastercard credit program in the Territory and is participating in the Travel Insurance offering to Cardholders.

**Mastercard** means Mastercard Asia/ Pacific Pte. Ltd, a corporation organized under the laws of Singapore, with its offices at 3 Fraser Street, Duo Tower, Singapore, 189352.

Medically Necessary means medical services or supplies which:

- 1. are essential for diagnosis, treatment or care of the covered loss under the applicable benefit for which it is prescribed or performed;
- 2. meets generally accepted standards of medical practice; and
- 3. is ordered by a Physician and performed under his or her care, supervision or order.

**Natural Disaster** means extreme weather conditions (including but not limited to typhoons, hurricanes, cyclones or tornados), fires, floods, tsunamis, volcanic eruptions, earthquakes, landslides or other convulsion of nature or by consequences of any of the occurrences mentioned above.

**Overseas** means beyond the territorial limits of Your Country of Departure or Country of Residence as applicable depending on the country from where You originally depart as per Your travel itinerary, but in no circumstance includes Your Country of Residence.

Per Cover Limit means the maximum amount payable under any single Cover per Cardholder during the Policy Period.

**Physician** means a doctor of medicine or a doctor of osteopathy licensed to render medical services or perform surgery in accordance with the laws of the country where such professional services are performed, however, such definition will exclude chiropractors, physiotherapists, homeopaths and naturopaths.

Policy means a contract of insurance and any attached endorsements or riders issued to Mastercard.

**Pre-existing Medical Condition** means a condition for which medical care, treatment, or advice was recommended by or received from a Physician or which first manifested or was contracted within a period up to 12 months preceding the Covered Trip.

**Public Transportation** means buses, trains and other forms of group transportation that transport the public, charge set fares, and operated on established routes between Airports and Hotels.

Quarantine means a restriction on movement or travel placed by a medical or governmental authority, in order to stop the spread of a communicable disease.

Sickness means illness or disease of any kind contracted and/or commencing during a Covered Trip.

Spouse means the Eligible Cardholders' legally married husband or wife between the ages of eighteen (18) years and sixty-nine (69) years.

**Territory** means the countries in which Eligible Cards are issued, in this case, Malaysia.

**Terrorist Act** means the use or threatened use of force or violence against person or property, or commission of an act dangerous to human life or property, or commission of an act that interferes with or disrupts an electronic or communication system, undertaken by any person or group, whether or not acting on behalf of or in any connection with any organization, government, power, authority or military force, when the effect is to intimidate, coerce or harm a government, the civilian population or any segment thereof, or to disrupt any segment of the economy. Terrorism shall also include any act which is verified or recognized as an act of terrorism by the government where the event occurs.

**Transportation** - means any land, water or air conveyance required to transport You during an Emergency Evacuation. Transportation includes, but is not limited to, air ambulances, land ambulances and private motor vehicles.

**War** means any declared or undeclared war or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

# **TRAVEL MEDICAL BENEFITS**

We will pay the usual reasonable and customary charges for Covered Medical Expenses, not due to a Pre-Existing Medical Condition, sustained by an Insured Person while travelling outside of Your Country of Permanent Residence.

# **Key Features**

- a. Trips are covered for travel worldwide.
- b. Coverage is provided for Injury or Sickness, even if it is not an emergency.
- c. Medical Expense coverage up to a maximum benefit amount of USD 100,000 per person (sub-limits apply for Spouse and Children, please refer to the SUMMARY OF COVER for more details).
- d. No limitation on the number of trips.
- e. Coverage is provided for both, one-way or round-trip travel.
- f. Covered losses caused by or resulting from Acts of Terrorism are included.

## MEDICAL EXPENSES

If You suffer an Injury or Illness and need medical attention while outside of Your Country of Permanent Residence, benefits are provided for Covered Medical Expenses. This coverage provides a maximum benefit up to USD 100,000 per person (sub-limits apply for Spouse and Children,

please refer to the SUMMARY OF COVER for more details).

## 1. Covered Medical Expenses include:

- a. The services of a Physician including diagnosis, treatment and surgery by a Physician;
- b. charges made by a Hospital for room and board, floor nursing and other services, including charges for professional services, except personal services of a non-medical nature, provided, however, that expenses do not exceed the Hospital's average charge for semi-private room and board accommodation;
- c. Anesthetics (including administration), x-ray examinations or treatments, and laboratory tests, the use of radium and radioactive isotypes, oxygen, blood transfusions, iron lungs and medical treatment;
- d. Ambulance Services;
- e. Dressings, drugs, medicines and therapeutic services and supplies that can only be obtained upon a written prescription from a Physician or surgeon; and
- f. Dental Treatment resulting from injuries sustained to sound, natural teeth subject to a maximum of USD 100 per tooth.

The charges for services enumerated above shall not include any amount of such charges that are in excess of regular and customary charges or excluded.

**Regular and Customary** means the charge for the services and supplies for which the charge is made if it is not in excess of the average charge for such services and supplies in the locality where received, considering the nature and severity of the Sickness or Injury in connection with which such services and supplies are received.

If the charge incurred is in excess of such average charge, such excess amount shall not be recognized as covered expenses. All charges shall be deemed to be incurred on the date such services or supplies which give rise to the expense or charge are rendered or obtained.

# 2. What is Not Covered Under Medical Expenses (In addition to General Exclusions):

In addition to the General Exclusions, "Medical Expense" benefits are not payable for any losses, fatal or non-fatal, which are caused by or resulting from:

- a. a Pre-existing Medical Condition, as defined herein;
- services, supplies or treatment, including any period of hospital confinement, which was not recommended, approved and certified as necessary and reasonable by a Physician;
- c. routine physicals, laboratory diagnostic, x-ray examinations or other examinations, except in the course of a disability established by the prior call or attendance of a Physician;
- d. Elective, cosmetic or plastic surgery, except as the result of an accident;
- e. dental care, except as the result of injury to sound, natural teeth caused by accident while the Policy is in effect;
- f. Expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails;
- g. The diagnosis and treatment of acne;
- h. Deviated septum, including sub mucous resection and/or other surgical correction thereof;
- i. Organ transplants that competent medical professionals consider experimental;
- j. Well child care including exams and immunizations;
- k. Expenses which are not exclusively medical in nature.
- I. Any expenses incurred in Country of Residence.
- m. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof, unless Injury or Sickness has caused impairment of vision or hearing; or
- n. Treatment provided in a government hospital or services for which no charge is normally made
- o. Mental, nervous, or emotional disorders or rest cures;
- p. Pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices.

# MEDICAL EVACUATION

1. We will pay up to the maximum combined benefit of up to USD 100,000 per person (sub-limits apply for Spouse and Children, please refer to the SUMMARY OF COVER for more details), for covered expenses due to emergency medical evacuation or Return of Mortal Remains if incurred outside of Your Country of Permanent Residence. An Emergency Evacuation must be ordered by the Assistance Department or a Physician who certifies that the severity or the nature of Your Injury or Sickness and warrants Your Evacuation.

Covered expenses are those for Transportation and medical treatment, including medical services and medical supplies necessarily incurred in connection with Your Emergency Evacuation. All Transportation arrangements made for evacuating You must be by the most direct and economical route possible.

Expenses for Transportation must be:

- a. recommended by the attending Physician;
- b. required by the standard regulations of the conveyance transporting You; and
- c. arranged and authorized in advance by the Assistance Department.

#### **RETURN OF MORTAL REMAINS**

1. We will pay benefits for covered expenses reasonably incurred while travelling outside of Your Country of Permanent Residence, to return Your body to if You die. Benefits will not exceed the combined maximum limit of USD 100,000 per person (sub-limits apply for Spouse and Children, please refer to the SUMMARY OF COVER for more details), for both the Medical Evacuation and Return of Mortal Remains.

Covered expenses include, but are not limited to, expenses for:

- embalming;
- cremation;
- · coffins; and
- transportation.

These expenses must be authorized and arranged by the Assistance Department and You or Your Family must contact the numbers listed in the Customer Service Section.

## **DAILY IN-HOSPITAL CASH BENEFIT**

If You are hospitalized as an Inpatient, due to Injury or Illness while outside Your Country of Permanent Residence, a benefit of USD 100 per day per person (sub-limits apply for Spouse and Children, please refer to the SUMMARY OF COVER for more details), will be provided for each day an Insured Person is hospitalized. The Hospital confinement must be recommended by a Physician.

# What is Not Covered Under Daily In-Hospital Cash Benefit (In addition to General Exclusions):

- 1. Pre-existing Medical Condition;
- 2. Hospitalization in Your Country of Residence;
- 3. Pregnancy and resulting childbirth, miscarriage or disease of the female organs of production;
- 4. Routine physical exams;
- 5. Cosmetic or plastic surgery, except as a result of Injury;
- 6. Any mental or nervous disorder or rest cures.

## **OVERSEAS COVID-19 DIAGNOSIS QUARANTINE ALLOWANCE**

We will pay up to USD 100 per day as specified in the Summary of Cover per person for up to fourteen (14) consecutive days, if while Overseas, You test positive for COVID-19, and as a result are unexpectedly placed into mandatory Quarantine outside of the Territory.

We will pay the amount specified above to cover reasonable and necessary accommodation costs, meals or other expenses directly related to Quarantine.

Any claim for Overseas COVID-19 Diagnosis Quarantine Allowance shall be offset against any amount We have paid or are liable to pay under Travel Cancellation or Travel Curtailment in respect of the same event.

# 2. What is NOT Covered Under Overseas Covid-19 Diagnosis Quarantine Allowance, in addition to the General Exclusions:

- a. This benefit will not apply where Quarantine measures are mandatory for all arriving passengers or Quarantine mandates exist for all passengers from a particular country/region of origin;
- b. We will not cover any loss if You are travelling against a medical practitioner's or doctor's advice, or any claim arising from You acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).

# **GENERAL PLAN EXCLUSIONS**

The Policy does not provide coverage for any of the following:

- Intentionally self-inflicted injury, suicide or any attempt thereat while sane or insane; nor
- 2. War, civil war, invasion, insurrection, revolution, use of military power or usurpation government o or military power; nor
- 3. any period an Insured Person is serving in the Armed Forces of any country or international authority, whether in peace or war; nor
- 4. loss sustained or contracted in consequence of an Insured Person being intoxicated or under the influence of any narcotic or drug unless administered on the advice of a physician; nor
- any loss of which a contributing cause was the Insured Person's attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or resistance to arrest by the Insured Person; nor
- 6. Any loss sustained while flying in any aircraft or device for aerial navigation except as specifically provided herein; nor
- 7. congenital anomalies and conditions arising out of or resulting there from, hernia or dental treatment except to sound natural teeth as occasioned by injury; nor
- 8. flying in any aircraft owned, leased or operated by or on behalf of an Insured Person or any member of an Insured Person's household;
- 9. driving or riding as a passenger in or on (a) any vehicle engaged in any race, speed test or endurance test or (b) any vehicle being used for acrobatic or stunt driving; nor
- 10. any claim caused by opportunistic infection or malignant neoplasm, or any other sickness condition, if, at the time of the claim, the Insured Person had been diagnosed as having AIDS (Acquired Immune Deficiency Syndrome), ARC (AIDS Related Complex) or having an antibody positive blood test to HIV (Human Immune Virus); nor

- 11. the use, release or escape of nuclear materials that directly or indirectly results in nuclear reaction or radioactive contamination; nor
- 12. the dispersal or Application of pathogenic or poisonous biological or chemical materials; nor
- 13. Any loss sustained while the Insured person is participating in any professional sports, winter sports, or in sky diving, parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing, potholing; nor
- 14. any Pre-existing Medical Condition or congenital anomalies or any complication arising there from; nor
- 15. any sickness, disease, illness and any complications arising there from, unless specifically covered in the Policy; nor
- 16. Traveling against the advice of a physician; nor
- 17. any terrorist or member of a terrorist organization, illegal drug traffickers, or purveyor of nuclear, chemical or biological weapons, nor
- 18. planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region or actual travel in, to, or through Afghanistan or Iraq.

# **COVID 19- Covered Conditions And Exclusions**

Benefit	Covered Conditions And Exclusions
Medical Expenses	If You are diagnosed with COVID-19 whilst Overseas, We will pay up to the limit stated in the Summary of Cover for the necessary and reasonable medical costs incurred during your Covered Trip, as a result of You contracting COVID-19 during Your Trip.
Emergency Medical Evacuation	Included within the Medical Expenses benefit limit stated in the Summary of Cover, if You contract COVID-19 during Your Trip, We will cover the cost of emergency evacuation if deemed medically necessary.
Return of Mortal Remains	This benefit includes the cost of returning Your body or Your ashes to the Territory up to the limit stated in the Summary of Cover.
	We will not cover any loss if You are travelling against a medical practitioner's or doctor's advice, or any claim arising from You acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).
	In all cases, You or someone on Your behalf must contact Our assistance Department immediately.
Daily In-Hospital Cash Benefit	The Policy will only pay for a claim in respect of either Daily In-Hospital Cash Benefit or Overseas Covid- 19 Diagnosis Quarantine Allowance for the same event, but not both.
Overseas COVID-19 Diagnosis Quarantine Allowance	Please note: This benefit is only payable for the time that You are placed into an unexpected mandatory Quarantine Overseas and ceases if You are required to Quarantine upon Your return to Your Country of residence. This amount is meant to help You pay reasonable and necessary accommodation costs directly related to Your Quarantine.
	What you are covered for:  We will pay up to the amount shown in the Summary of Cover if while on an Overseas Trip, You are unexpectedly placed into a mandatory Quarantine outside Your Country of residence by a written order of a governmental body for one of the following two reasons:
	You test positive for COVID-19; or
	<ul> <li>Such governmental body identifies You or any Travelling Companion, specifically, as having been exposed to the coronavirus that causes COVID-19.</li> </ul>
	We will pay to cover reasonable and necessary accommodation costs directly related to such Quarantine up to the amount specified in the Summary of Cover for up to fourteen (14) consecutive days.
	What you are not covered for under this section: In addition to the exclusions set out in the General Exclusions section, the Policy does not cover any loss or expenses arising out of, based upon, or attributable to any Quarantine mandate that generally or broadly applies to:
	<ul> <li>all arriving/transiting passengers, or all arriving/transiting passengers from a particular geographic area of origin;</li> </ul>
	all individuals currently located in a particular geographic area;
	<ul> <li>all passengers, or a sub-group of passengers that is broader than just You and Your Travelling Companion(s), in any Common Carrier.</li> </ul>
	Please note that the conditions set out in the General Conditions section apply to all benefit sections.
	Claims evidence required for this section may include:

- Proof of a positive COVID-19 test, if applicable
- Proof of a Quarantine mandate issued by a governmental body
- Proof of Your Hospital admission and discharge dates and times, if hospitalized
- Proof of travel (confirmation invoice, travel tickets)

**Please note:** We may require other evidence to support Your Claim depending on the circumstances, in which case We will request this from You.

## **ASSISTANCE DEPARTMENT**

# For Customer Service in case of a medical emergency call our 24 hours Assistance Departments:

When travelling inside the US (N-America): 866 273 9079 toll free number

For Travel outside the US (N-America): 001 817-826-7014 call collect

Please keep in mind that the Assistance Department is not insurance coverage and that You will be responsible for the fees incurred for professional or emergency services requested of the Assistance Department (for example, medical or legal bills). This benefit may reimburse You for medical related expenses (Please refer to the Travel Medical section for additional information).

## 1. Where the service is available:

In general, coverage applies worldwide, but there are exceptions.

Restrictions may apply to regions that may be involved in an international or internal conflict, or in those countries and territories where the existing infrastructure is deemed inadequate to guarantee service. You may contact the Assistance Department prior to embarking on a Covered Trip to confirm whether or not services are available at Your destination(s).

## 2. Assistance Department:

- a. During Your trip, in the event of an emergency, the Assistance Department provides information on travel requirements, including documentation (visas, passports), immunizations, or currency exchange rates. The exchange rate provided may differ from the exact rate that issuers use for transactions on Your card. Information on exchange rates for items billed on Your statement should be obtained from the financial institution that issued Your card.
- b. In case of loss or theft Your travel tickets, passport, visa or other identity papers necessary to return home, the Assistance Department will provide assistance in replacing them by contacting local police, consulates, airline company or other appropriate entities.
- c. In the event of loss or theft of the transportation ticket to return home, a replacement transportation ticket can be arranged.
- d. Please note that this service does not provide maps or information regarding road conditions.

# 3. Medical Assistance Departments:

- a. Provides a global referral network of general physicians, dentists, hospitals, and pharmacies.
- b. Provide help with prescription refills with local pharmacists (subject to local laws).
- c. In the event of an emergency, the Assistance Department will make arrangements for a consultation with a general practice physician. Additionally, the Assistance Department medical team will maintain contact with the local medical staff and monitor Your condition.
- d. If You are hospitalized, We can arrange to have messages relayed home, transfer You to another facility if medically necessary, or have a family member or close friend brought to Your bedside if You have been travelling alone (this will be at cardholder's expense).
- e. If the medical team determines that adequate medical facilities are not locally available in the event of an accident or illness, We will arrange for an emergency evacuation to a hospital or to the nearest facility capable of providing adequate care.
- f. If a tragedy occurs, We will assist in securing travel arrangements for You.

# 4. Legal Referral Services:

If You are arrested or are in danger of being arrested as the result of any non-criminal action resulting from responsibilities attributed to You, We will assist, if required, to provide You with the name of an attorney who can represent You in any necessary legal matters.

# **GENERAL PROCEDURE - HOW TO FILE A CLAIM**

# Notice of Service request / Claim (non-medical emergency claims on re-imbursement basis)

Written notice of service request / claim must be given no later than thirty (30) days from the date of the incident. Failure to give notice to the claims department listed below, within thirty (30) days from the date of the incident may result in a denial of the claim. To file a claim, log on to <a href="https://my.mycardbenefits.com">https://my.mycardbenefits.com</a> or send claim notification to:

# **AIG Malaysia Insurance Berhad**

Claims Department Level 18, Menara Worldwide 198, Jalan Bukit Bintang, 55100 Kuala Lumpur

Tel: 1800-18-3333

## Languages Supported: English/Bahasa Malaysia

Call Centre hours: 9.00 am to 5.00 pm Monday to Friday (except Public Holidays)

Email: APAC.Mastercard@aig.com / MY.Mastercard@aig.com

The following procedures should be followed:

- 1. You (cardholder) or the beneficiary or someone legally acting on behalf of either, must notify us as required in the Claim Notification Period, or your claim may be denied Upon receipt of a notice of claim, the Insurance Company, will furnish to a claimant the necessary Claim Form(s) along with instructions;
- 2. Complete the Claim Form(s) in its entirety;
- 3. Submit all Required Information (certificate of registration, proof of loss etc.), as outlined in this section no later than the Submission Period.

Please note, there may be additional information requested at times in order to process your claim. It is your responsibility to provide this information or the claim may not be processed.

For assistance with filing a claim, please contact the numbers listed above

## TRAVEL MEDICAL BENEFIT CLAIMS:

# Medical Expenses (Injury or Sickness) / Emergency Medical Evacuation & Return of Mortal Remains / Daily In-Hospital Cash Benefit / Overseas Quarantine Allowance

Claim Notification Period: Within ninety (90) days from the date of loss.

Submission Period: No later than ninety (90) days from the date of Claim Notification.

Required Information (proof of loss):

- Documentation detailing the nature of injury or sickness with a breakdown of expenses, including certified copies of medical evidence reports, attending physician statements, medical receipts and related documentation;
- b) Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the eligible card, including copies of Common Carrier ticket(s) and receipts;
- c) Your cardholder's statement of account showing the account is open and in good standing at the time of filing the claim; Hospital Admission/ Discharge Card, if hospitalized;
- d) Proof of a positive COVID-19 test, if applicable; and
- e) Proof of a Quarantine mandate issued by a governmental body, if applicable;
- f) Proof of Your Hospital admission and discharge dates and times, if hospitalized.

Please note: We may require other evidence to support Your Claim depending on the circumstances, in which case We will request this from You.