### Title:

Refund of Premium Schedule

### **Description:**

Below are the refund of the premium schedules upon cancellation of policy.

# **Agency Products**

### 1. HealthCare Secure

#### **CANCELLATION**

This Policy may be cancelled by the Policy Owner at any time by giving a written notice to Us; and provided that no claims have been made during the current Policy Year, the Policy Owner shall be entitled to a refund. The refund for respective premium mode is illustrated as follows:

| Period Not Exceeding                        | As a percentage of Net Instalment Premium |             |           |             |  |
|---|---|-------------|-----------|-------------|--|
|   | Annual                                    | Half Yearly | Quarterly | Monthly     |  |
| First 15 days of instalment premium payment | 90%                                       | 80%         | 70%       |             |  |
| 1 month                                     | 80%                                       | 70%         | 60%       |             |  |
| 2 months                                    | 70%                                       | 50%         | 30%       |             |  |
| 3 months                                    | 60%                                       | 30%         | No refund |             |  |
| 4 months                                    | 50%                                       | 20%         | 60%       |             |  |
| 5 months                                    | 40%                                       | 10%         | 30%       |             |  |
| 6 months                                    | 30%                                       | No refund   | No refund | No refund   |  |
| 7 months                                    | 25%                                       | 70%         | 60%       | ino returia |  |
| 8 months                                    | 20%                                       | 50%         | 30%       |             |  |
| 9 months                                    | 15%                                       | 30%         | No refund |             |  |
| 10 months                                   | 10%                                       | 20%         | 60%       |             |  |
| 11 months                                   | 5%  | 10%         | 30%       |             |  |
| Period > 11 months                          | No<br>refund                              | No refund   | No refund |             |  |

Note: Net instalment premium expressed as 85% of gross instalment premium.

## 2. i.Am Health Smart

### **CANCELLATION**

You may cancel this Policy at any time by giving a written notice to Us, and provided that no claims have been made during the current Policy Year, You shall be entitled to a refund of the premium as follows:

| Period From Policy Anniversary, Not Exceeding | Premium Payment Mode |             |           |           |
|---|----------------------|-------------|-----------|-----------|
|   | Yearly               | Half Yearly | Quarterly | Monthly   |
| 15 Days (Not Applicable to 1st Policy Year)   | 90%                  | 80%         | 70%       |           |
| 1 Month                                       | 80%                  | 70%         | 50%       |           |
| 2 Months                                      | 70%                  | 50%         | 20%       |           |
| 3 Months                                      | 60%                  | 30%         | No Refund |           |
| 4 Months                                      | 50%                  | 20%         | 50%       |           |
| 5 Months                                      | 40%                  | 10%         | 20%       | 1         |
| 6 Months                                      | 30%                  | No Refund   | No Refund | No Refund |
| 7 Months                                      | 25%                  | 70%         | 50%       |           |
| 8 Months                                      | 20%                  | 50%         | 20%       |           |
| 9 Months                                      | 15%                  | 30%         | No Refund |           |
| 10 Months                                     | 10%                  | 20%         | 50%       |           |
| 11 Months                                     | 5%                   | 10%         | 20%       | 1         |
| Period Exceeding 11 Months                    | No Refund            | No Refund   | No Refund |           |

# **Employee Benefit**

Group Hospital and Surgical Insurance Scheme

#### **CANCELLATION**

This Policy may be cancelled by the Policy Owner at any time by giving a written notice to the Company; and provided that no claims have been made during the current Policy Year, the Policy Owner shall be entitled to a refund of the premium as follow:-

| Period not exceeding       | Refund of Annual Premium          |  |  |
|----------------------------|-----------------------------------|--|--|
| 15 days                    | 90% (applicable for Renewal only) |  |  |
| 1 month                    | 80%                               |  |  |
| 2 months                   | 70%                               |  |  |
| 3 months                   | 60%                               |  |  |
| 4 months                   | 50%                               |  |  |
| 5 months                   | 40%                               |  |  |
| 6 months                   | 30%                               |  |  |
| 7 months                   | 25%                               |  |  |
| 8 months                   | 20%                               |  |  |
| 9 months                   | 15%                               |  |  |
| 10 months                  | 10%                               |  |  |
| 11 months                  | 5%                                |  |  |
| Period exceeding 11 months | No refund                         |  |  |

# **Direct Channel Products**

ProtectPrime39 and ProtectIncome

#### **CANCELLATION**

You may cancel this Policy at any time by giving a written notice to Us, and provided that no claims have been made during the current Policy Year, You shall be entitled to a refund of the premium as follows:

| Period From Policy Anniversary, Not Exceeding              | Premium Payment Mode |             |           |           |  |
|--|----------------------|-------------|-----------|-----------|--|
|  | Yearly               | Half Yearly | Quarterly | Monthly   |  |
| 15 days<br>(Not Applicable to 1 <sup>st</sup> Policy Year) | 90%                  | 80%         | 70%       | No refund |  |
| 1 month  | 80%                  | 70%         | 50%       |           |  |
| 2 months   | 70%                  | 50%         | 20%       |           |  |
| 3 months   | 60%                  | 30%         | No refund |           |  |
| 4 months   | 50%                  | 20%         | 50%       |           |  |
| 5 months   | 40%                  | 10%         | 20%       |           |  |
| 6 months   | 30%                  | No refund   | No refund |           |  |
| 7 months   | 25%                  | 70%         | 50%       |           |  |
| 8 months   | 20%                  | 50%         | 20%       |           |  |
| 9 months   | 15%                  | 30%         | No refund |           |  |
| 10 months  | 10%                  | 20%         | 50%       |           |  |
| 11 months  | 5%                   | 10%         | 20%       |           |  |
| Period exceeding 11 months                                 | No refund            | No refund   | No refund |           |  |