



SHAHEEN FOUNDATION, PAF

SHAHEEN TAKAFUL HEALTHCARE *Plus*

POLICY TERMS AND CONDITION



Shaheen Takaful Healthcare Plus stands as a distinctive product tailor-made for TCS Customers, delivering essential financial support in cases of hospitalization, accident-related medical expenses, and funeral costs in the unfortunate event of a covered member's death (*God Forbid*).

This comprehensive offering presents customers with four appealing plans, thoughtfully designed to align with the diverse needs of TCS Customers. With a streamlined and digital process in place, customers can easily avail the benefits these plans provide, ensuring a hassle-free experience.

Such insurance solutions aim to bestow individuals with a financial shield, helping them navigate unpredictable health challenges with greater ease. In exchange for a regular contribution, the takaful company commits to financially supporting clients in scenarios specifically detailed in the plans."

DISTINCTIVE FEATURES

- ✓ **I**ntroducing an exclusive product design that extends a cash benefit for each day spent in the hospital, aligning with your chosen plan. Hospitalization frequency remains unrestricted throughout the policy duration.
- ✓ **E**levating our commitment to your well-being, the cash benefit for each day in the ICU is doubled, showcasing our dedication to providing enhanced support during critical times.
- ✓ **A**ddressing unforeseen events, the plan covers treatment expenses arising from accidental injuries, with reimbursement up to the predetermined maximum limit within your selected plan.
- ✓ **I**n the unfortunate event of the covered member's death (*God Forbid*), the plan ensures a funeral expense provision, offering financial assistance to the assigned nominee



TERMS AND CONDITION

1. ELIGIBILITY

The eligible person for this Takaful Policy is the present and future customers of TCS who are within the Eligibility Age range i.e. 18 to 64 years and who have given their valid consent to opt for Takaful coverage under this Policy over digital application provided by TCSF.

Any member shall not be eligible for multiple enrolments at a single point in time.

2. EFFECTIVE DATE OF INDIVIDUAL COVER

Member will become eligible from the date of his/her consent for the scheme and contribution is paid.

3. SCHEDULE OF BENEFITS AND COVERAGE

The amount of benefits and coverage shall be according to the following schedule based on the selected Plan.

| Schedule of Benefits | | | | |
|--|--------|--------|--------|--------|
| Plans | Plan A | Plan B | Plan C | Plan D |
| Admission in Hospital Ward/Room-Cash Benefits Per Day | 550 | 1,100 | 2,200 | 3,300 |
| Admission in Hospital ICU – Cash Benefits Per Day | 1,100 | 2,200 | 4,400 | 6,600 |
| Accidental Hospitalization Reimbursement Annual Limit | 15,000 | 30,000 | 60,000 | 90,000 |
| Funeral Expenses: Payable in case of death of covered member | 10,000 | 15,000 | 20,000 | 25,000 |



4. ANNUAL CONTRIBUTION

| PLANS | ANNUAL CONTRIBUTIONS Per Member |
|--------|---------------------------------|
| Plan A | Rs. 400 |
| Plan B | Rs. 800 |
| Plan C | Rs. 1,600 |
| Plan D | Rs. 2,400 |

5. BENEFITS

a) Daily Benefit:

If the Member, whilst the Policy is in full force, upon the advice of a Physician is necessarily confined as an Inpatient within a Hospital, for at least 24 consecutive hours, under the continuous attendance of a Physician, then the Company will, upon receipt of and due investigation of the claim, pay the Daily Benefit amount specified in Policy Schedule.

b) Intensive Care Unit Benefit

If the Member has become eligible for the daily benefit defined above and is confined to Intensive Care Unit then an additional amount equal to 100% of his Daily Benefit would be paid to him.

In no event shall the total amount of benefit provided for each day of hospitalization exceed twice the amount of Daily Benefit

c) Maximum Consecutive Hospitalization:

In case of consecutive hospitalization for more than 24 hours, the payment of Daily Benefit may continue for a maximum of thirty (30) consecutive days.

d) Maximum Benefit Limit:

Subject to other terms and conditions of this Policy, the Daily Benefit will be payable for maximum 60 days under this Policy for all claims arising during one Policy Year.

e) Successive Periods of Hospital Confinement:

If within thirty (30) days of discharge following a period of Hospital confinement for which the Daily Benefit is paid or payable under this Policy, the covered member is readmitted and confined as an Inpatient, due to the same or related causes, the Daily Benefit will not be payable.

If subsequent confinement as an Inpatient is after a period of at least thirty (30) days from the date of discharge from the immediately preceding period of Hospitalization, the confinement will be considered a new period of confinement and the Daily Benefit will be paid in accordance with the appropriate provisions of this Policy.

6. CESSATION OF MEMBERSHIP

Member shall cease to be a member upon occurrence of any of the following events:

- a) Death of the Member;
- b) The Member having attained the maximum age limit of the Policy;
- c) Non-payment of contribution paid by the Member when due;
- d) Member cancels his/her takaful for a full refund of contribution paid within fourteen (14) days of Enrollment Date by notifying the Company for cancellation, in writing or by telephone, provided that no claim has been filed under this Policy. No contribution refund shall be allowed in the event if any claim is filed under this Policy irrespective whether the claim is paid or rejected by the Company.
- e) Any other date on which the Member ceases to be eligible for takaful coverage for any fraudulent or criminal reason affecting the coverage hereunder. Decision of the court shall be final in such cases;



7. GENERAL POLICY EXCLUSIONS

No benefit will be paid if the hospitalization of the Member, results directly or indirectly, wholly or partly as a result of or related to:

Exclusions for Hospitalization Expenses Insurance:

1. Any Pre-existing conditions
2. Pregnancy, Childbirth, abortion and any complication there
3. Intentional self-inflicted injury while sane or insane
4. Elective treatment or failure to follow medical advice,
5. Effect of alcohol or any drug, poison, gas or fumes, voluntarily or involuntarily taken.
6. Any type of Dental and OPD treatment

Exclusions for Accidental Medical Expense Insurance:

1. Self-destruction or self-inflicted injury, while sane or insane, or any attempt there at; under the influence of contraband drugs/drinks.
2. Natural catastrophes, War, declared or undeclared, or any act of war or insurrection, or as a result of a strike, riot, and civil commotion.
3. The commission or attempted commission of an act which would subject to the person to civil or criminal penalties, or the contravention of any law.
4. Complications arising from an attempt of murder, homicide, manslaughter, assault, assassination, slaying or any malicious or criminal act, whether intentional or unintentional, premeditated or spontaneous, random or targeted, resulting in medical expenses incurred by the Life insured.



8. FREE LOOK PERIOD

The Policy shall have a free look period of fourteen (14) days from the Commencement Date during which the covered member may cancel the Policy for a full refund of Contribution paid by him provided no claim has been lodged against this Policy.

9. LIMITATIONS

No amount shall be paid under this Policy in respect of any claim that takes place outside Pakistan.

10. CLAIMS

Written notice of claim must be presented to and received at the office of the Insurance Company. The Member shall provide, at his/her own expense, all certificates, information and evidence required by the Company in respect of claims.

11. FAQs

1. Who can avail Shaheen Takaful Healthcare Plus?

Customers of TCS who are Pakistani national and aged minimum eighteen (18) years up to sixty-four (64) years can avail **Shaheen Takaful Healthcare Plus** upon payment of applicable Contribution. The registration under Shaheen Takaful Healthcare Plus will expire when a covered member reaches the age of sixty five (65) years. In case of availability of only a year of birth information, January 1 shall be considered the month and day of birth respectively.

2. When will cover start and what will be the term of the cover?

- The coverage will commence upon enrolment in one of the plans stated in the Schedule of Benefits above and the annual contribution paid in accordance of any plan.
- For these plans, term of the cover will be one (1) year starting from the enrolment date.

Coverage under plans will renew for future periods provided Contribution paid and the coverage is not terminated in accordance with relevant provisions stated herein.



3. How can I claim under Shaheen Takaful Healthcare Plus?

You can avail treatment from any of the service provider (Hospitals/clinics) and make upfront payment to the service provider and claim reimbursement from Shaheen Insurance Company Limited-Window Takaful Operator.

Covered member of TCS Customers will send their claim documents by using any of the following sources:

- ✓ **Email:** claim.health@Shaheeninsurance.com
- ✓
- ✓ **TCS Center:** Drop your claim documents to any of the TCS Center.

Note: Retain photocopies of all your documents. This will prove advantageous in cases where the original claim documents are lost or not received by Shaheen Insurance Company Limited-Window Takaful Operator. These copies will serve as evidence that the incident requiring the claim submission did indeed take place.

Please note that you or any of your family members must notify a claim within fifteen (15) days from the date of any event occurred or discharged from hospital. Failure to do so can affect claim approval.

4. What documents will be required to claim under Shaheen Takaful Healthcare Plus?

Following documents must be provided within fifteen (15) days from the date of any event occurred or discharged from hospital to get the claim reimbursed:

- a) Original Discharge Certificate
- b) Physician/Surgeon Certificate / Doctor's Prescription (If needed)
- c) Hospital Record of Admission and Treatment
- d) Duly signed Claim Form by the attending physician or surgeon (If needed)
- e) Hospital Record of Admission and Treatment
- f) All receipts of treatment in case of treatment received in hospital due to an accident.



- g) Medico legal and police certificate in case of accident, violence and attempted suicide
- h) Death Certificate issued from NADRA in case of member died during treatment or to claim Funeral Expenses along with the CNIC No. of legal heirs/Nominee

All documents can be submitted in photo copies /scanned form. However, Shaheen insurance company Limited-Window Takaful Operators reserves the right to ask for original documents as and when required.

Claim under funeral expense benefit:

The claim will be paid to your family member who submits heirship certificate issued by authorized government body. However, if you have designated a beneficiary after registration into the product, through writing instructions at customer services touch points mentioned here, claim will be payable to the beneficiary designated by you.

Other Claims:

The claim will be paid to the covered member. However, if state of health of the covered member is such that he cannot give a valid discharge of claim settlement to the insurance company, additional documents such as heirship certificate may be asked for.

5. When and how will the claim be paid?

- All valid claims will be paid within seven (7) working days upon completion of all required documents.
- Claim will be paid in favor of covered member or designated nominee (in case of death of covered member during treatment and/or for payment of Funeral Expenses).
- Claim amount will be transferred digitally in to mobile wallet and/or through IBFT or via cheque dispatched to the registered address of the covered member. For digital transfer, covered member must inform their Mobile Wallet or Bank Account number at the time of claim submission.



- In case of any document(s) required by the company, the company will notify the member or designated nominee (incase of member's death only). Claim will be reimbursed within 7 working days from the date of required documents/information received by the company.

6. In what circumstances will my claim not be paid?

The claim will not be paid in the event of the following:

- a) Any pre-existing conditions.
- b) Pregnancy, Childbirth, abortion and any complication thereof.
- c) Any type of Dental and OPD treatment.
- d) Suicide, assault, murder, self-destruction or self-inflicted injury, while sane or insane, or any attempt there at; under the influence of contraband drugs/drinks
- e) Natural catastrophes, war, declared or undeclared, or any act of war or insurrection, or as a result of a strike, riot, and civil commotion.
- f) The commission or attempted commission of an act which would subject the person to civil or criminal penalties, or the contravention of any law
- g) Filing of a fake claim or submission or forged or fake documents or inability to complete all requirements.
- h) In the event of non-payment of Contribution on due date or within allowed grace period.

7. Under what conditions my subscription under Shaheen Takaful Healthcare Plus will be terminated?

- a) Cessation of Shaheen Takaful Healthcare Plus by any reason whatsoever the covered member may cancel his/her health takaful for a full refund of annual Contribution paid within fourteen (14) days of enrolment date by notifying the Shaheen Insurance Company Limited-Window Takaful Operator for cancellation, in writing or via helpline provided that no claim has been filed under this policy.



- b) No Contribution refund shall be allowed in the event of any claims is filed under this policy irrespective whether the claim is paid or rejected by the insurance company.
- c) The covered member's death
- d) Upon payment of any claim up to the maximum annual limit
- e) Filing of fake claims or submission of forged documents
- f) The covered member attains maximum age of 65 years.

End of Terms and Conditions

DISCLAIMER:

Shaheen Takaful Healthcare Plus - is underwritten, issued and subject to terms and conditions set by Shaheen Insurance Company Limited-Window Takaful Operators, an insurance company and solely responsible for payment of all valid claims lodged by the policyholder/customers.

Address and contact numbers of Shaheen Insurance Company Limited is:

Shaheen Insurance Company Limited

Health Insurance Department

3rd Floor, State Life Building # 6,

M. A. Jinnah Road,

Karachi-74000, Pakistan

Contact No. PABX: +92 21 32630370-75

Mobile: 0300-8296741

Email: info.health@Shaheeninsurance.com

Shaheen Takaful Healthcare plus is only the name of the product and does not, in any way, indicate the quality of product.

TCS Financial Services or TCS is distributing **Shaheen Takaful Healthcare Plus** and acting as the corporate insurance agent of Shaheen Insurance Company Limited-Window Takaful Operators and will not be responsible for paying claims and in any manner if your application or claim is rejected by Shaheen Insurance Company Limited-Window Takaful Operators nor will investigate or provide any opinion on merits of the claim.

