

# PENSION PLAN-PLUS TERMS & CONDITIONS

Effective from 1<sup>st</sup> February 2018



## TYPE OF PLAN

Group Family Takaful Protection Plan "NBC Pension Plan" (PP)

## GEOGRAPHICAL LIMITS

Worldwide, however ILOE is limited to UAE

## CURRENCY

UAE Dirham

## ELIGIBILITY CRITERIA

- All customers of NBC who opt into the scheme and are accepted for coverage by the Operator.
- All clients of the Plan Holder who are between age(s) 21 – 61 years and have been accepted for Takaful coverage by the Operator.
- The customers must be residing in UAE.
- A Covered Member can only take one plan.
- Coverage will commence upon underwriting and acceptance and will be as per the respective Plan Schedule for each Covered Member.
- Only the customer is covered and that customer must be earning an income and be full time gainfully employed;
- Any changes in the status of the customer, i.e. from type A to B or otherwise, will result in the respective plan for that Covered Member terminating and a new Application will have to be filled and the acceptance of Coverage will be at the discretion of the Operator.
- Existing customers of 'sanadi' (an existing product offered to customers by NBC) will be converted into this Plan Terms and Conditions.

## SCOPE OF PLAN

- Pension Plan is offered to customers of National Bonds. The coverage for amount selected by customers is provided to those customers who wish to contribute part of their current income, on a monthly basis, into the saving plan to help fund retirement.
- The saving plan to fund the retirement is independently managed by National Bonds Corporation and has no relation to the Operator.
- The product allows customers to take the following coverage for Family Takaful Benefit and Permanent Total Disability Benefit:
  - a. Fixed amount selected by customer at inception for desired term and accepted for coverage by the Operator.

In addition, the product also provides built in cover for Accidental Death, Repatriation and Hospital Cash Benefit. The product also offers an optional Critical Illness benefit for a fixed term which will only be available to customers who opt into this benefit.

The product also offers complimentary coverage to customers for Involuntary Loss of Employment and Temporary Total Disability Benefit wherein it pays monthly payments (in case of claim) which comprise of:

- a. The actual savings contribution made by the customer to National Bonds Corporation
- b. The Takaful Contribution made by the customer in respect of this Plan

The Operator reserves the right to discontinue the complimentary cover. The coverage will only be offered if the benefits are explicitly mentioned as 'Applicable' in each Covered Member's respective Plan Schedule. The maximum amount of coverage each year is as per the amounts mentioned in the Plan Schedule.

## GENERAL EXCLUSIONS

- No Protection Benefits under this Plan shall be payable in respect of Covered Members where the event giving rise to a claim under this Plan occurs directly or indirectly from any of the following causes:

## EXCLUSIONS FOR FAMILY TAKAFUL AND PERMANENT TOTAL DISABILITY BENEFIT

- Active participation in War, warlike operations (whether war is declared or not, conventional, biological, chemical or nuclear), invasion, acts of foreign enemies, hostilities, acts of terrorism, terrorist sabotage, rebellion, mutiny, civil commotion, civil war, revolution, insurrection, military or usurped power, martial law, embargo or any act committed by any person or persons for the purpose of overthrowing a government by violent force or to influence political decision making. Terrorism (suspected or proven) shall be understood to include the consequences of hostage taking, drive-by shooting, planting of bombs and any other forms of physical violence.
- In the event of loss, damage, cost or expense directly or indirectly caused by,

contributed to by, resulting from or arising out of or in connection with biological, chemical or nuclear explosion, pollution, contamination and/or fire following thereon.

- Any medical condition not declared in the proposal form shall be excluded.
- Accidental or deliberate spread or use of atomic, biological or chemical material including death or disability directly or indirectly caused by, resulting from, or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any event where atomic, biological or chemical material is involved.
- The commission of or attempted commission of an assault or any unlawful act, or being engaged in any illegal activity or felony.
- Suicide or attempted suicide while sane or insane shall be excluded during the first 12 months of the insurance coverage.
- Engaging in aviation, gliding, or any other form of aerial flight other than as a fare paying passenger, pilot or crew in a commercially licensed aircraft of a recognized airline or charter service operating on a regular route;
- A sickness directly or indirectly attributed to HIV and/or any related illness including AIDS, unless as a result of a blood transfusion, or
- Chronic alcoholism or, abuse of alcohol or, abuse or addiction to drugs

## EXCLUSIONS FOR PERMANENT TOTAL DISABILITY BENEFITS

- Attempted suicide or self-inflicted injury whilst sane or insane.
- War, invasion, act of foreign enemies, hostilities or war-like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, insurrection, rebellion, military or usurped power or any act of any person acting on behalf of or in connection with any organization actively directed towards the overthrow by force of its Government or to the influencing of it by terrorism or violence.
- Any breach of law by the life assured or any assault provoked by him.
- Mental illness or mental disease or nervous conditions.
- Pregnancy, childbirth or abortion or any complications arising there from.
- Injury caused by nuclear fission, nuclear fusion or radioactive contamination.
- Covered Member engaging in or taking part in any naval, military or air force operation.
- Aviation, gliding or any other form of aerial flight other than as a fare paying passenger of a recognized airline or charter service.
- The misuse of drugs or alcohol.
- Ingestion of poison or drugs, or inhalation of fumes, voluntarily, except in the case of an Accident admitted by any occupational health and safety board.
- The exercise of dangerous sports including but not limited to:- Polo, boxing, climbing/mountaineering requiring ropes or guide or free climbing, gliding, ballooning, racing of any kind other than on foot (including but not limited to horse or motor racing), participation in speed or endurance tests or record breaking feats, any underwater activity involving breathing apparatus, such as deep sea diving, sky diving or parachuting, bungee jumping, show jumping, steeple chasing, evening or flat racing with horse, potholing, sailing outside territorial waters.
- Participation in any sports in a professional capacity.

## EXCLUSIONS FOR CRITICAL ILLNESS (7 ILLNESSES) BENEFIT

- Any claims caused by or resulting directly or indirectly, wholly or partly from any of the following facts and events will not be covered:
  - Any pre-existing conditions
  - Suicide as a cause of death is excluded.
  - Alcohol or drug abuse - Inappropriate use of alcohol or drugs, including but not limited to the following: consuming too much alcohol or taking an overdose of drugs, whether lawfully prescribed or otherwise or taking Controlled Drugs otherwise than in accordance with a lawful prescription.
  - Criminal acts - taking part in a criminal act.
  - Flying - taking part in any flying activity, other than as a passenger in a commercially licensed aircraft.
  - Hazardous sports and pastimes- taking part in (or practising for) boxing, caving, climbing, horse-racing, jet skiing, martial arts, mountaineering, off-piste skiing, pot-holing, power-boat racing, under-water diving, yacht racing or any race, trial or timed motor sport.
  - HIV/AIDS - Infection with Human Immunodeficiency Virus (HIV) or conditions due to any Acquired Immune Deficiency Syndrome (AIDS).
  - Self-inflicted injury - intentional self-inflicted injury.
  - Unreasonable failure to seek or follow medical advice.
  - War and civil commotion - war, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion
  - Accidental or deliberate spread or use of atomic, biological or chemical material including death or disability directly or indirectly caused by, resulting from, or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any event where atomic, biological or chemical material is involved.
  - Congenital or hereditary conditions
  - Mental problems or nervous system disease
  - No benefits will be payable for any covered condition which was diagnosed in

- any severity prior to the insured person joining the scheme
- No benefit will be paid under critical cover for any covered condition that resulted from a related conditions for which the insured person has received treatment, or suffered symptoms of. Or asked on or was aware of at the time of ,or prior to, joining the scheme.

## EXCLUSIONS FOR ACCIDENTAL DEATH, REPATRIATION AND HOSPITAL CASH BENEFITS

- Previous disabilities or any pre-existing conditions;
- JHA War, Terrorism, and Mass Destruction Exclusion;
- Offshore work/exposure;
- Hazardous Sports and Activities;
- Any non-regular scheduled air exposure (private jets, chartered flights, helicopters);
- Active participation in any war, whether declared or not, from warlike action, civil war, insurrection, riot, civil commotion or other acts of violence including terrorism, originating from any political or civil unrest. However passive war is covered except if an Individual Covered is travelling to a country after war has been declared in that country or after it has been recognized as a war zone by the United Nations or where there is Warlike operations.
- Engaged in aviation, gliding, or any other form of aerial flight other than as a fare paying passenger or pilot or crew in a commercially licensed aircraft of a recognized airline or charter service operating on a regular route;
- Any breach of Criminal law by the Individual Covered or an assault provoked by him;
- Attempted suicide or self-inflicted injury whilst sane or insane within 1 year from Commencement Date.
- Loss resulting from accidental or deliberate spread or use of Nuclear, Biological or Chemical material including loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any event where Nuclear, Biological, and Chemical material is involved.
- Infection from any Human Immunodeficiency Virus (HIV), Acquired Immunodeficiency Syndrome (AIDS) or any AIDS related condition other than blood transfusion.
- Any other exclusion, shown under a specific Applicable Protection Benefit as more particularly described in Section 2, Special Provisions, of the Plan terms and Conditions.

## COVERED MEMBER TYPE

- A: Salaried Customers: means Full Time gainfully employed. Else will be classified into category B
- B: Self-Employed: means a sole trader, director or partner or a shareholder of 20% or more in a Company or Business Unit of any size and presence which employs the Covered Member. The Covered Member will also be considered as self-employed if s/he works for a company or business where his/her spouse, parent, child, brother or sister meets any of these conditions. The Covered Member must be paying the appropriate national insurance contributions and be liable to pay income tax (if applicable).

## FAMILY TAKAFUL BENEFIT (DEATH DUE TO ANY CAUSE (ACCIDENT AND/OR SICKNESS))

- This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable.
- In the event of the death of a Covered Member, from a cause not specifically excluded under this Plan, on or after the Commencement Date and on or before the Expiry Date or cancellation date, the Operator shall, subject to any limit(s) specified, pay the Plan Holder the Benefit Amount specified in the Covered Member's respective Plan Schedule.

## PERMANENT TOTAL DISABILITY BENEFIT (DUE TO AN ACCIDENT AND/OR SICKNESS)

- This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable. The benefit amount paid under this benefit shall be a prepayment of the Family Takaful Benefit. The plan will terminate after payment of this benefit.
- In the event of the Permanent Total Disablement of a Covered Member due to an injury arising out of a cause not specifically excluded under this Plan on or after the Commencement Date and on or before the Expiry Date the Operator shall, subject to any limit(s) specified in these Plan Terms and Conditions, pay the amount shown in the Plan Schedule as the sum payable on the Date of the Event upon which the benefit is payable.
- For Covered Member Type A, the Benefit amount as mentioned in respective Covered Member's Plan Schedule will be payable in the event of Permanent Total Disablement of the Covered Member, caused by a sickness or accident, incapacitating him/her to perform any occupation with 6 month deferred period.

- For Covered Member Type B, the Benefit amount as mentioned in respective Covered Member's Plan Schedule will be payable if the Covered Member is 'unable to follow at-least 4 out of 6 activities of daily living or tasks as mentioned below due to an accident or sickness with a 6 month deferment period.
- The Covered Member must need the help or supervision of another person and be unable to perform the task on their own, even with the use of special equipment routinely available to help and having taken any appropriate prescribed medication. The tasks are:
  - Washing – the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means.
  - Getting dressed and undressed – the ability to put on, take off, secure and unfasten all garments and, if needed, any braces, artificial limbs or other surgical appliances.
  - Feeding – the ability to feed yourself when food has been prepared and made available.
  - Maintaining personal hygiene – the ability to maintain a satisfactory level of personal hygiene by using the toilet or otherwise managing bowel and bladder function.
  - Getting between rooms – the ability to get from room to room on a level floor.
  - Getting in and out of bed – the ability to get out of bed into an upright chair or wheelchair and back again.
- For the above definition, disabilities for which the relevant specialists cannot give a clear prognosis are not covered.
- Permanent and total disability has to be certified by an authorised medical practitioner or by a medical board to determine the status of disability and the practitioner must reasonably expect that the disability will last throughout life with no prospect of improvement, irrespective of when the coverage ends or the Covered Member expects to retire. The date of validation either by a medical practitioner or by a medical board will be considered as the date of claim.

## INVOLUNTARY LOSS OF EMPLOYMENT

- This benefit shall not apply unless stated in the respective Covered Member's Plan schedule as Applicable.
- If after the Start Date and before the End Date and once the initial exclusion period has passed, the Covered Member becomes involuntarily unemployed (means the Covered Member is without work through no fault of his/her own, and that the Covered Member has a jobseekers agreement (or equivalent agreement), and remains in this situation, the waiting period of 30 days will apply and then the Operator will pay the Plan Holder the Covered Member's monthly benefit amount as set out in respective Covered Member's Plan Schedule.
- If a Covered Member suffers an Involuntary Loss of Employment as defined in this Plan, the Operator will pay to the Plan Holder up to an amount each month and for the number of months as Specified in the respective Covered Member's Plan Schedule subject to other terms and conditions of the policy. Only unemployment arising in the covered countries as mentioned in the Plan Schedule and as per the respective contract of employment can be covered.
- Involuntary Loss of Employment is subject to a deferral of coverage period of 180 days accounted only once from the Commencement Date. Existing customers of 'sanadi' who have already completed the waiting period of 180 days with "Sanadi" will only have a 30 days waiting period and those who have completed less than 180 days with "Sanadi" shall complete the remaining waiting period subject to a minimum waiting period of 30 days. A claim is automatically turned down if redundancy or dismissal is notified to the covered member within these 180 days.
- The maximum number of claims per Plan is 1 claim. However, after the claim is paid, a Covered Member is automatically enrolled again if the Contributions are received and subject to other terms and conditions and he/ she would have a new exclusion period. Once a claim is paid and the claimant has found a new job, there will be a new applicable exclusion period, that is there must be at least 6 months of continuous employment after the term of a first claim for which benefits have been paid to re-qualify for a new one

## EXCLUSIONS FOR ILOE

- When unemployment is notified to the Covered member during the first waiting period after the Policy Start Date.
- Due to unemployment which, in the Operator reasonable opinion, the covered member was aware of as likely to be impending at the Start Date, i.e., if, upon investigation, it is deemed that the employee was aware of the imminent redundancy then the claim may be rejected (This is to avoid fraudulent claims).
- Due to unemployment which is normal or seasonal in the Covered Member's occupation.
- Due to voluntary Unemployment or Unemployment due to the Covered Member's misconduct/gross misconduct.
- Due to a strike or lock-out as defined in the Country Employment Law.
- Unemployment due to collective redundancy wherein collective redundancy is technical, organizational or productivity reasons, when the termination of such contracts affects the number of workers during the term and according to the

definitions and other requirements indicated by the UAE regulations in force with respect to "Collective Redundancy.

- In case there is no legislation in this respect, "Collective Redundancy" refers to dismissals:
- In Companies of up to 300 employees redundancies that represent more than 10% of the Company's staff.
- In Companies with more than 300 employees redundancies that represent more than 30 employees of the Company's staff.
- Unemployment of Self - Employed Covered member's.
- If the Covered member does not have a job seekers agreement (or equivalent).
- Caused by ionising, radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
- If the covered member is not a permanent resident of the Country.
- If the covered member has not been working within the Country continuously for the 6 months prior to the Start Date of this Policy.
- If the covered member is under 21 years of age at the Start date of the Policy.
- If the covered member is over 61 years of at the Start date of the Policy
- Due to any other expenses/costs that the covered member may incur that are not covered by this Policy
- Occurring during periods while the covered member is outside the Country for more than 30 consecutive days, excluding the cases where the customer had to travel to another country for work purposes for a period exceeding 30 days.
- If the covered member is not the subscriber of the savings plan issued by National Bonds Corporation. It has to be a single covered member, cannot be a collective or a couple.
- Employees not on a fixed term contract.
- Retirement

### **TEMPORARY TOTAL DISABILITY BENEFIT (DUE TO AN ACCIDENT AND/OR SICKNESS)**

- This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable.
- In the event of the Temporary Total Disablement of a Covered Member due to an injury arising out of a cause not specifically excluded under this Plan on or after the Commencement Date and on or before the Expiry Date, the Operator shall pay the Temporary Total Disability amount shown in the respective Covered Member's Plan Schedule and for the number of months mentioned therein subject to other terms and conditions and provided that the Covered Member is temporarily disabled and prevented from performing any and every duty pertaining to his occupation for the duration of the disablement or a maximum of 90 days whichever is lower. The payments will commence following a waiting period of 30 days.
- Temporary Total Disability is subject to a deferral of coverage period of 180 days accounted only once from the Commencement Date. A claim is automatically turned down if redundancy or dismissal is notified to the covered member within these 180 days.
- The maximum number of claims per Plan is 1 claim. However, after the claim is paid, a Covered Member is automatically enrolled again if the Contributions are received and subject to other terms and conditions and he/ she would have a new exclusion period. Once a claim is paid and the claimant has found a new job, there will be a new applicable exclusion period, that is there must be at least 6 months of continuous employment after the term of a first claim for which benefits have been paid to re-qualify for a new one.

### **EXCLUSIONS FOR TTD**

- If the covered member is absent from Work due to an Accident or Sickness at the Start Date of this Policy.
- Due to pre-existing medical or physical condition (including chronic or recurring conditions) for which the Covered member had suffered from or sought treatment and or advice for in the 12 months prior to the Start Date of this Policy
- Resulting from intentional self-inflicted injury or the taking of alcohol or drugs (other than drugs taken under the direction of a registered medical practitioner and not for the treatment of drug addiction), stress, depression, or any mental or nervous disorder or dysfunction.
- Resulting from the normal and expected medical symptoms associated with pregnancy and childbirth.
- Resulting from medical operations or treatments which are not medically necessary including all cosmetic treatment or surgery.
- Resulting from HIV (Human Immunodeficiency Virus) and/or any HIV-related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or mutant derivatives or variations thereof however caused.

### **CRITICAL ILLNESS**

- This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable.
- This benefit becomes payable upon the production, to the satisfaction of the Operator, of proof that the Covered Member is suffering from a Critical

Illness, on or after the commencement date and on or before the Benefit Expiry Date for this protection benefit, as defined in the following sections. Coverage under this benefit will commence after the expiry of a period of 3 months from the Risk Commencement Date and is subject to a survival period of one month from the diagnosis of a critical illness under the terms of this benefit.

- On payment of a Claim under this benefit the Operator shall pay the amount as shown in Plan Schedule and any endorsement. The Family Takaful Benefit Amount shall not be reduced by the amount of the Critical Illness Claim. Only one claim under this additional Benefit will be payable in respect of a Covered Member.
- The Operator must receive notification of a claim under the Critical Illness Benefit within 90 days of the Covered Member's first knowledge of diagnosis.
- The following Critical Illnesses and relevant conditions are covered under this benefit:
  - 1- Cancer
  - 2- Coronary Artery Bypass Surgery
  - 3- Heart Attack
  - 4- Kidney Failure (End-stage Renal Failure)
  - 5- Major Organ Transplant
  - 6- Multiple Sclerosis
  - 7- Stroke

### **I. CANCER**

Cancer is a malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. The term cancer includes leukemia, lymphoma, sarcoma, and Hodgkin's disease. The cancer must require treatment by surgery, radiotherapy, or chemotherapy. The diagnosis must be confirmed with a valid pathology report and a report from an approved specialist.

The following cancers are excluded:

- All tumours which are histologically described as benign, pre-malignant, borderline malignant, low malignant potential, or non-invasive;
- Any lesion described as carcinoma in-situ (Tis) or Ta by the AJCC Seventh Edition TNM Classification;
- All non-melanoma skin cancers;
- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least class T2N0M0 by the AJCC Seventh Edition TNM Classification;
- Any melanoma that is less than or equal to 1.0 mm in thickness and described as T1aN0M0 by the AJCC Seventh Edition TNM Classification;
- Early thyroid cancers that are less than or equal to 2 cm in diameter and histologically described as T1N0M0 by the AJCC Seventh Edition TNM Classification;
- Any form of cancer in the presence of HIV infection, including but not limited to, lymphoma or Kaposi's sarcoma.

### **2. CORONARY ARTERY BYPASS SURGERY**

The actual undergoing of heart surgery with a thoracotomy to correct narrowing or blockage of one or more coronary arteries with insertion of bypass graft(s). Preoperative angiographic evidence of obstructive coronary artery disease must be provided and coronary artery bypass surgery must be considered as the most appropriate treatment by the claimant's consultant cardiologist.

Balloon angioplasty (PTCA), heart catheterization, laser relief, rotablate, stenting and all other intra-vascular catheter based techniques are excluded.

### **3. HEART ATTACK**

Death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area as a consequence of coronary artery disease. The diagnosis must be supported by all three (3) of the following criteria and be diagnostic of a new definite acute myocardial infarction:

1. Symptoms clinically accepted as consistent with the diagnosis of an acute myocardial infarction; and
2. New characteristic electrocardiographic changes; and
3. The characteristic rise above accepted normal values of biochemical cardiac specific markers such as CK-MB or cardiac troponins.

Heart attack occurring during a coronary intervention must have a cardiac troponin level that is at least three (3) times increased above the laboratory reported upper normal value. Angina and all other forms of acute coronary syndromes are not covered.

### **4. KIDNEY FAILURE (END-STAGE RENAL FAILURE)**

The total and irreversible failure of both kidneys. Continuous renal dialysis must be instituted and the dialysis must be deemed medically necessary by a certified

nephrologist. Acute reversible kidney failure that only needs temporary renal dialysis is not covered.

## 5. MAJOR ORGAN TRANSPLANT

The actual undergoing, as a recipient of, a transplant of a heart, lung, liver, pancreas, or kidney. Bone marrow transplant is also covered if the insured has undergone the transplant and a specialist confirms that the bone marrow transplant was medically necessary. This transplantation must have been deemed medically necessary to treat the irreversible end-stage failure of the relevant organ or bone marrow. Stem cell transplants and islet cell transplants are excluded.

## 6. MULTIPLE SCLEROSIS

A definite diagnosis by a Consultant Neurologist of Multiple Sclerosis must be made which satisfies the following 2 criteria:

- There must be permanent functional neurological impairment with objective evidence of motor or sensory dysfunction, which must have persisted for a continuous period of at least six months; and
- The diagnosis must also be confirmed with objective neurological investigations, such as lumbar puncture, evoked visual responses, evoked auditory responses and MRI evidence of lesions of the central nervous system.

## 7. STROKE

Stroke is defined as a cerebrovascular incident resulting in irreversible death of brain tissue due to intra-cranial hemorrhage or due to embolism or thrombosis in an intra-cranial vessel. This event must result in permanent neurological functional impairment with objective neurological abnormal signs on physical examination by a neurologist at least 3 months after the event. The diagnosis must also be supported by findings on brain imaging and must be consistent with the diagnosis of a new stroke.

The following are excluded:

- Transient Ischaemic Attacks (TIA);
- Brain damage due to an accident or injury;
- Disorders of the blood vessels affecting the eye including infarction of the optic nerve or retina;
- Ischaemic disorders of the vestibular system;
- Asymptomatic silent stroke found on imaging.

## ACCIDENTAL DEATH BENEFIT

- This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable.
- In the event of Accidental Death of an Individual Covered after the Commencement Date and during the Period of Coverage due to a cause not specifically excluded under this Plan within 365 days from the date of Accident, the nominated Beneficiary shall receive the amount as set out in Plan Schedule of Covered Member.

## HOSPITAL CASH BENEFIT DUE TO ACCIDENT (HCB)

- This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable
- In the event of hospitalization of the Individual Covered arising out of a cause not specifically excluded under this Plan, after the Commencement Date and during the Period of Coverage, the individual covered shall receive a cash compensation for every day of hospitalization amounting to AED 50/- with first five days deductible. Limit of indemnity: 7 days.

## EXCLUSIONS APPLICABLE TO HOSPITAL CASH BENEFIT

No payment shall be made under this Plan if hospitalisation occurs due to an Accident as a result of:

- Motor cycling
- As a driver or passenger on motorcycle with more than 250 cc engine capacity; or
- As a driver if the Individual Covered does not have a valid motor cycle license
- Mountaineering or rock climbing that uses ropes or guides, bungee jumping, scuba diving, pot holing or organised team sports.
- Big Game Hunting, BMX Stunt Riding, Boxing, Free Climb Mountaineering, Go Carting, Gymnastic, High Diving (other than from a purpose built diving board over a man-made swimming pool), Jousting, Martial Arts, Micro-lighting, Motor Rallies or Competitions, Outdoor Endurance, Outward Bound Courses, Safaris with guns, Show Jumping, Stunt Events, Underground Activities (other than as a

part of an organised excursion or tour), Water Ski Jumping, White Water Rafting, Wrestling or any variations thereof.

- Competing in or practising for speed or time trials, sprints or racing of any kind.
- Taking part in expeditions or being a crewmember on a vessel.
- Losses sustained or contracted in consequence of a named Individual Covered being intoxicated or under the influence of any narcotic or drug unless administered on the advice of a physician.
- Injury or illness caused by nuclear fission, nuclear fusion, or radioactive contamination;
- Participation in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- Hospitalization other than emergency hospitalization whilst travelling outside UAE.
- Any other exclusion mentioned in the General Exclusions.

## REPATRIATION OF MORTAL REMAINS

This benefit shall not apply unless stated in the respective Covered Member's Plan Schedule as Applicable.

The Operator will reimburse the Individual Covered up to a maximum amount of AED 2500/-, in the event that the Individual Covered dies due to an accident not specifically excluded under this Plan, for the reasonable and unavoidable costs for transporting the individual covered's mortal remains or ashes back from the place of death to the country of residence or country of citizenship.

## CLAIMS

Upon the happening of an event giving rise to a claim under this plan, the legal heir of the covered member shall write to the Company within 90 days of the incident giving rise to the claim along with a list of documents as listed below:

### Family Takaful Benefit (Death Claim)/ Accidental Death Claim

- Death Claimant statement and all related forms duly completed and signed by the Plan Holder / Beneficiary(ies)/Claimant
- Original Death Certificate issued by the Ministry of Health or Authorized Government Body
- Death Notification from the Hospital / Attending Physician
- Detailed Medical Report from the panel of doctors/ hospital mentioning the dates of diagnosis, diagnosis, treatment received and prescribed medications.
- Police / Forensic Report (if any)
- Post mortem / Autopsy Report ( if conducted)
- Passport Copy of the deceased and beneficiary(ies) with valid visa page
- Any other documents may be required to substantiate the claim

### Permanent Total / Partial/Temporary Disability Claim

- Disability Claim Form duly completed and signed by Covered Member/ Plan Holder
- Disability Certificate from medical practitioner or medical board authorized mentioning the degree of disability and chances of recovery
- Updated detailed medical report on the current health condition and/or police report for accidental cause
- Plan Documents, Application Form
- Confirmation of current employment status /and or Employment Certificate
- Passport Copy with valid visa page
- Any other documents may be required to substantiate the claim

### Involuntary Loss of Employment Claim

- Claim Form duly completed and signed by Covered Member
- Copy of Labor Contract and Appointment Letter
- Copy of Termination Letter
- Last six months account statement / copy of payslip / final settlement
- Proof of payment of Social Security Benefit for GCC Nationals (wherever applicable)
- Passport Copy with Visa Page (copy of Cancellation papers or change of visa)
- Any other document as may reasonably be required

NOTE:

ANY OR ALL DOCUMENTS AS INDICATED ABOVE MAYBE REQUIRED TO BE PRODUCE IN ORIGINAL FOR VERIFICATION BEFORE ANY SETTLEMENT OF A CLAIM.

All the above information is reviewed and approved by the medical board appointed by the Takaful Provider.

Please note that in case the event has happened (i.e. death or permanent total disability) outside the UAE, we require attestation of the UAE Embassy / Consulate on the relevant documents mentioned in the Section 3 - Claims from the country of origin, on the documents which are originated from outside the UAE.

Documents other than Arabic need to be translated in English with legal authorized body approved by the Government of UAE on their letter head with the official stamp.

### **CLAIM SETTLEMENT PROCESS**

Once all the formalities as mentioned in Section 3 of this document are completed, the claim documents are submitted to the Takaful Provider for approval of the claim.

### **EXPIRY, TERMINATION AND CANCELLATION OF THE PLAN**

The Plan will expire on the Expiry Date specified in the Plan Schedule. After this date, no new Covered Members will be enrolled into the scheme unless the contract is renewed.

For Covered Members that have enrolled into the scheme before the Expiry Date will have their Protection Benefits in force for the time specified in their respective Plan Schedule.

Notwithstanding anything contained herein to the contrary the Benefits on a Covered Member under this Plan shall terminate upon the happening of any one or more of the following:

- The Covered Member no longer meets the Eligibility Criteria
- The non-payment of a Plan Contribution by the Plan holder before the end of the Grace Period of 30 days.
- Receipt of a valid request for cancellation of the Benefits under this Plan by the Operator in accordance with the Terms and Conditions of this Plan
- The Plan terminates
- Death of the Covered Member.

### **CONTACT INFORMATION**

For any queries regarding coverage, benefits or claims procedure, please contact:

**SALAMA - Islamic Arab Insurance Co. (P.S.C).**  
Head Office 4th Floor, Spectrum Building, Oud Metha, Sheikh Rashid Road  
Dubai, 10214, UAE.

**Tel No. Toll Free: UAE 800SALAMA (800725262)**  
**Business days: Sunday to Thursday - 09:00 am to 06:00 pm**  
**From Overseas: +9714 4079999**  
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