



Plot no. 19 B, near Roomi Masjid, SMCHS,
Shahrah-e- Faisal, Karachi.

TPL LIFE GLOBAL SHIELD
INTERNATIONAL HEALTH INSURANCE



Nowhere on earth
IS TOO FAR!

Flying you across continents to get you the best in health care.
Exclusively for JS Customers.

TPL Life Global Shield International Health Insurance:

TPL Life Global Shield International Health Insurance:

We at JS Bank are dedicated towards ensuring that our customers receive the best in healthcare, whether international or local. TPL Life Global Shield International Health Insurance that offers direct access to the best hospitals and doctors all across the globe, accompanied with exceptional levels of customer service to ensure customers receive the best healthcare available.

Areas of Cover:

With two variants to choose from, select the best package that suits your needs. Regardless of whichever area of cover is selected, you can receive medical treatment not only in your country of residence, but also in any other country within the selected area of cover.

- Worldwide
- Worldwide (excluding United States of America (USA) and US Minor Outlying islands)

*For further details refer to the glossary section.

Key Features:

A free look period of 14 days is available to review your policy's terms and conditions and cancel the policy(If needed).
The Premium paid will be refunded within 14 days of the receipt of the request from the issue date of the policy

Minimum entry age 15 days* child (provided insured with at least a parent or legal guardian)	
Payment mode Annual and Semi-Annual	Maximum entry age 70 years
Plans Titanium Plus, Titanium & Gold	Health insurance Up to USD 500,000

Options to choose Country of Treatment

Country of treatment will be based on the coverage you opt for.
Refer to the Level of Coverage section below.

Limit per person

You may avail the following limits per person under the subsequent packages

Titanium Plus	Titanium	Gold
USD 500,000	USD 250,000	USD 125,000

TPL Life Global Shield International Health Insurance

TPL Life Global Shield International Health Insurance- Health Package for JS Bank Private Banking Customers

Benefit	Titanium Plus	Titanium	Gold
Overall Yearly Maximum Limit, up to	USD 500,000	USD 250,000	USD 125,000
Area of Cover	Worldwide*	Worldwide*	Worldwide Excluding USA*
Daily Accommodation	Up to USD 100 in Pakistan Up to USD 350 outside Pakistan	Up to USD 100 in Pakistan Up to USD 350 outside Pakistan	Up to USD 75 in Pakistan Up to USD 175 outside Pakistan
New Born Accommodation	This benefit pays for the child who is less than 16 weeks old to stay in the hospital while the insured mother is receiving eligible inpatient treatment at such hospital. This is paid from the mother's benefit, pays for new born nursery accommodation of a standard class, where the new born only receives nursery care during the stay in the Hospital. This benefit is not payable if the new born is hospitalized for treatment of any medical condition of the new born.		
Cash Benefit, Per Night (up to maximum of 30 days)	USD 100 per night	USD 100 per night	USD 50 per night
Hospice & Palliative Care	Lifetime limit up to USD 45,000 (12 Months Waiting Period)	Lifetime limit up to USD 45,000 (12 Months Waiting Period)	Lifetime limit up to USD 25,000

*For further details refer to the glossary section.

Benefit	Titanium Plus	Titanium	Gold
Hospital Charges Organ Transplant Reconstructive Surgery Surgical Implants	In patient & Day Care Treatments Included in All Plans		
In-Patient Rehabilitation Companion Accommodation per night	USD 35		
Pre & Post Hospitalization Treatment Surgery procedures Hormone Replacement Therapy Radiotherapy and/or Chemotherapy Kidney Analysis	Out-Patient Treatments Included in All Plans		

TPL Life Global Shield International
Health Insurance- Health Package for JS
Bank Private Banking Customers

TPL Life Global Shield International
Health Insurance- Adding Maternity Options

Benefit	Titanium Plus	Titanium	Gold
Accidental Damage to Natural Teeth	Included		
Local Road Ambulance Transport	Included		
International Medical Emergency Assistance	Included		
Dental Coverage for Global Shield Customers			
Dental coverage limit	PKR 75,000		
Dental Treatment & Prostheses (Excluding cosmetic procedures) ----- Dental/upper or lower Jaw surgeries (accidental emergency treatments only)	Covered		
Cosmetic treatments (scaling/orthodontic/braces treatment only)	Covered based on Co-payment policy structure mentioned below		
Co-payment Structure	1st year: 50:50, 2nd year: 75:25, 3rd year: 100% covered		
Eligibility Age	6 to 90 years of age		
Waiting period	30 days (excluding cosmetic treatments)		
Pre-existing conditions	Not covered in case of dental treatment/dental prostheses		
Plan term	12 months		
Annual Premium for Dental Coverage	PKR 5000		
Coverage Area	Pan Pakistan Only		

	Maternity Benefit	Option 1	Option 2
Pregnancy and delivery	Includes normal and elective caesarean. For elective caesarean there is no benefit for any complications arising. Female at least 18 years old	PKR 1,500,000	PKR 1,000,000
	Room Limits	VIP	Private
	Annual Premium	PKR 155,000	PKR 103,200
	Waiting period of 10 months		
	Coverage Area: Pan Pakistan only		

Age	Titanium Plus (USD)	Titanium (USD)	Gold (USD)
Area of cover	worldwide	worldwide	worldwide excluding USA
0	1145	1,020	638
1	1145	1,020	638
2	1145	1,020	638
3	1145	1,020	638
4	1145	1,020	638
5	1145	1,020	638
6	1090	971	608
7	1090	971	608
8	1090	971	608
9	1090	971	608
10	1090	971	608
11	1090	971	608
12	1090	971	608
13	1090	971	608
14	1090	971	608
15	1090	971	608
16	1090	971	608
17	1090	971	608
18	1090	971	608
19	1100	982	613
20	1110	991	622
21	1120	1,000	626
22	1135	1,012	632
23	1145	1,020	638
24	1155	1,030	643
25	1170	1,042	650
26	1180	1,050	657
27	1190	1,060	662
28	1200	1,069	668
29	1210	1,079	675
30	1245	1,109	692

Age	Titanium Plus (USD)	Titanium (USD)	Gold (USD)
Area of cover	worldwide	worldwide	worldwide excluding USA
31	1280	1,142	713
32	1315	1,172	733
33	1350	1,204	754
34	1385	1,235	773
35	1420	1,266	791
36	1455	1,298	811
37	1490	1,328	830
38	1565	1,394	871
39	1635	1,458	912
40	1705	1,523	952
41	1785	1,590	995
42	1855	1,654	1,034
43	1925	1,718	1,074
44	2000	1,783	1,115
45	2070	1,848	1,155
46	2145	1,913	1,195
47	2215	1,976	1,235
48	2290	2,043	1,277
49	2365	2,108	1,318
50	2435	2,173	1,359
51	2510	2,239	1,399
52	2580	2,301	1,439
53	2710	2,417	1,510
54	2840	2,531	1,583
55	2965	2,645	1,654
56	3100	2,763	1,727
57	3225	2,877	1,797
58	3250	2,899	1,813
59	3505	3,127	1,954
60	3780	3,371	2,106
61	4075	3,634	2,271

Age	Titanium Plus (USD)	Titanium (USD)	Gold (USD)
Area of cover	worldwide	worldwide	worldwide excluding USA
62	4390	3,917	2,449
63	4730	4,218	2,637
64	5095	4,543	2,840
65	5485	4,893	3,059
66	5910	5,270	3,293
67	6360	5,669	3,543
68	6840	6,101	3,813
69	7360	6,563	4,102
70	7765	6,925	4,329
71*	8195	7,307	4,568
72*	8645	7,710	4,819
73*	9115	8,127	5,080
74*	9610	8,571	5,356
75*	10130	9,036	5,648
76*	10685	9,527	5,955
77*	11255	10,037	6,273
78*	11860	10,577	6,610
79*	12495	11,141	6,965
80*	13160	11,738	7,336

*Price for age 70+ are only applicable for customers eligible for renewal.

Key Benefit Limits:

Benefit	Titanium Plus	Titanium	Gold
Yearly limit	USD 500,000	USD 250,000	USD 125,000
Area of Cover	Worldwide**	Worldwide**	Worldwide** excluding USA
Outside Area of Cover	All areas covered (similar to policy)	All areas covered (similar to policy)	Emergency treatment only and up to a maximum limit of USD 20,000 per policy year and subject to inner limits shown below
Daily Accommodation Charges (per day/night)	Up to USD 100 in Pakistan Up to USD 350 outside Pakistan	Up to USD 100 in Pakistan Up to USD 350 outside Pakistan	Up to USD 75 in Pakistan Up to USD 175 outside Pakistan
Pre-notification	Pre-notification / authorization for all In-Patient treatment or Daycare treatment is required otherwise the insured person would have to pay 20% co-insurance on the eligible expenses for an eligible treatment for In-Patient or Daycare treatment		
In-Patient and Daycare Treatment (including surgery, consultations, consumables, surgical implants, reconstructive surgery inpatient rehabilitation)			
Companion accommodation up to (per night)	USD 35		
Cash Benefit (per night)	USD 100 per night, up to a maximum of 30 days	USD 100 per night, up to a maximum of 30 days	USD 50 per night, up to a maximum of 30 days
Hospice and Palliative Care, lifetime limit, available only after 12 months cover (Must be in a hospice or palliative unit)	Up to USD 45,000	Up to USD 45,000	Up to USD 25,000
New Born Accommodation	Included		
Local Ambulance Road Transport	Included		
Pre/post hospitalization Out-Patient treatment (within 30 days prior to hospital admission and 30 days following discharge from hospital)	Included		
Radiotherapy and Chemotherapy	Included		
Kidney Dialysis Treatment	Included		
Surgical procedures received as an Out-Patient	Included		
Emergency Out-Patient treatment following accident	Included		
Accidental damage to natural teeth	Included		
Hormone Replacement Therapy	Included		
Organ Transplant	Transplantation of kidneys, heart, liver, lung or bone marrow included		

*20% co-payment will apply to each and every claim on eligible treatment incurred in Thailand or Malaysia.
** Except for the countries subject to sanctions ruling which include: Iran, North Korea, Syria, Cuba, Venezuela, Crimea (including Sevastopol) [i.e. a region and main port city of Ukraine annexed by Russia], Belarus, Democratic Republic of Congo, Somalia, South Sudan, Zimbabwe, Russia, Ukraine, Sudan.
Note: Please refer to the Policy Document for better understanding of the plan's terms and conditions.



TPL Life Global Shield International Health Insurance

Complimentary Concierge Services

The Health Care, an exclusive product designed to provide easier access to quality healthcare from anywhere in the world. A unique one-of-a-kind support plan which provides unlimited 24/7 doctor consultations on call, along with a Dedicated Health Manager assigned to your case to assist you in your health and wellness journey.

Complimentary Offering for TPL Life Global Shield International Health Insurance Customers

- Unlimited 24/7 Tele-Consultations from a Certified General Physician
- Dedicated Health Manager to assist you on your Health and Wellness journey
- Get financial protection up to USD 20,000 in case of accidental emergency
- 24/7 assistance from TPL Life Call Centre
- 24/7 Global Concierge Services

Global Care

Global Care is a complimentary feature that provides you teleconsultation with a physician, nurse and personal health manager, at the comfort of your own home.

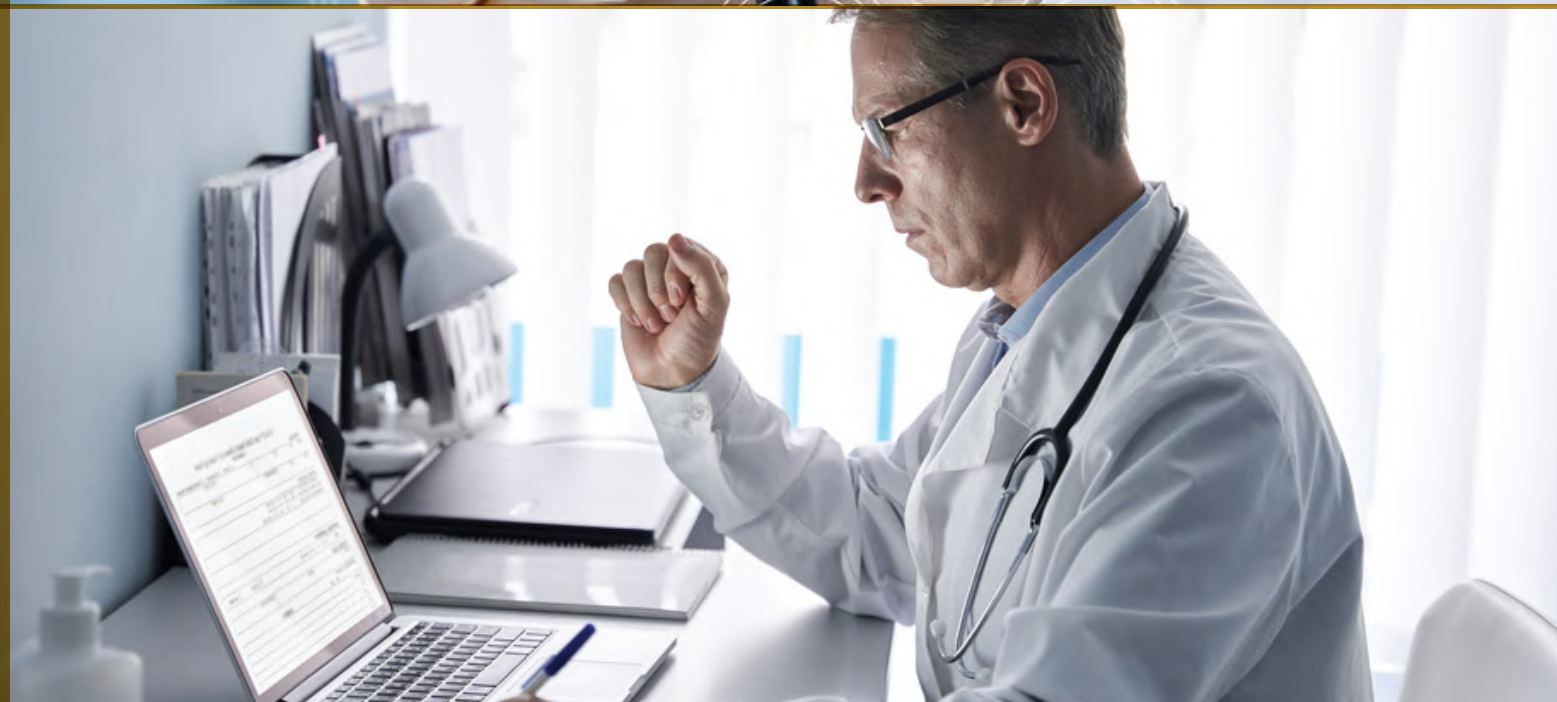
24/7 Tele-Consult

Access a multilingual team of qualified and registered general practitioners via audio call. Be at peace knowing a physician is just a phone call away and receive the advice you need 24/7.



Health Manager

A dedicated Health Manager will schedule your appointments, offer reminders, manage insurance and guide you through your healthcare journey. Our compassionate and professional team works within your preferences and requirements.



Second Medical Opinion

Members have priveleged access and discounted rates, to world-renowned second medical opinions from facilites in the UK, USA, Singapore, and more. Ask your Health Manager for more information.

Electronic Health Record

Through TPL Life Mobile App, members will have access to their previous health data and records, including scans, blood tests, medical notes and more. Records may be uploadded by your Health Manager or directly through your phone.





Sahulat At Home

Sahulat At Home provides you the ease to have a PMD Certified Doctor at your home and listen to your medical concerns firsthand. Whether you need urgent medical attention or a simple consultation, Sahulat At Home will cater to your medical needs through our mobile app.

- Book appointments for clinic visit Request an at-home doctor visit
- Doctors are just a "Click" away



Sahulat Lab

TPL Sahulat Lab brings you the convenience of at-home testing through our panel laboratories. Though our mobile app, you can access your test results online or request delivery of a physical copy.

- Lab samples can be taken by the lab from the comfort of your home*
- Access your lab test reports online
- 10% discount on all lab tests

*cost of lab tests to be paid at time of home testing

Sahulat Doc

Sahulat Doc provides users of TPL Life's Mobile Application a unique customer experience via PMD Certified Doctors & specialists. Just a phone or video call away, this feature enables users to get on-the-go medical assistance & tele-health consults.

- Connect with a qualified & certified doctor instantly
- Consultation can be done via video, chat or phone
- All consults are 100% confidential & private



Sahulat Med

Sahulat Med provides a seamless and hassle-free experience, allowing you to order 100% authentic medicines right to your doorstep through the TPL Life mobile app.

- No need to visit a pharmacy for medicines
- Home delivery of prescribed & ordered medicines*
- 100% authentic medicines



*cost of medicines to be paid at the time of delivery

Frequently Asked Questions:

1) Who can apply?

- A baby from 15 days old and an adult not more than seventy (70) at the time of the application.
- Your principal country of residence must be Pakistan.
- A child age from 15 days to 6 years must enroll with at least one parent or legal guardian.

2) Do I have to undergo a medical checkup at application?

No medical check-up is required. Once you have completed and signed the application form, we will assess your application; inform you prior to the commencement of your cover.

3) Can my family members take up different plans under the same policy?

No, all applicants must apply for the same plan.

4) Are there any waiting periods under my plan?

Yes. There are waiting periods for the first 30 days except for eligible accidental injuries whose cover can take effect immediately and a twelve (12) months waiting period for specific medical conditions: (i) Cancer; (ii) Hepatitis B; (iii) Hepatitis C; (iv) Diabetes; (v) Heart Disease (refers to heart attack, heart failure, coronary artery disease, ischemic heart disease, heart valvular disease, cardiac arrhythmia; (vi) Kidney Failure; (vii) High Blood Pressure; (viii) Chronic Obstructive Pulmonary Disease; (ix) Liver Cirrhosis/Liver Failure; and/or (x) Stroke and their associated medical conditions.

5) Are there any policy exclusions?

There are certain conditions, services and supplies under which no benefit will be payable. These are stated as limitations and exclusions in your policy provisions/handbook. You are advised to read the policy provision/handbook for the full list of policy limitations and exclusions.

6) Will I be covered when I am outside of my area of cover?

Yes, you will be covered up to the amount shown in your benefit table for emergency treatment only, which arises suddenly when you are outside your area of cover. You are not covered if you have specifically travelled outside your area of cover to obtain treatment, or for pregnancy or childbirth. The coverage provided under this section of the benefit is for temporary stay outside your area of cover not exceeding ninety (90) days per trip.

7) What cover do I have in the USA?

If you have applied for the Worldwide cover (including USA), your cover applies for eligible In-Patient or day-patient treatment needed in USA. Your policy schedule will show if you have USA cover.

However, if you have not added the USA cover, your plan gives you some emergency cover for a medical condition that you suffer suddenly while you are in USA up to the policy limit stated in the Benefit Table as “Outside Area of Cover”. Under such a situation, we will not pay if you have travelled to the USA to get treatment or if you have travelled against medical advice.

Please take note if the USA becomes your country of residence, you must tell us and your cover will automatically terminate from the date on which you take up residence in USA.

8) What do I need to do before receiving treatment?

We require all In-Patient and Daycare treatment to be pre-approved by us before you embark on your treatment plan, otherwise you are required to pay a compulsory twenty percent (20%) co-payment on eligible expenses in respect of your claim.

Some selected Areas of Cover (as stated in the benefit table) have a compulsory twenty percent (20%) co-payment on top of the penalty co-payment levied for non-pre-approved claims.

Please call us on +92 301-8215798 as soon as you have been referred for private treatment. We can then make the necessary checks that the treatment is eligible before you incur any costs. Where possible, we will assess the eligibility of your claim over the phone, however we may need to ask for more details about your Medical Condition.

Sometimes we will need more information from your Medical Practitioner before we can authorize a claim.

9) What happens if I require emergency treatment?

If the treatment is given as an emergency you may not be able to telephone us beforehand. Do however, ask somebody to telephone us as soon as possible and make sure that when you are admitted to hospital, the hospital is given your membership card so that they can contact us straight away.

10) Can I maintain my policy when I reside outside Pakistan for more than one hundred and eighty five days?

Whenever you change your principal country of residence, you must notify us of such changes within thirty (30) days. If you are not a Pakistani national and you are returning to your home country to live, you will not be able to keep this policy.

However, if you are a Pakistani national, we will review your request, as in some cases we may not be able to cover you when you reside outside of Pakistan because of international law or domestic law of the country.

We are unable to cover you if you are an American or Canadian citizen whose principal country of residence is either the United States of America or Canada.

11) Can I change my plan?

Yes, you can change your plan level upon Policy Anniversary. Any change in plan is subject to our approval.

12) Will I be subject to revision of terms when I renew my policy after a claim?

We will not change the terms of your policy alone simply as a result of your personal claims. However, we will make changes only to reflect any past or foreseeable changes in medical practice or procedures and type of frequency of claims. The purpose of such changes, as far as possible, is to maintain substantially the same level and type of cover in place while ensuring that the plan remains affordable.

Premium rates are not guaranteed and the premium payable at Policy Anniversary shall be determined at each renewal based on the attained age of each member and if there are changes due to increased cost, taxation, regulations or benefit changes.

13) Is there a free-look period when I can cancel my policy without charges?

The policyholder may cancel this policy by contacting us during the fourteen (14) day free-look period.

The fourteen (14) day free-look period commences on the day that the contract is concluded or the day that full policy terms and conditions received by you, whichever is the later. If the policy is cancelled during the fourteen (14) free-look period, we will return any premium paid for the policy provided no claims have been made during this period.

14) Who can I call if I have questions on my enrollment or membership?

Call your dedicated financial advisor and direct inquiry to 021-355166601-05 or Email: Support.pb@jsbl.com

15) How do I make a claim?

Call your dedicated financial advisor and direct inquiry to 021-355166601-05 or Email: Support.pb@jsbl.com

16) Will claims be settled through direct billing or on reimbursement basis?

We will settle the eligible In-Patient treatment claims via direct billing to the hospitals on our panel in Pakistan and overseas within the agreed network of providers and in your chosen area of cover. If the hospital within your chosen area of cover is not on the panel of network providers, the reimbursement will be based on usual, reasonable and customary charges in respect of an eligible treatment and expenses incurred.

For any reimbursement type claims you must present your treatment related invoices and reports and we will reimburse the claims once we have completed our assessment. Pre-notification for all eligible In-Patient treatment or Daycare treatment is required otherwise the insured person would have to pay 20% co-insurance on the eligible expenses.

17) Who should I contact in case of emergency?

Call your dedicated financial advisor and direct inquiry to 021-355166601-05 or Email: Support.pb@jsbl.com

18) Is long term treatment for cancer covered under my plan?

Yes. We will pay for active cancer treatment intended to treat, shrink, stabilize or shrink the spread of cancer and not given solely to relieve the symptoms, this is limited to radiotherapy and chemotherapy for all plans up to the benefit limits stated in the benefits table, for which first symptoms become apparent after the member was accepted by us for cover on a particular plan. If there were any symptoms prior to your application and inception of your policy, such conditions must be declared in good faith to us at the time of insurance application.

19) Can I choose the doctor/country for my treatment?

Yes, you are free to choose any recognized doctor for your treatment in any country within your chosen Area of Cover, subject to reasonable and customary charges. We have contractual agreement through our partners with a list of medical centers where we have preferred rates and direct billing arrangements. Use of the applicable network to your plan will minimize delays in settling claims.

20) Do you have a list of panel hospitals at TPL Life?

Yes, please contact us for more information on the network, if required.

21) How can I make sure I am fully covered when I require In Patient treatment?

We recommend you contact the 24/7 claims customer service team:

For all claims related queries:
Claims in Pakistan: +92 21 111-000-330
Claims outside Pakistan: +92 301-8215798

By seeking pre-authorization in advance, we will confirm if your treatment is eligible under your policy and if the cost is within the benefit limit of your policy. This means you can minimize any unexpected costs.

Important Information: The precise terms and conditions of the plan are specified in the policy provisions/handbook. Buying health insurance products that are not suitable for you may impact your ability to finance your future healthcare needs. You may wish to seek advice from a TPL Life medical assistant or consultant before making a commitment to purchase the product.

Glossary:

Area of Cover

Refers to one of the following as stated in your plan on the policy specification and/or endorsement:

- Titanium Plus Plan: Worldwide
- Titanium Plan: Worldwide
- Gold Plan: Worldwide (excluding United States of America (‘USA’) and US Minor Outlying islands)

Worldwide**

** Except for the countries subject to sanctions ruling which include: Iran, North Korea, Syria, Cuba, Venezuela, Crimea (including Sevastopol) [i.e. a region and main port city of Ukraine annexed by Russia], Belarus, Democratic Republic of Congo, Somalia, South Sudan, Zimbabwe, Russia, Ukraine, Sudan.

Worldwide excluding USA**

** Except for the countries subject to sanctions ruling which include: Iran, North Korea, Syria, Cuba, Venezuela, Crimea (including Sevastopol) [i.e. a region and main port city of Ukraine annexed by Russia], Belarus, Democratic Republic of Congo, Somalia, South Sudan, Zimbabwe, Russia, Ukraine, Sudan.

Thailand* & Malaysia*

*20% co-payment will apply to each and every claim on eligible treatment incurred in Thailand or Malaysia.

Principal Country of Residence

The country where you live or intend to live for most of the year being one hundred and eighty five (185) days or more which is Pakistan.

Benefit Table

The table applicable to your plan showing the maximum benefits we will pay for each insured.

Chronic

- A disease, illness or injury that has one or more of the following characteristics:
- It needs ongoing or long-term monitoring through consultations, examinations, check-ups and/or tests
 - It needs on-going or long term control or relief of symptoms
 - It requires your rehabilitation or for you to specially trained to cope with it
 - It continues indefinitely
 - It has no known cure
 - It comes back or is likely to come back

In-Patient

When a member is admitted to hospital, and needs to occupy a bed overnight or longer for medical reasons.

Day-Patient

When a member is admitted to a hospital or day patient unit because they need a period of medically supervised recovery, but don’t need to occupy a bed overnight.

Out-Patient

When a member attends a hospital, consulting room or out patient clinic, and is not admitted either as a day-patient or an in patient.

Family Member

Your partner and your unmarried children (or those of your partner) living with you when you take out the policy or when it is renewed. By partner we mean your husband or wife with whom you live permanently. Children cannot stay on your policy after the renewal date following the 21st birthday, unless they are unmarried and full-time students in educational institution, the cover may be renewed up to their age of twenty-five (25) years old.

Panel Hospitals

The network of hospitals with which we have direct settlement agreements. This means that if the insured person choose any of the hospitals listed in the panel, we will be able to settle the bills for eligible in-patient treatment directly with the hospital, provided you have informed us of the treatment in advance. This shall also refer to our Global Directory of hospitals.

Hospitals

Any establishment which is licensed as a medical or surgical hospital, or provider in the country where it operates and which is recognized by us.

LifeTime

The period in which the insured is alive. This does not refer to the life of the policy.

Medical Condition

Any eligible disease, illness or injury covered by this policy.

Medical Practitioner

A person who, being recognized by us, has the primary degrees in the practice of medicine and surgery following attendance at a recognized medical school and who is licensed to practice medicine by the relevant licensing authority where the treatment is given. By “recognized medical school” we mean “a medical school which is listed in the current World Directory of Medical Schools published by the World Health Organization.”

Non-Disclosure

Refers to material facts (facts that would influence our underwriting decision to accept the risk and advise the terms and conditions that should apply) that are either not declared or that have not been declared fully by the policyholder or you.

Policy Anniversary:

The same day and month each policy year as the policy date.

Policy Year

Refers to each term of cover under the policy, which is stated in the policy specifications or endorsement.

Pre-Existing Condition(s)

Any Medical Condition preceding policy commencement date or reinstatement or plan upgrade whichever date is later:

- (i) You have been diagnosed or
- (ii) For which you have received medication, advice, treatment or
- (iii) Which you should reasonably have known based on our appointed independent Medical Practitioner’s opinion or
- (iv) For which you have experience symptoms even if you have not consulted a Medical Practitioner

Reasonable and Customary (R&C)

The standard fee that would usually be charged for the treatment you are receiving, in the country in which you are receiving treatment, and is not more than the hospital or medical practitioner would normally charge in that country. We may verify the fees with a government health department or the independent third party if necessary.

Waiting Period

The period the benefit concerned will not be payable and this is based on the effective date of your plan, or the plan upgrade, or the reinstatement date, whichever date is later. Please refer to the benefits table and/or policy specifications for the details of the waiting period applicable to you plan.

This Leaflet contains general information only and does not constitute any contract between any other parties and TPL Life Insurance Company. It is not a policy or contract for insurance. For detailed terms, conditions and exclusions of the plan please refer to the policy provisions/handbook for healthcare plans.

All information stated in the brochure is correct as of August, 2019.

Disclaimer

1. This product is underwritten by TPL Life Insurance Ltd. It is not guaranteed or insured by JS Bank Ltd or its affiliates and is not a product of the bank.
2. JS Bank Limited is only acting as a distributor on behalf of TPL Life Insurance Ltd and is not and shall not be held responsible in any manner whatsoever to any person, including but not limited to the insured customer(s), beneficiary (ies) or any third party
3. The product is not guaranteed or insured by any of the other Group Companies of TPL Corp and they are not liable in any context.
4. Please refer to the Policy Documents for detailed understanding of the various terms and conditions.
5. Maternity and Dental insurance are optional riders covered by TPL Life.
6. Telehealth services are offered by TPL Life with support from our partners.
7. The product is designed, underwritten & offered by TPL Life Insurance Ltd.
8. These services are not suitable for unsupervised use by persons under 18
9. Service does not cover emergency cases
10. Tele-Health services such as doctor's consultations are offered and provided through our Partner and TPL Life has no liability of any actions of its Partner
11. While the service has proven highly beneficial, results cannot be guaranteed or assured and the patient's progress may not be addressed or improved, and (in some cases) the situation can also be worsened. Hence, it is recommended to visit nearest hospital immediately, when required or prescribed by the attending physician
12. If you think you have a medical emergency or if you have a condition that you know will require a physical examination, you are requested to visit your nearest emergency facility
13. Subject to all applicable laws, The Health Care Doctor(s) may decide that the healthcare facilities are not appropriate for some or all of your treatment needs and, accordingly, may elect not to provide health services to you through this plan. In which case, it is recommended to visit the nearest hospital immediately, when required or prescribed by the attending physician
14. In some instances, the information transmitted may be of insufficient quality to allow appropriate medical or healthcare decision making by the Health Care Doctor (i.e. poor call quality etc.)
15. Delays in evaluation or treatment could occur due to failure of the electronic equipment or technical failures outside of our control. TPL Life would not be responsible if this happens, but if it does, we will notify you as soon as we can and take the steps that we reasonably can to minimize the interruption to the services
16. You may communicate materials containing our copyrights, trademarks, trade secrets, patents, or other intellectual property rights ("IPR") to your physician or healthcare consultants only. You are not permitted to copy, distribute or make any business use of our IPR
17. This Product is not guaranteed or insured by any of the other Group Companies of TPL Corp. and they are not liable in any context
18. Post policy issuance please refer to the Policy documents and other associated documentation for better understanding of the various Terms & Conditions.

19. Rates are inclusive of all Taxes
20. The mentioned rates are subject to change without any prior notice
21. The product is designed, underwritten & offered by TPL Life Insurance Ltd
22. The mentioned rates are subject to change without any prior notice
23. Tele-Health services such as doctor's consultations via Video, Call or Chat, Medicines' delivery & Lab tests' facilities are offered and provided through our Partners and TPL Life has no liability of any actions of its Partners
24. The above rates are inclusive of government taxes
25. While benefits may be expected from the use of TPL Sahulat, results cannot be guaranteed or assured and the situation may not be addressed or improved, and (in some cases) the situation can also be worsened. Hence, it is recommended to visit nearest hospital immediately, when required or prescribed by the attending physician
26. If you think you have a medical emergency or if you have a condition that you know will require a physical examination, you are requested to visit your nearest emergency hospital
27. The services are not suitable for unsupervised use by persons under 18.
28. Subject to all applicable laws, our TPL Sahulat doctor(s) may decide that the healthcare facilities are not appropriate for some or all of your treatment needs and, accordingly, may elect not to provide health services to you through TPL Sahulat. In which case, it is recommended to visit the nearest hospital immediately, when required or prescribed by the attending physician
29. In some instances, the information transmitted may be of insufficient quality to allow appropriate medical or healthcare decision making by the TPL Sahulat Doctor (i.e., poor call quality, poor resolution of images, etc.)
30. Delays in evaluation or treatment could occur due to failure of the electronic equipment or technical failures outside of our control. TPL Life would not be responsible if this happens, but if it does, we will notify you as soon as we can and take the steps that we reasonably can to minimize the interruption to the services
31. In some instances, a lack of access to your complete medical records and incomplete or inaccurate disclosure by (You or any member using TPL Sahulat) may result in adverse drug reactions or allergic reactions or other judgment errors
32. You may communicate materials containing our copyrights, trademarks, trade secrets, patents, or other intellectual property rights ("IPR") to your physician or healthcare consultants only. You are not permitted to copy, distribute or make any business use of our IPR.
33. JS BANK is acting as a distributor only of this policy

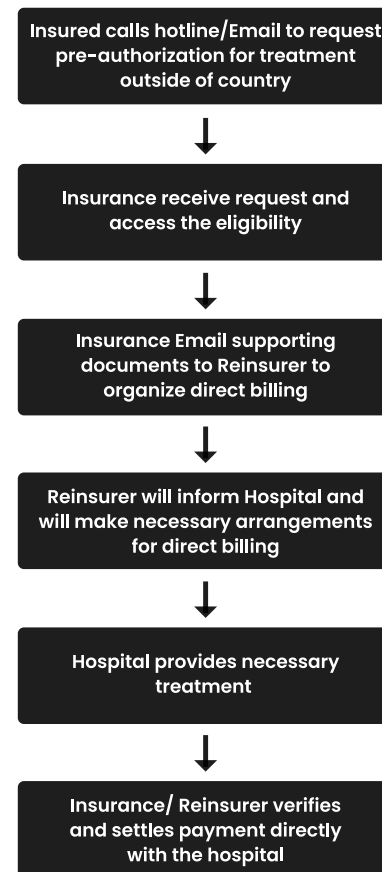


Genre – Claim Process Flow Chart

Local Cashless Hospitalization (TAT- 30 minutes for emergency, 2-3 days for planned treatment)



International Cashless Hospitalization (TAT- 1 hour for emergency, 2-3 days for planned treatment)



Reimbursement

(Non-Network Hospital, TAT 15 Working days)

