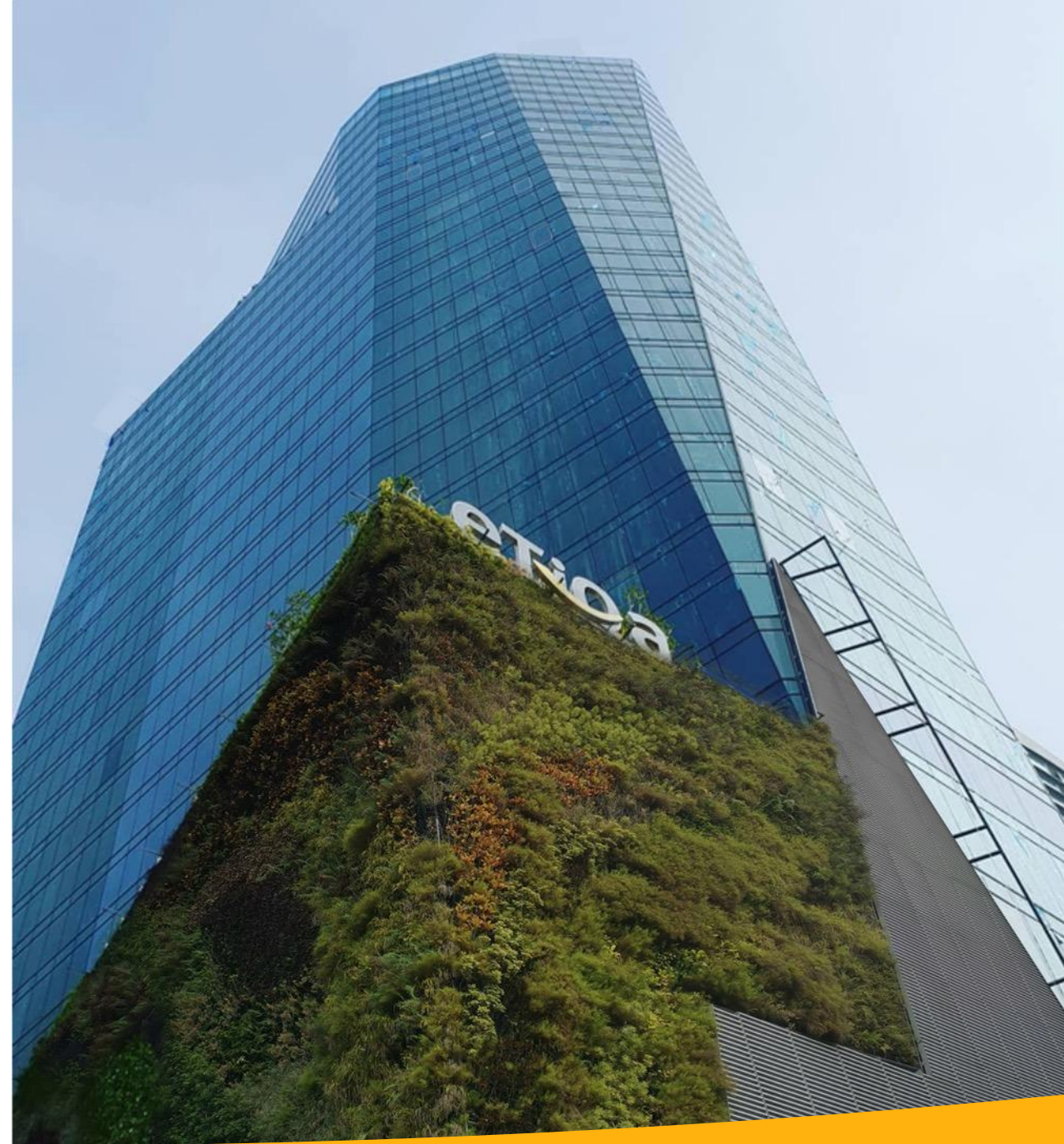




EMGS MEDICAL COVERAGE

FOR CERTIFICATE PLAN 2026/2027



TAKAFUL PLAN AVAILABLE

TAKAFUL PLAN AVAILABLE



NO.	PLAN DESCRIPTION	PLAN 2 (RM)	PLAN 3 (RM)
1	Hospitalization (In-patient) <i>Overall Maximum Per Disability (per person)</i>	30,000	50,000
	Deductible	200	200
2	Clinic (Out-patient) <i>Overall Annual Limit for General Practitioner (per person)</i>	750	1,250
	Deductible	50	50

**The benefits applicable to the 2026 plan, effective from 1st April 2026 only.*

Notes:

- The **deductible** is the amount that a student must pay out of pocket for covered medical services before the Takaful begins to share the costs. The deductible payment is required once the bill is issued.
- A deductible of **RM200** is applicable for hospitalization (each disability) and **RM50** is applicable for each outpatient clinic visit. Etiqua will cover the eligible expenses remaining after these deductible amount.

IMPOSABLE OF DEDUCTIBLES

Inpatient Scenario

Plan Selected:	Plan 2 (with RM 200 deductible)
Total Medical Bill:	RM 5,000
Deductible (per disability):	RM 200
Non-Covered Items:	RM 50 (e.g., vitamins, supplements, and non-medical items)
Breakdown of Payment:	
Amount payable by the student:	RM 250
<ul style="list-style-type: none"> • RM 200 (deductible) • RM 50 (non-covered items) 	
Amount payable by Etiqa (EFTB):	RM 4,750

Outpatient Scenario

Plan Selected:	Plan 2 (with RM 50 deductible)
Total Outpatient Bill:	RM 110
Deductible (per visit):	RM 50
Breakdown of Payment:	
Amount payable by the student:	RM 50
Amount payable by Etiqa (EFTB):	RM 60

Plan Selected:	Plan 2 (with RM 50 deductible)
Total Outpatient Bill:	RM 40
Deductible (per visit):	RM 50
Breakdown of Payment:	
Amount payable by the student:	RM 40 (Less than RM50, no Takaful coverage provided)
Amount payable by Etiqa (EFTB):	RM 0

1

2

Group Hospitalization & Surgical (GHS)



SCHEDULE OF BENEFITS - GHS



SCHEDULE OF BENEFITS			
	PLAN NAME	PLAN 2	PLAN 3
	PLAN DESCRIPTION	R&B250, OAL30,000	R&B300, OAL50,000
DETAILS OF BENEFITS		RM	RM
*	Room & Board		
	a) Ordinary		
	Daily maximum up to 120 days - Private Hosp.	250	300
	Daily maximum up to 120 days - Govt. Hosp.		
*	b) ICU		
	Daily maximum up to 30 days	250	300
*	Hospital Supplies & Services (Maximum per disability)	As Charged	As Charged
*	Surgical Fees (Maximum per disability)	As Charged	As Charged
*	Operating Theatre	As Charged	As Charged
*	Anaesthetist Fees	As Charged	As Charged
*	In-Hospital Physician Visit (<i>max of two (2) visits per day</i>) (<i>Daily maximum up to 120 days</i>)	As Charged	As Charged
*	Pre-Hospital Diagnostic Tests (Within 31 days before hospitalisation)	As Charged	As Charged
*	Pre-Hospitalisation Specialist Consultation (Within 31 days before hospitalisation)	As Charged	As Charged

SCHEDULE OF BENEFITS - GHS



SCHEDULE OF BENEFITS			
	PLAN NAME PLAN DESCRIPTION	PLAN 2 R&B250, OAL30,000 RM	PLAN 3 R&B300, OAL50,000 RM
DETAILS OF BENEFITS			
*	Post-Hospitalisation Treatment (Follow up within 31 days of discharge)	As Charged	As Charged
*	Emergency Accidental Outpatient Treatment (within 24 hours after the accident & follow up within 14 days of first treatment)	As Charged	As Charged
*	Emergency Accidental Dental Treatment (within 24 hours after the accident & follow-up treatment up to 14 days)	As Charged	As Charged
*	Ambulance Fees	200	250
*	Government Hospital Cash Benefit Allowance (Daily maximum up to 120 days)	80	100
*	Day Care Procedure (maximum up to Pre-daycare 31 days & Post-daycare 31 days)	As Charged	As Charged
	Emergency Outpatient Sickness Treatment between 10 p.m to 8 a.m only (Maximum per disability)	100	100
*	Reimbursement of Medical Report Fees	50	50
	Outpatient Cancer Treatment - Subject to Overall Annual Limit	15,000	25,000

SCHEDULE OF BENEFITS - GHS



SCHEDULE OF BENEFITS			
	PLAN NAME	PLAN 2	PLAN 3
	PLAN DESCRIPTION	R&B250, OAL30,000	R&B300, OAL50,000
DETAILS OF BENEFITS		RM	RM
	Outpatient Kidney Dialysis Treatment - Subject to Overall Annual Limit	15,000	25,000
	Reimbursement of tuition fees due to prolonged period of disability per semester - Subject to Overall Annual Limit	12,500	15,000
	Compassionate visitation benefit - Subject to Overall Annual Limit	7,500	10,000
	Hyaluronic Acid Injection – per annum (Admission & Outpatient, all causes)	5,000	5,000
	Outpatient Treatment For Dengue Treatment or Enteric (Typhoid) Fever – Subject to Overall Annual Limit	As Charged	As Charged
	OVERALL MAXIMUM PER DISABILITY PER PERSON (Item *)	30,000	50,000
	DEDUCTIBLE	200	200
	Funeral Expenses - All Causes (All members)	2,000	2,000
	Emergency Medical Evacuation/ Repatriation Expense	Up to 200,000	Up to 300,000
	Accidental Death & Disablement	30,000	50,000

Group Outpatient (GOP)



SCHEDULE OF BENEFITS - GOP



SCHEDULE OF BENEFITS		
PLAN NAME PLAN DESCRIPTION	PLAN 2 RM	PLAN 3 RM
DETAILS OF BENEFITS		
Consultation	As Charged (Cashless)	As Charged (Cashless)
Medication	As Charged (Cashless)	As Charged (Cashless)
Injection	As Charged (Cashless)	As Charged (Cashless)
Diagnostic Lab/X-ray	As Charged (Cashless)	As Charged (Cashless)
Outpatient Surgical Procedure	As Charged (Cashless)	As Charged (Cashless)
Non Panel (Emergency Only)	As Charged (Reimbursement)	As Charged (Reimbursement)
DEDUCTIBLE	RM50	RM50
OVERALL ANNUAL LIMIT FOR GP (per person)	RM750	RM1,250

STANDARD EXCLUSION

- Cosmetic surgery (i.e; Lasik, eye examination)
- Dental related (dental treatment or oral surgery)
- Congenital abnormalities
- Pregnancy related (i.e; miscarriage, abortion)
- Suicide, attempted suicide
- AIDS and AIDS Related Complex and any communicable diseases
- Any act of war
- Investigation and treatment of sleep and snoring disorder
- Routine physical examination
- Experimental Procedure
- Psychotic, mental or nervous disorder
- Sexual dysfunction or infertility
- Alternative therapies
- Vitamins, food supplements

Notes:

*The list is non-exhaustive. Please refer to the **EMGS portal** for the full list of exclusions under this plan.*

ETIQA+ APP

Download the Etiqa+ App now!

You may also scan the QR code for easy access.



Important Notes:

If you can't find the app in your App/Play store, please change your country/region in your phone store settings first.

An all-in-one Takaful app with Fast & Easy solutions at your fingertips.

Get Started with the Etiqa+ App



Download the Etiqa+ App

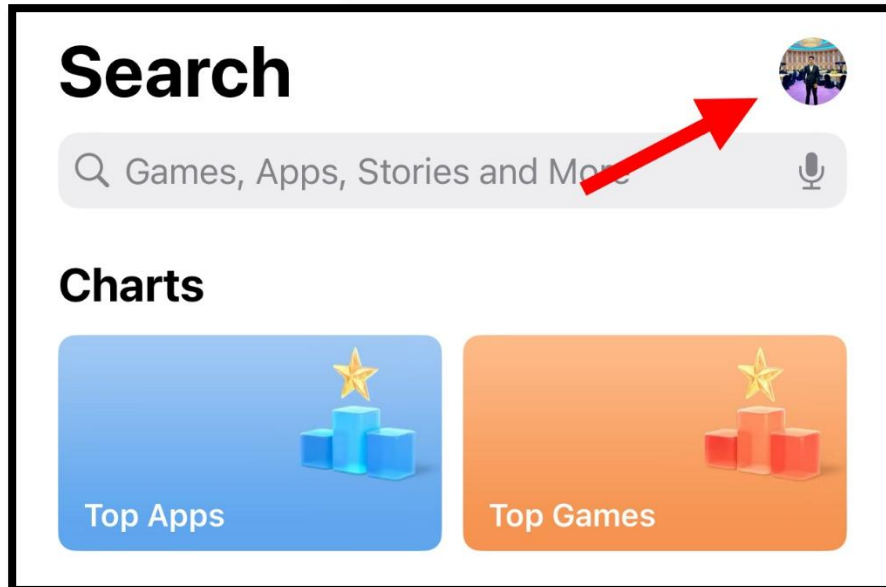
Make payments, submit claims, locate panels & so much more!



HOW TO CHANGE YOUR COUNTRY IN STORE SETTING

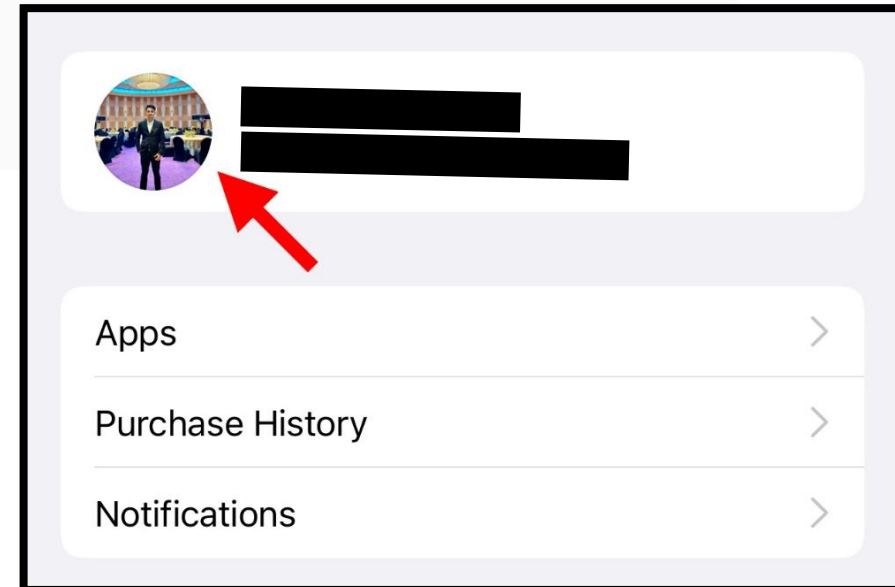
Step 1

Open 'Apps/Play Store', and click on your profile picture.



Step 2

- i. **Apps Store:** Click your 'Profile Picture' again > Account Settings.
- ii. **Play Store:** Settings > General > Account and device preferences.



HOW TO CHANGE YOUR COUNTRY IN STORE SETTING

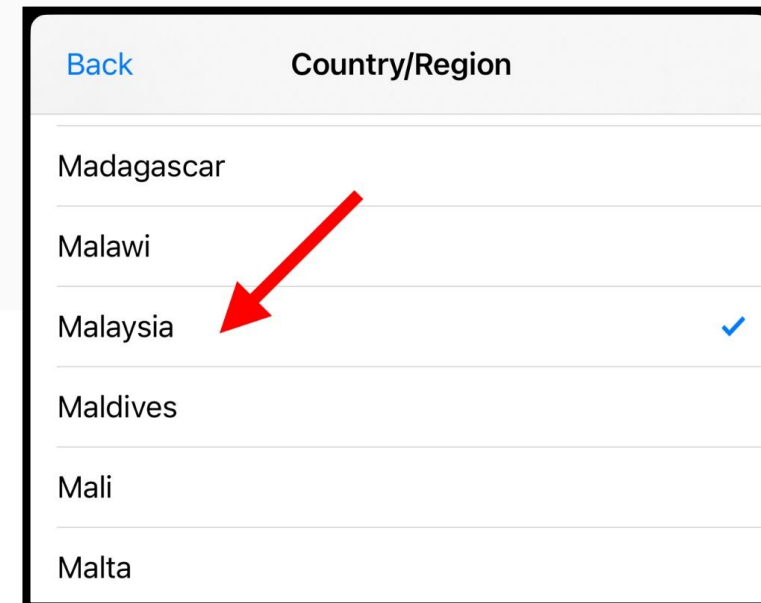
Step 3

- i. **Apps Store:** Click on 'Country/Region'.
- ii. **Play Store:** Click on 'Country and profiles'.



Step 4

Find and choose 'Malaysia'.

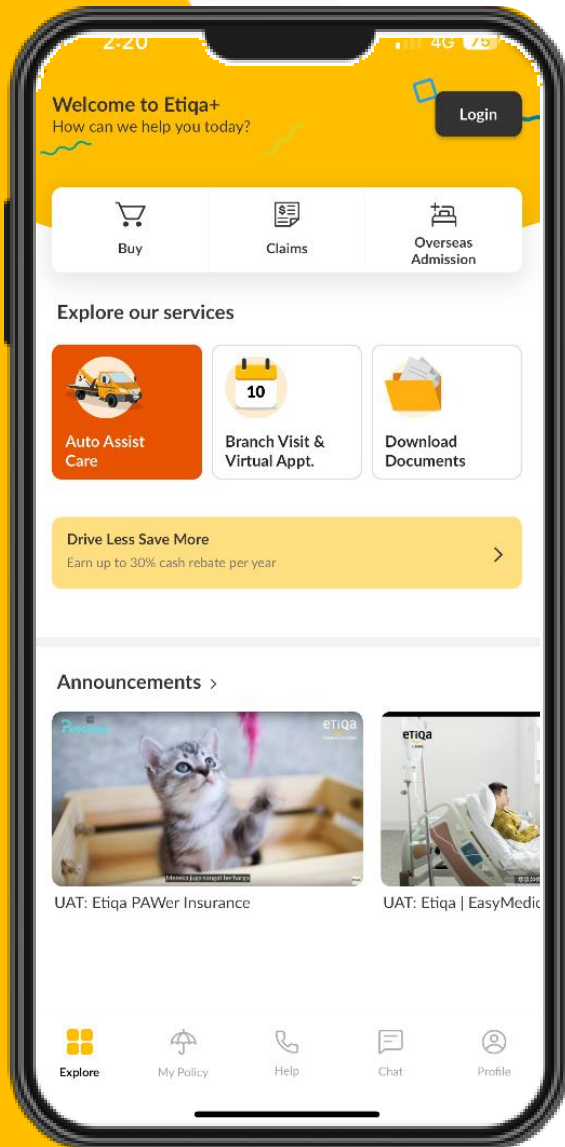


Notes: For Android user, if you're unable to change your Google Play country, please refer to the help guide on your phone for assistance.



Details to prepare for Sign Up:

1. Username, Password and Secret Word
2. Passport Number
3. Malaysia Phone Number (+60xx-xxx xxxx)
4. Email Address
5. Policy Number (Eg. TGWHxxxxxx)



Etiqua+ Mobile Application

An all-in-one app which can make you smile with Fast & Easy solutions at your fingertips.



View Room Entitlement >



View Realtime GL Status >



View Annual & Lifetime Limit >



View Guarantee Letter >

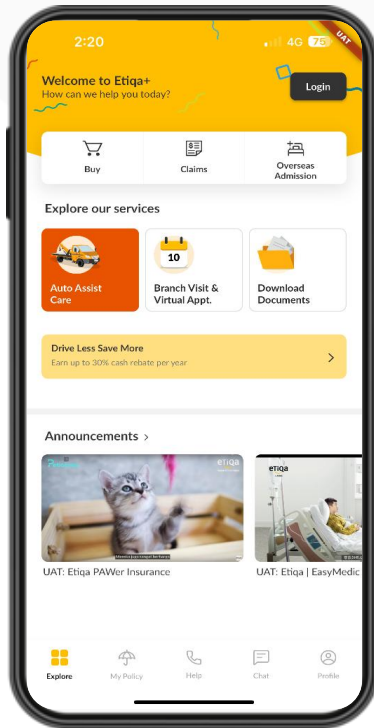


Medical Panel Search >

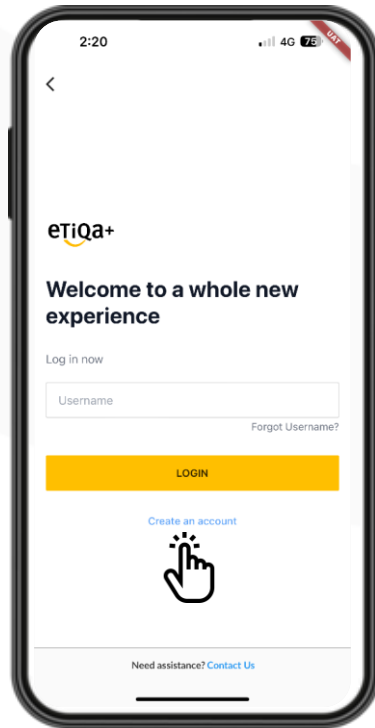


Submit & Track Claim Status >

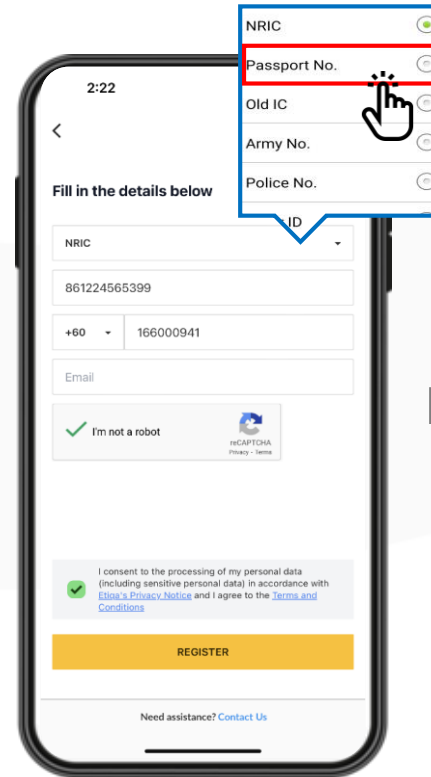
(1) First Time Login



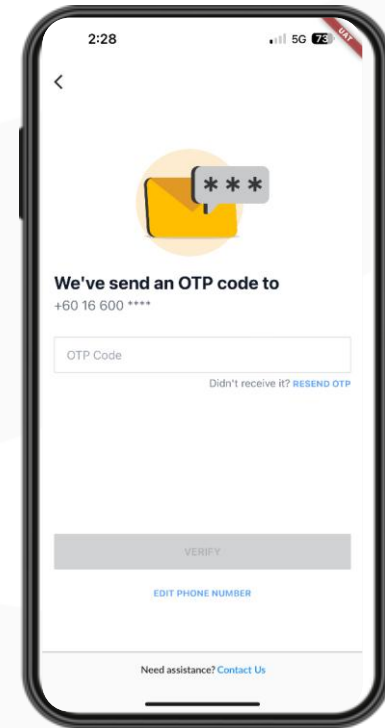
1. Tap **Login** to go to the Login page. If you're a first-time user, select **Create an account**.



2. If you're a first-time user, select **Create an account**.

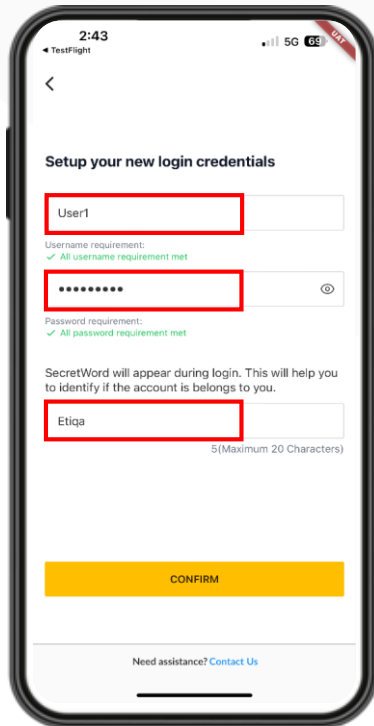


3. Key in the necessary details and complete the captcha. **Click Register** to submit your information.

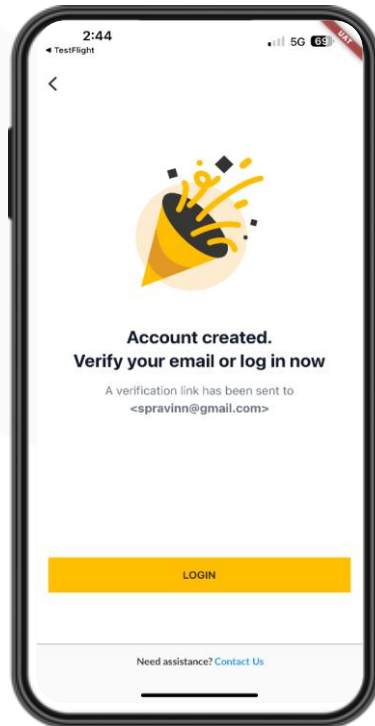


4. Enter the **OTP** you receive and click **Verify** to complete the process.

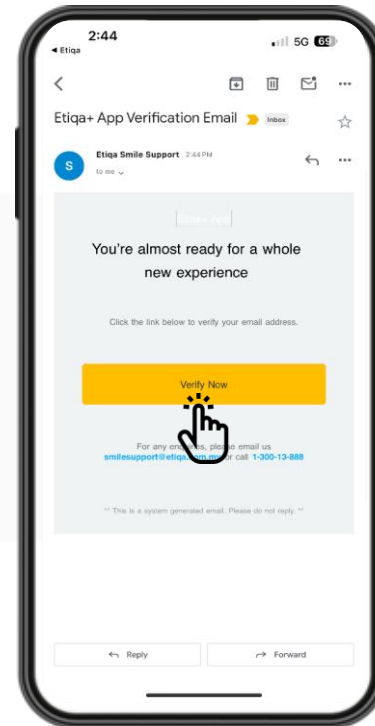
(1) First Time Login (continued)



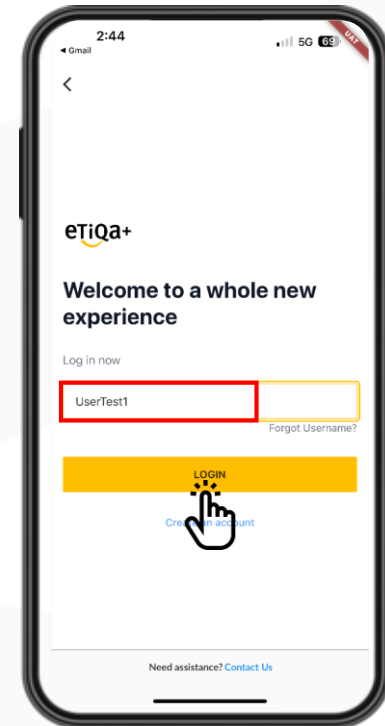
5. Set up your login credentials by keying in a username, password, and secret word, then click **Confirm**.



6. Your account is created. A **verification link** will be sent to your registered email for verification.

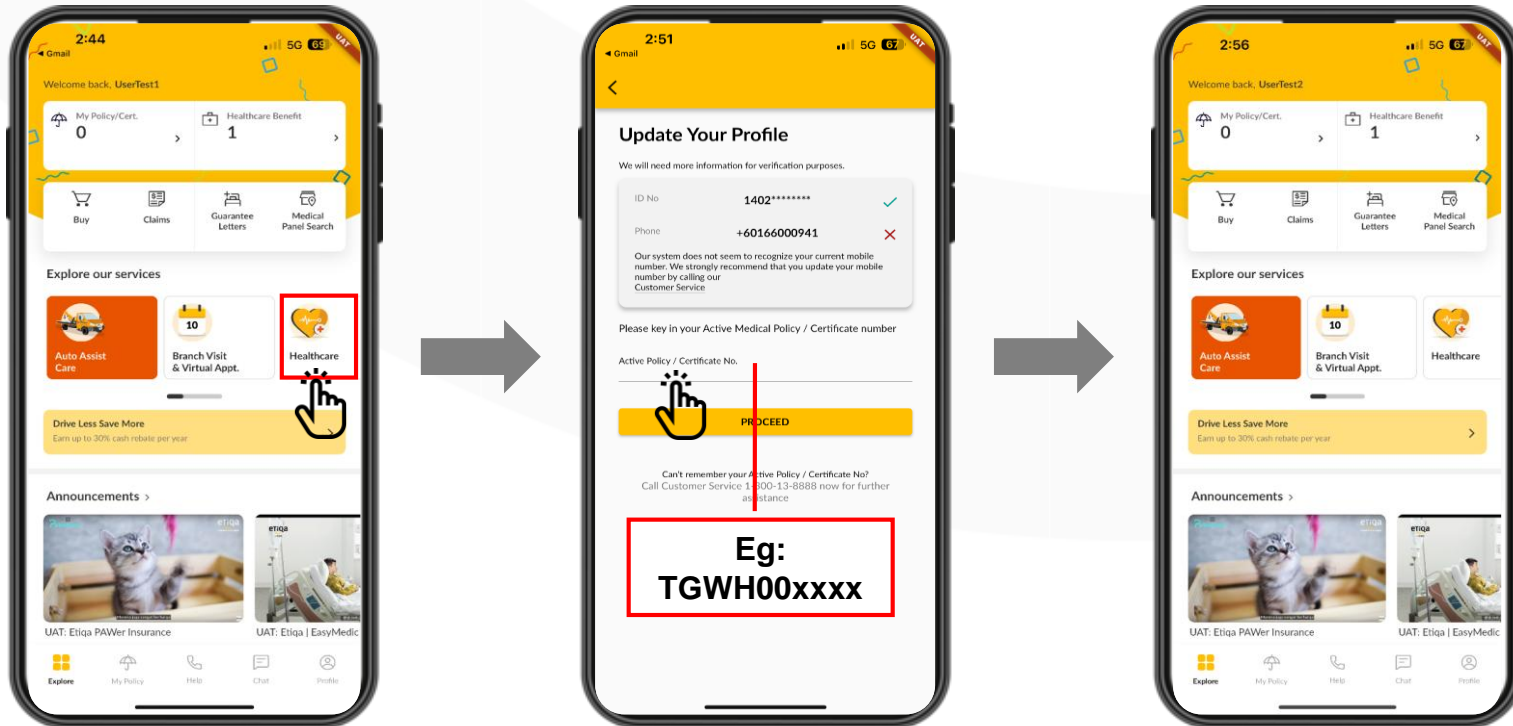


7. Check your email and click **Verify Now** to complete the verification.



8. Return to the app, enter your username, and click **Login** to access your account.

(2) Accessing Healthcare Module



1. Tap the **Healthcare icon** to begin.

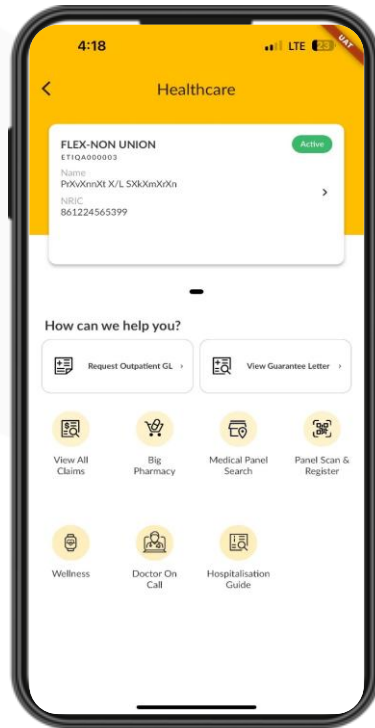
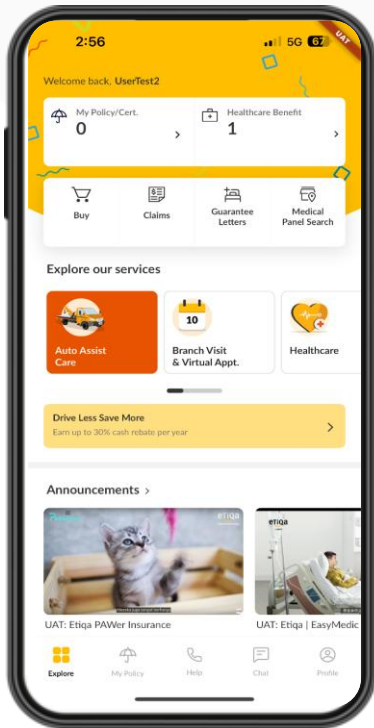
2. Key in your **Policy Number**.

3. Your Healthcare Dashboard will automatically update with all your Healthcare policy information.

Policy Number for FY2026/2027 :- ***To Be Advised (TBA)***

- **Period of Coverage : 01/04/2026 – 31/03/2027**
- For students who have selected Etiqa **on 01/04/2026 & onwards** and have made payment to EMGS.
- Please use:
 - ❑ **000xxxx (GHS)**
 - ❑ **000xxx (GOP)**

(3) Accessing Healthcare Services



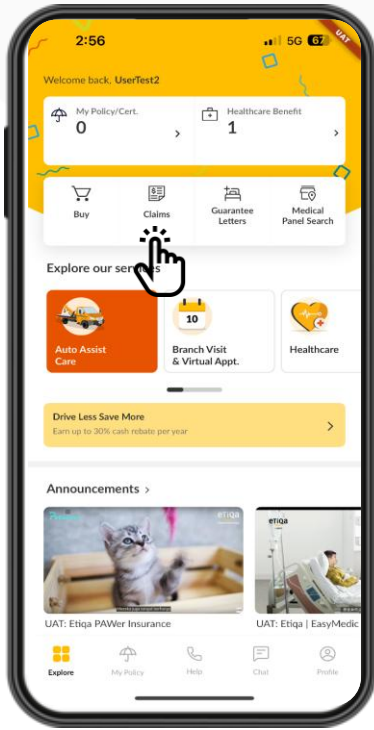
In your Healthcare Dashboard, you have access to the following services, with more to be added for your convenience:

- ✓ **View Annual Limit & Balance Limit**
- ✓ **Room Entitlement for covered members (including dependents, if applicable)**
- ✓ **Request Outpatient Guarantee Letter (GL)**
- ✓ **View real-time status of your Inpatient & Outpatient Guarantee Letter (GL)**
- ✓ **Find the nearest Panel Providers**
- ✓ **Request for Long Term Medication delivery to your doorstep through BIG Pharmacy**
- ✓ **Access e-Consultation with a GP Doctor via DoctorOnCall**

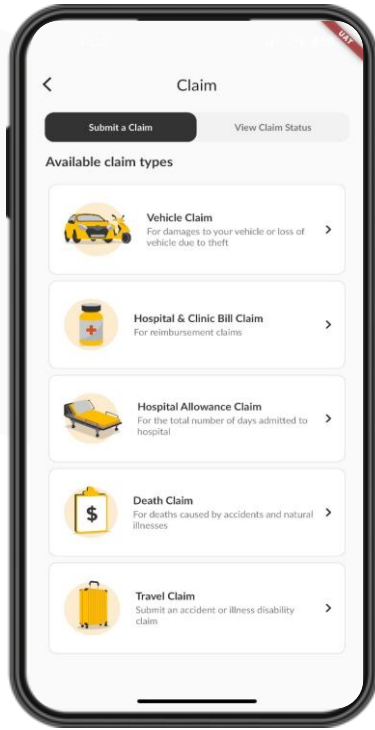
1. Click **Healthcare icon** to view your Healthcare Benefits

2. The app will display a list of features available for you.

(4) Managing Claims



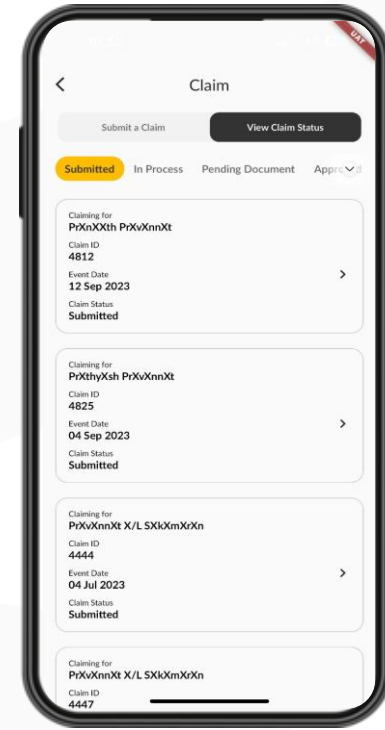
1. Click the **Claims** icon to begin managing your claims.



2. To submit a claim, choose **Submit a Claim** and select **Hospital & Clinic Bill Claim**.

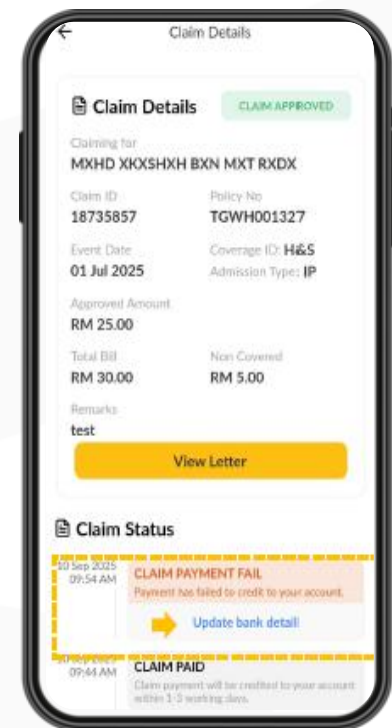
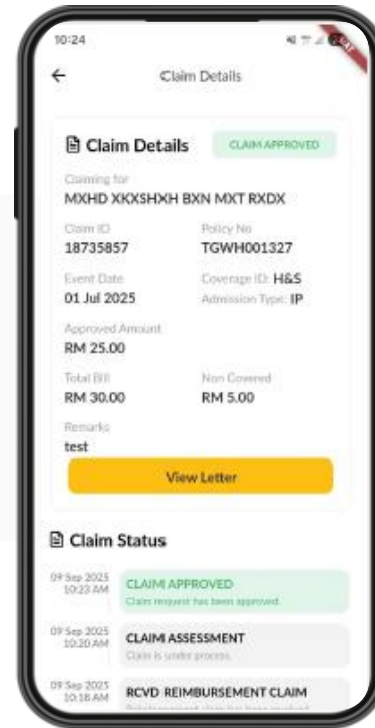
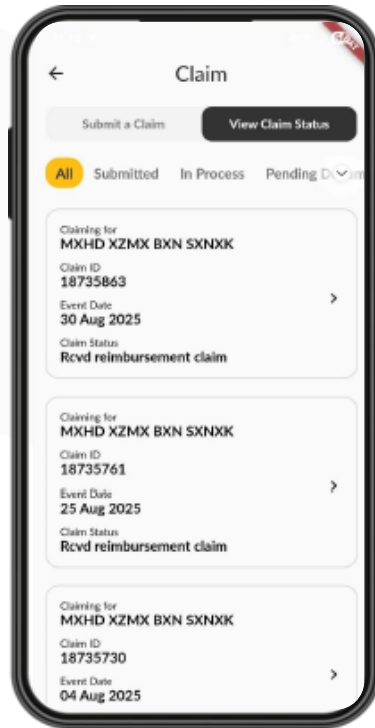
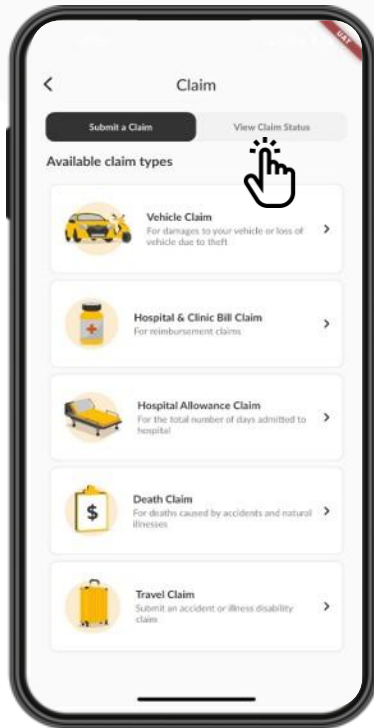
Members must submit the following documents via eTiQA+ **within 30 days** of the discharge date:

- a) Completed Medical Claim Form
- b) Original Bill(s) (including a detailed breakdown of medications if the bill exceeds RM 500)
- c) Original Receipt(s) – Indicate "**Submitted to Etiqa**" in blue pen
- d) Statement of the Medical Examiner (Medical Report) (For Inpatient cases)
- e) All relevant Investigation Report(s) (e.g., lab report, X-ray, MRI) if applicable
- f) Copy of NRIC/Passport



3. To view your claim status, select **View Claim Status**.

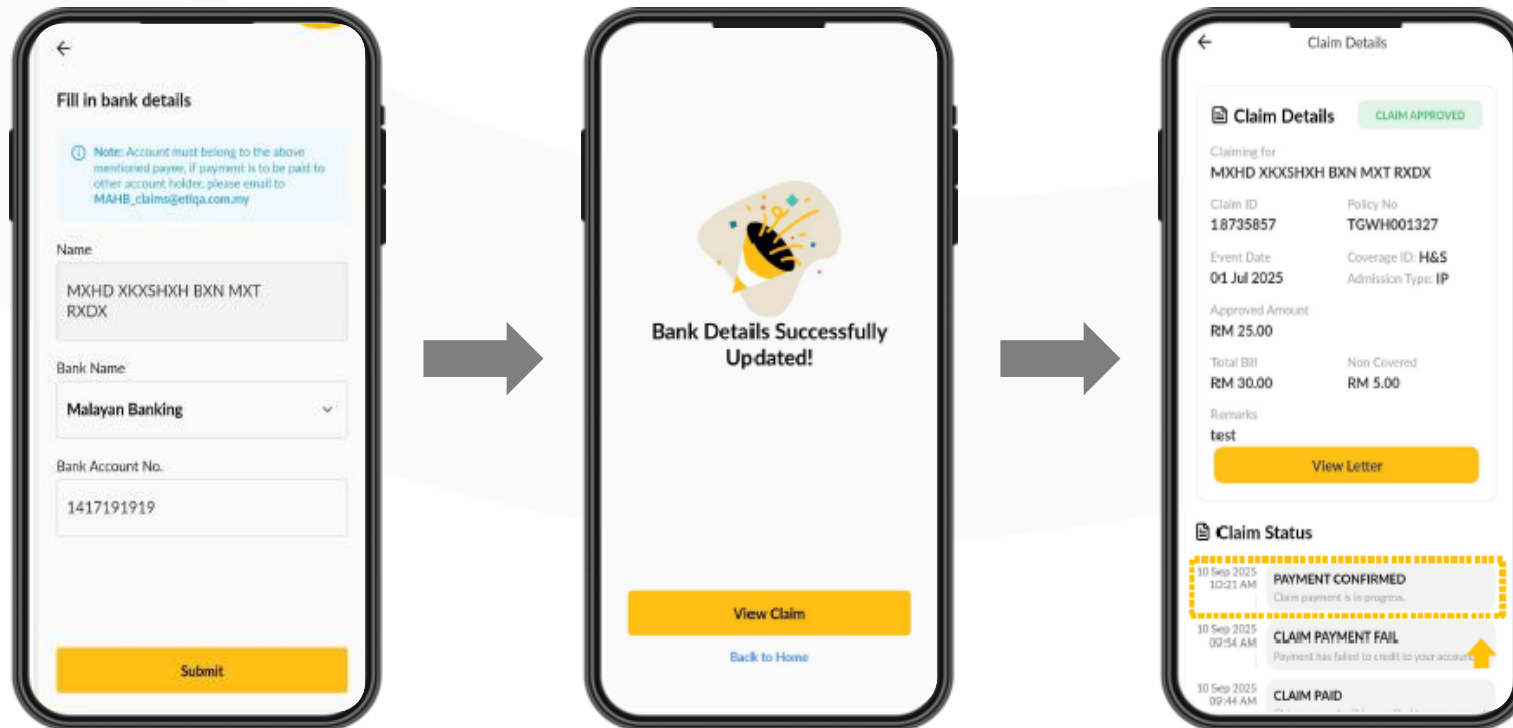
(5) How to enquire Claim Failed Payment (IBG)



To view your claim status, select **View Claim Status**.

You may check claim status here

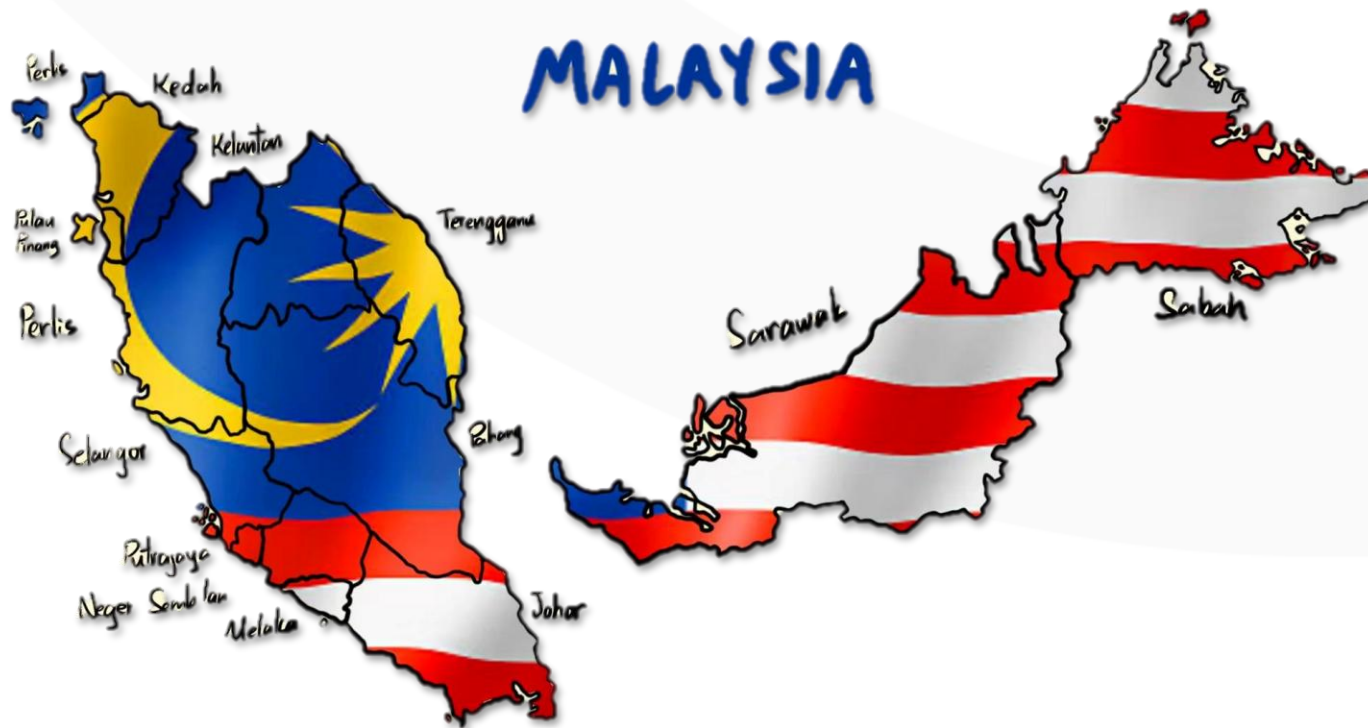
5) How to enquire Claim Failed Payment (IBG) - (continued)



Notes:

1. The Etiqa+ app allows replacement payments to be made to a payee whose name belongs to the claimant if the first claim fails.
2. If the requested payee name does not belong to or is not registered under the principal's name (student), please indicate this in the remarks section and email Etiqa with a valid reason for the request (Formal Letter).

CASHLESS COVERAGE



You may refer to **Etiqa+ App** for the nearest Panel Hospitals and Clinics

Notes: Treatment or hospitalization at the following hospitals are **not claimable** under your Group Hospital and Surgical plan:

8 Non-Panel Hospitals as below:

- Prince Court Medical Centre Sdn Bhd
- KPJ Kajang Specialist Hospital
- KPJ Ampang Puteri Specialist Hospital
- Pantai Hospital Penang
- KPJ Damansara Specialist Hospital
- Gleneagles Kuala Lumpur
- KPJ Penang Specialist Hospital
- Gleneagles Medical Centre, Penang

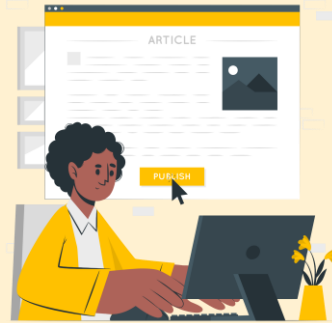
Customer Journey | Outpatient Coverage at Panel GP Clinic



1

Walk-in to Panel Clinic

- Walk-in to Etiqa Panel Clinics.
- Refer to the list of panel clinics in the eTiqa+ mobile app to locate your nearest Panel Clinic.



2

Member Verification

- Present your NRIC/Passport and inform the clinic that it is covered by Etiqa.

IMPORTANT NOTES:

- ✓ NRIC/Passport Verification is MANDATORY. Member to pay and claim if unable to produce NRIC/Passport.
- ✓ Non-Panel GP Clinic Visit only payable for Emergency Cases only.



3

Registration

- Clinic will register the patient based on the information provided.
- Clinic will verify the membership status on Etiqa's Portal.



4

Treatment

- Clinic will confirm the member's status is active and the balance is sufficient.
- Doctor will proceed with treatment if both conditions are met.

IMPORTANT NOTES:

- ✓ If the condition cannot be treated by the GP doctor, upon the Doctor's discretion a referral letter is to be given to seek specialist treatment.
- ✓ Coverage for specialist treatment is subject to the eligible coverage of the member.

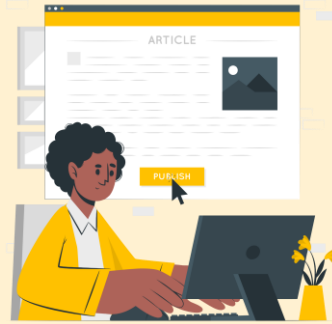
Customer Journey | Admission Guarantee Letter (IGL) at Panel Hospitals



1

Admission Required?

- Refer to the list of panel hospitals in the eTiQA+ mobile app to locate your nearest Panel Hospital.



2

Member Verification

- Present NRIC/Passport and inform the hospital that you are covered by Etiqa.
- Sign the Guarantee Letter (GL) request form.
- Pay the admission deposit, if required by the hospital.

IMPORTANT NOTES:

- ✓ EHC will check validity of the policy/ certificate, medical condition and policy/ certificate terms and conditions.
- ✓ EHC to issue the admission GL (IGL), if case is coverable within 30 minutes upon receiving complete documents.



3

Registration

- Once the doctor completes the GL request form, the hospital will process the Admission Guarantee Letter (IGL) request.
- The hospital will then upload the request to Etiqa Healthcare (EHC) via Etiqa's Provider Portal.



4

Treatment

- Hospital will proceed with treatment upon GL issuance.

IMPORTANT NOTES:

- ✓ If the case is not coverable, a Decline Guarantee Letter will be issued. Member to pay and file the claim for reimbursement consideration.
- ✓ Hospital will be able to track GL status and download GL from the Provider Portal.
- ✓ If the patient wish to be admitted prior to the GL issuance, hospital may collect an admission deposit.

Customer Journey | Discharge Guarantee Letter (GL) at Panel Hospitals



1

Final GL Request

- Once the final bill, investigation reports, and final diagnosis completed by the treating doctor are ready, the hospital will process the Final Guarantee Letter (FGL) request.
- The hospital will then upload the request to Etiqa Healthcare (EHC) via Etiqa's Provider Portal..

IMPORTANT NOTES

- ✓ Upon confirmation for discharge by the treating doctor, it takes around 2-4 hours for the hospital to prepare the FGL.

2

Final GL Issuance

- Upon receiving the FGL request and complete documents, EHC will review the final bill and issue the Final Guarantee Letter (FGL) **within 45 minutes**.
- The FGL will indicate the covered and non-covered amounts, indicating what the member needs to pay, if any.
- The hospital can track the GL status and download the FGL from the Provider Portal.

3

Non-Covered

- The hospital will deduct any non-covered amounts from the admission deposit or collect the total non-covered from the member.

IMPORTANT NOTES:

- ✓ The FGL will cover 31 days follow up for treatment of the same ailment, with the same doctor at the same hospital.

4

Discharge

- The member can collect their take home medications and is read for discharge.

GUARANTEE LETTER (GL) FOR GOVERNMENT HOSPITAL



1. Any admission at a government hospital may proceed on a pay-and-claim basis.
2. Alternatively, a **Letter of Undertaking (LOU)** from the University is **required** for treatment at a government hospital, confirming acceptance of the full bill immaterial of limits and entitlement, in order for us to issue a Guarantee Letter (GL).
3. The issuance of the GL is **subject to receiving** a formal Letter of Undertaking (LOU) from the University.
4. Supporting documents required:
 - i. A copy of Student ID.
 - ii. LOU on official letterhead with authorized signature.
 - iii. Other information required in the LOU:
 - Student Full Name
 - Passport Number
 - Hospital Name
 - Diagnosis
 - Expected admission date

Notes:

The Guarantee Letter (GL) will be issued upon verification and acceptance of the LOU.

Etiqua Healthcare 24 Hours Call Center



Etiqua Healthcare

1800 88 9998

etiquahealthcare@etiqua.com.my

* for Guarantee Letter (GL) request only

FREQUENTLY ASKED QUESTIONS (FAQs)



Q: Do I need to install the Etiqa+ app?

A: Yes, the app allows you to easily access your policy details, submit claims and find panel hospitals or clinics.

Q: Am I covered for outpatient treatment at the hospital?

A: No, coverage at the hospital is limited to inpatient admission only, subject to the policy's terms and conditions. Outpatient treatments are not covered (eg, Medication, X-Ray and etc), except for **Emergency Accidental Outpatient Treatment** and **Emergency Outpatient Sickness Treatment between 10:00 pm and 8:00 am only**.

Q: What happens if I go to a clinic that is not in the panel?

A: If you visit a non-panel clinic, you will need to pay the full medical bill upfront and submit a reimbursement claim for **emergency cases only**. Reimbursement will be subject to your policy terms and conditions.

Q: What happens if I have fully utilized the annual limit for both Inpatient and Outpatient coverage?

A: Once your annual limit is fully utilized, any further medical expenses will not be covered and must be paid out-of-pocket. Your coverage and full limits will reset when your policy is renewed next year.

Q: Can I be admitted to the government hospital?

A: Yes, admission to a government hospital is allowed either on a **pay-and-claim basis** or by requesting the **university to provide a Letter of Undertaking (LOU)** to obtain a Guarantee Letter (GL). For pay-and-claim cases, reimbursement will be subject to your policy terms and limits. Please note that any expenses exceeding your coverage may not be reimbursed by Etiqa.

Q: Is the hospital deposit the same as the deductible?

A: No. A hospital deposit is an upfront payment requested by the hospital before admission, while a deductible is the fixed amount you must pay under your insurance policy before benefits apply.

Q: Do I need to pay a deductible of RM200 for hospitalization admission per disability and RM50 for each clinic visit?

A: Yes. You are required to pay RM200 for each hospitalization admission per disability and RM50 for every clinic visit.

Thank you