



JUBILEE AJER PLAN
THE GIFT OF HEALTH
& HAPPINESS



Having the means to easily overcome lofty medical expenses during trying times is a privilege that only a few can afford. Hence, a plan that gives you and your loved ones the financial security to make it through unfortunate times ahead is nothing short of a gift.

Jubilee Ajer Plan' by Jubilee Life Insurance, with its distribution partner Soneri Bank, offers you a set of services relating to your health and accompanying hospital bills while also providing your beneficiaries with a death benefit, God forbid, in case of your untimely and unfortunate demise.

Key Benefits

- Cash-less In-patient hospitalization benefits
- Accidental Emergency hospitalization
- Lump Sum payment of Death Benefit
- Pre/Post Hospitalization* coverage up to 30 Days
- Policyholder can cancel the policy within 7 days from the receipt of the policy documents

Policy Health Coverage Features

Policy Features	Coverage	
In-Patient Hospitalization and Emergency Accidental Hospitalization	PKR 250,000	
Room Limit	PKR 10,000	
Discount on Lab Tests & Pharmacy	Available	
Local Ambulance Services	Covered within	
Medical Evacuation Charges		
International Medical Coverage*	Hospitalization	
Emergency Accidental Dental Treatment	Limit	
Lacerated Wounds & Fractures (Under Day Care)		

^{*}On reimbursement basis and as per AKUH benchmark.

Policy Death Coverage Feature

In the event of the death of the policyholder, the plan shall provide a sum of PKR 250,000 to the nominated beneficiaries as a lump sum payment.

What is In-Patient Hospitalization Benefit?

Any treatment and services provided for sickness, injury and/or a surgical operation to a patient who is admitted to a Hospital and is assigned a bed. Expenses that arise out of such an admission will be covered under Jubilee Ajer Plan according to the terms and conditions mentioned in the Policy Document.

^{*}Includes expenses occurred due to Investigation, Consultation and Medicines.

Who is eligible for this Plan?

The eligibility age to avail this plan is between 18 years to 60 years inclusive with a maximum age of 61 years at maturity.

What is the Policy Term of Jubilee Ajer Plan?

The policy term for this plan is one year and it is yearly renewable.

At the end of each year, the policyholder will have an option to renew the policy for another year subject to acceptance of terms and conditions offered by the Company. The policy will terminate if it is not renewed within the given grace period, in which case the policyholder will have to purchase it again. Jubilee Ajer plan is renewable up to the age of 60 years nearest birthday.

What is the Annual Premium for this product?

The annual premium for this plan depends on the age bracket you fall under:

Age Bracket	Premium
18 – 49	Rs. 10,500
50 – 60	Rs. 15,500

FAQs

What is a Pre-existing Condition?

'Pre-existing Condition' means any injury, illness, condition or symptom:

- For which treatment or medication or advice or diagnosis has been sought or received or was foreseeable prior to the issue Date of the Policy for the Insured Person concerned, or
- Which originated or was known, or reasonably should be known to the Life Assured or the Insured Person to exist prior to the Issue date of the Policy, whether or not treatment or medication or advice, or diagnosis was sought or received.

Is there a Free Look Period under this Plan?

Jubilee Ajer Plan offers a free look period of 7 days during which you can review your policy terms & conditions and cancel the policy if needed. Your premium will be refunded upon receipt of a written request within 7 days from the receipt of the policy documents. Please note that Jubilee Life Insurance reserves the right to deduct the expenses incurred on medical examination.

Is there a waiting period under this plan?

This policy has a waiting period of thirty (30) days, during which claims arising will not be payable except only in case of death due to accident or hospitalization due to accident. Full coverage under this policy takes effect thirty (30) days after the later of the policy issue date and the last alteration date for attachment of Benefit Assured under this policy.

Would all expenses related to Pre-Existing Conditions related expenses be covered?

No. Pre-existing conditions will only be covered up to the percentage of the Benefit Limit as mentioned in the below schedule. Year-wise schedule of pre-existing conditions is given in the table below:

Year	Pre-existing Condition
]*	0%
2	10%
3	20%
4	30%
5	40%

Maximum up to 50% of the Annual Benefit Limit

What are the advantages of Approved Hospitals?

In case of hospitalization, you can select any of the Approved Hospitals to obtain quality medical care without having to pay out of pocket. You can avail the credit facility arranged by Jubilee Life through a simple pre-authorization procedure, and Jubilee Life will settle your bills directly to the hospital as per your entitlement. This relieves you from the financial distress, and you can concentrate on the recovery process.

Which Approved Hospitals are available?

You can benefit from Jubilee Life Insurance's network of around 500 carefully selected Approved Hospitals spread across the country. Also, a hospital panel list shall be provided to you along with the Policy Document at the time of purchase of this plan.

Which Top Approved Hospitals are available in the main cities of Pakistan?

By opting for Jubilee Ajer Plan, you have access to some of the best hospitals located in the main cities of Pakistan which includes the following:

City	Hospitals
Karachi	Aga Khan University Hospital (AKUH) Orthopaedic and Medical Institute (OMI) South City Hospital Liaqat National Hospital
Lahore	Doctors Hospital and Medical Center Hameed Latif Hospital
Islamabad	Shifa International Quaid-e-Azam International Hospital
Rawalpindi	Maryam Memorial Hospital
Faisalabad	Faisal Hospital Mujahid Hospital
Multan	City Health Care Pvt Ltd Fatima Medical Centre

^{*}Pre-existing conditions will be covered from 13th month i.e. (after the 1st year). Upon request by the Policy Owner for renewal of the Policy, the Company may grant a waiver of Pre-Existing Conditions up to 50% of the Benefit Limit from the 6th Policy Year.

Definitions:

In-patient Hospitalization: A patient admitted to the hospital for the treatment of medical condition.

Approved Hospitals: Hospitals which are on the Jubilee Life Insurance's panel list.

Inadmissible Conditions: Medical conditions which are not covered under Jubilee Ajer Plan.

Pre-authorization: Obtaining prior approval before incurring an expense for the treatment of medical condition covered under this product.

Important Notes:

- 1. All scheduled admissions must be reported to Jubilee Life at least 48 hours prior to admission. Insured person must seek Jubilee Life's authorization before proceeding.
- 2. Treatment at any of the hospitals which are not covered in the 'Approved List of Hospitals' can only be availed in case of an actual emergency or accidental hospitalization.
- 3. For emergency admissions, the hospital/insured persons will contact us within 24 hours for authorization.
- 4. Before covered treatment is undertaken in any of the Approved Hospitals, the Insured Person must inform the Company. The Company has made direct billing arrangements with the Approved Hospitals. Any request for reimbursement for treatment will invalidate the claim except in the case of Accident or acute medical emergency.

No reimbursements shall be allowed in case the Insured Person has not informed the Company before in-patient hospitalization in an Approved Hospital, unless agreed otherwise by the Company in writing prior to the request for reimbursement.

- 5. For reimbursement* of emergency/accidental hospitalization expenses incurred in a Non Approved Hospital, the following procedure should be followed:
 - Inform JLI within 24 hours of hospitalization
 - Pay the hospital expenses
 - Submit the following documents to JLI within 30 days of discharge from the hospital:
 - Complete Discharge Summary
 - Hospital Invoice
 - Doctors notes of treatment
 - Laboratory Reports
 - Details of medicine used during Hospitalization

Additional documents can be requested by Jubilee Life for approval for reimbursement. Approval or reimbursement will be given following the decision by Jubilee Life's Physician that emergency services availed at the Non-Approved Hospital were medically necessary.

- 6. A health card shall be issued to the policyholder after enrollment.
- 7. Insured persons must present their medical cards in order to obtain treatment on credit at the accredited panel of providers. Each insured person will also be required to complete and sign a daim form available at the service provider.

^{*}Settlement of claim will be made in line with the prevailing terms and conditions of this Document.

- 8. In case of a medical emergency, insured persons can reach us on the 24 hours' emergency lines.
- 9. An insured person on travel outside the country during short period business or holiday travel outside Pakistan (not exceeding 90 days in the aggregate during any one period of insurance) will be eligible for emergency medical benefits. All medical expenses will be on a reimbursement basis and will be within the Reasonable and Customary Charges for medical treatment of a standard type usually available in Pakistan.
- 10. This leaflet is for illustrative purposes only. You are advised to refer to the illustration before purchasing a plan and to the Terms and Conditions in the Policy Document for the details of the important features of the plan.
- 11. The plan will cease on the earlier of:
 - Death of Life Assured
 - Life Assured indulge in fraud clause
 - Date of termination of the policy or termination due to any of the standard policy conditions
 - Upon non-renewal of the plan within the grace period
 - Policy anniversary falling on or preceding the 61st birthday of the Life Assured.

Exclusions

This policy does not insure, and no benefits shall be paid for expenses resulting from all and any of the following Exclusions:

For In-Patient Hospitalization

- 1. Any Pre-Existing Conditions will not be covered under the Policy during the first Policy Year. For each subsequent Policy Year, the schedule of Pre-existing Conditions as mentioned above shall be followed.
- 2. Any Treatment (other than acute emergency or accidental hospitalization only) received in a 'Non-Approved Hospital' by the Insured Person. Use of 'Non-Approved Hospitals' and physicians who have not been authorized by the Company to provide treatment under this Policy will invalidate the Claim.
- 3. Any Treatment not recommended by a Physician licensed and approved by the Pakistan Medical and Dental Council or which is not Medically Necessary.
- 4. Routine physical check-ups, rest cures, services including immunization.
- 5. Treatment of mental illness, psychiatric & psychological disorders, self-inflicted injury, suicide, abuse of alcohol, drug addiction, nicotine/smoking addiction, any form of intoxication or substance abuse.
- 6. Supply or fitting of eye glasses, contact lenses, hearing aids, wheelchairs and medical appliances not required surgically.
- 7. Any Dental Treatment, X-rays, extractions or fillings unless necessitated due to Accidental Injury occurring and up to the extent of pain relief.
- 8. Cost of limbs of any other organ (prostheses) or any kind of supporting equipment for revival

- or correction of the function of the body.
- 9. Treatment of any refractive errors of the eyes including the cost of procedures such as 'Radial Keratotomy' and 'Excimer Laser'.
- 10. Procedures and Treatment for Obesity, weight reduction/enhancement.
- 11. Cosmetic/plastic surgery, unless medically necessitated due to injuries occurring while the Insured Person was covered.
- 12. Injury or illness while serving as a full-time member of a police or military unit including reservist service and treatment resulting from participation in war, riot, civil commotion or any illegal or immoral act.
- 13. Engaging in air travel, except when travelling in a licensed aircraft being operated by a licensed airline according to published schedules.
- 14. Any kind of inpatient treatment which could generally be done on an Outpatient basis or any Hospital Confinement primarily for diagnostic purposes, unless specifically authorized by the Company in writing.
- 15. Treatment or surgical operation for congenital defects or deformities, including physical and mental defects present from birth.
- 16. Pregnancy and complications thereof, childbirth (including surgical delivery), miscarriage, abortion and/or any related prenatal or postnatal care, circumcision etcetera.
- Treatment of infertility, impotency, sterilization & contraception including any complication relating hereto.
- 18. Treatment for injuries sustained as a result of participation by the Insured Person in any dangerous sport, pastime or competition, including but not restricted to riding, driving in any race or competition and engaging in professional and contact sports.
- 19. Any increase in the expenses incurred for the treatment on account of the Insured Person being admitted to a more expensive room than allowed by his daily room rent limit.
- 20. Outpatient Services.
- 21. Experimental or pioneering or advanced medical and surgical techniques not commonly available and elected by the Insured Person in lieu of treatment usually and customarily provided for the medical condition concerned in Pakistan, except with the Company's prior approval in writing.
- 22. Costs arising under any legislation which seeks to increase the cost of medical treatment and services actually received above charge levels which would be considered Reasonable and Customary Expenses in the absence of such legislation.
- 23. Costs arising out of any litigation or dispute between the Insured Person and any medical person or establishment from whom treatment has been sought or given, or any other costs not specifically related to the payment of the medical expenses covered by the Policy.

- 24. Second Opinions in respect of medical conditions which have already been diagnosed and/or treated at the date such Second Opinions are obtained, unless considered by the Company's medical advisers to be reasonable and necessary having regard to the medical facts and circumstances.
- 25. Sexually transmitted disease and any treatment or test in connection with Acquired Immune Deficiency Syndrome (AIDS) or any AIDS-related conditions or diseases.
- 26. Services or treatment in any home, spa, hydro-clinic, sanatorium or long-term care facility that is not a Hospital as defined.
- 27. Continuance of fees from a referring Physician after the date on which an Insured Person has been referred to another Physician or Specialist.
- 28. Costs or treatment after an annual renewal date (Due Date) arising from accident, illness or death occurs during the previous Period of Insurance except as hereinbefore defined.
- 29. Costs or benefits payable under any legislation or corresponding insurance cover relating to occupational death, injury, illness or disease. This Policy is not in lieu of and does not affect any requirement for coverage under the Workmen's Compensation Act.
- 30. Any treatment or expense in respect of persons more than 61 (Sixty-one) years old at the date of the onset of the event giving rise to a claim, unless agreed otherwise by the Company in writing prior to the inception of the Policy.
- 31. This Policy has a Waiting period of thirty (30) days, during which claims arising due to In-patient Hospitalization (apart from hospitalization due to Accident) will not be payable.

For Death Due to Any Cause

- 1. Suicide or attempt to suicide
- 2. Death in respect of persons more than 61 (Sixty-one) years old at the date of the onset of the event giving rise to a claim, unless agreed otherwise by the Company in writing prior to the inception of the Policy.
- 3. This Policy has a Waiting period of thirty (30) days, during which claims arising other than Accidental Death will not be payable.
- 4. Pre-Existing conditions will be covered after 90 days from date of issuance.

Disclaimers

- This product is underwritten by Jubilee Life. It is not guaranteed or insured by Soneri Bank Limited or its affiliates and is not a Soneri Bank Limited product.
- Jubilee Life Insurance is the underwriter and provider of this Insurance Policy and shall be
 responsible for policy servicing and lodgment, processing, & settlement of claims to the insured
 customer(s) or beneficiary(ies).

- Our sales representative will provide a personalized illustration of benefits to you. Please refer
 to the notes in the illustration for detailed understanding of the various terms and conditions.
- Please refer to the Policy Documents for detailed understanding of the various terms and conditions.
- Not more than 1 (One) policy can be issued on a single CNIC number. Any request for insurance cover beyond this limit shall be declined and the Premium will be refunded to the Policyholder.
- Soneri Bank Limited is acting as a distributor on behalf of Jubilee Life Insurance 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.

Contact details

In case of any complaint or for further details, you may contact:

Jubilee Life Insurance Company Limited

Head Office: 74/1-A, Lalazar, M.T. Khan Road,

Karachi, 74000, Pakistan

Tel: (021) 32120201, 35205094

Fax: (021) 35610959

Email: info@jubileelife.com, complaints@jubileelife.com UAN: (021) 111 111 554, SMS: Your Query to 8554

Website: www.jubileelife.com

24/7 Phone Banking: 021-111-SONERI (766374)

Over 285 branches & 300+ ATMs | www.soneribank.com