

#52208

ERL MAINTENANCE SUPPORT SDN BHD

(Company No. 498574-T)



HUMAN RESOURCE DEPARTMENT

**MEDICAL, HOSPITALISATION, INSURANCE AND MEDICAL
SURVEILLANCE PROCEDURE**

Ref. No. G00.OMH.M11740.ZP.0001.G

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Release

| | | | | |
|------------------|------------------------------|--------------------------------------|----------------------|------------------|
| Released: | Thomas Baake | Chief Executive Officer | 02.08.18 | Th. Baake |
| Checked: | James L. Boudville | Operations | 11.7.18 | JMB |
| Checked: | Norhandee Nordin | Transportation | 11.07.18 | NH |
| Checked: | Omar Zakir | Operation Control Centre | 11.07.18 | OZ |
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| Checked: | Jayarajah Savarimuthu | Rolling Stock & Engineering | 19.07.18 | JS |
| Checked: | Muhamad Dzulfaqar Yusoff | Project & Engineering | 26/7/18 | DZ |
| Checked: | Norazman Abu Hassan | Rolling Stock | 31/7/18 | NAH |
| Checked: | Anthony Arokianathan | Wayside | 1/8/18 | AA |
| Checked: | Aziz Hashim | Signalling | ^A 26/7/18 | AH 27/7/18 |
| Checked: | Noel Devan Sawnthara Pandian | Electrification | 26/7/18 | ND |
| Checked: | Abdul Halim Baharom | Infrastructure | 31/7/18 | AHB |
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| Checked: | Gan Lee Hong | Procurement | 19.07.18 | GLH |
| Checked: | David Thiagarajan | Quality, Environment & Documentation | 13/7/18 | DT |
| Checked: | Nor Hashimah Basri | Human Resource | 10/7/2018 | NHB |
| Author: | Azuraini / Suriani Farisa | Human Resource | 06.07.2018 | AF |
| | Name | Dept. | Date | Signature |

Amendments or additions to this procedure must be indicated with a vertical black line in the adjacent left margin.

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Change Record and Configuration Control

| | | | |
|-----------------|--------------|---|-------------|
| G | 06-July-2018 | Revision to reflect current policy, practices and processes | AZI/SUE |
| F | 10-Mar-2015 | Revision to reflect process and updates on other changes. | AID/SUE |
| E | 01-Oct-2009 | Revision as per vertical lines, update SIRIM logo and to reflect change as per E-MAS organization chart [ref. No. G00.OMH.M11110.BB.0005.J] | HAB |
| D | 30-Jan-2008 | Revision, Rearrangement & Merging of 2 procedures (I.e. Medical, Hospitalisation, Insurance and Medical Surveillance and Management of Terminal & Contagious Illness). | SUE/HAB |
| C | 03-Aug-2006 | Change in processes; total change in procedure i.e. only outlining overview of this procedure (details to be obtained from HRD Department) | SUE |
| B | 20-Jun-2005 | Document and tighten current adopted practice for GL, insurance, claims, panel clinics and medical surveillance. Incorporate similar items from Handbook and Compensation Package | SUE |
| A | 05-Jul-2002 | NEW | SUE/OHA |
| Revision | Date | Modification | Name |

| | | | | | |
|---|---------------------------------------|---|----|---|----------------|
| Planning Of Changes Reference For Revision: G00.OMH.M11740.ZP.0001.G | | | | | |
| Issues To Consider | Checked <i>(Please mark X)</i> | | | | Remarks |
| 1) Are there any negative impact? | YES | | NO | X | |
| 2) Will the integrity of QEMS be affected? | YES | | NO | X | |
| 3) Resources available? | YES | X | NO | | |
| 4) Allocation or relocation of responsibilities and authorities required? | YES | | NO | X | |

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1 Purpose

This procedure explains the policy and procedure within the Company and addressing related matters in regards to Medical, Hospitalisation, Insurance and Medical Surveillance.

Where necessary, this document is to be read together with any other related procedures stated in the Company Procedure Manual¹.

2 Scope, Distribution & Access

This procedure covers matters relating to outpatient [i.e. clinical and specialist] and group insurance [covering hospitalisation, personal accident and term life insurance], dental, optical, medical surveillance and examination, light duty and medical boarded out. The procedure also provides a guideline on the claims process, where applicable. The information provided in this procedure are general and not every conditions are stipulated in this procedure. As such, employees are advised to contact HRD personnel for details and clarifications.

This procedure is made available via Electronic Documentation Management System [EDMS] and access is given to all E-MAS employees; while distribution and access of Appendix 1: Management of Terminal and Contagious Illness¹ is limited to Chief Executive Officer [CEO], Head of Departments [HOD] and HRD only. Access may be given to executives/supervisors upon request of the respective HOD and approval of HRD-HOD.

Additionally, the following documents should be referred i.e.:

- Medical Outpatient General Guidelines¹ : provides an overview on outpatient general practitioner and outpatient specialist, reimbursement claim, exclusion and limitation. It also provides the guide to log into Third Party Administrator [TPA] to check on benefit utilisations
- Group Hospitalisation and Surgical [GHS] General Guidelines¹ : provides the types of benefits, process of admission and exclusion
- HRD Terms and Definitions²
- The employee's respective Compensation and Benefits Package¹

Employees under contract employment [temporary, fixed term, etc.] are advised to refer to specific terms and conditions as stated in the Offer Letter. The general conditions may be referred to in this procedure.

3 Abbreviation and Definition

Refer to HRD Terms and Definitions¹:

4 Employee With Less or Equal to 3 Months of Service [Newly Joined Employees]

A newly joined employee shall only be able to claim for Outpatient, Dental and Optical **after** completion of three [3] months of service. When seeking for outpatient treatment, he must seek from Panel Clinics. Before completion of his 3 months of services, he must pay upfront and to request for an official receipt. After completing their three [3] months of service only then he may claim for reimbursement using the Personnel Claim Form¹.

¹ Refer to Appendix 1 for information on referred document

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5 Appointment of Third Party Administrator [TPA] for Medical [Outpatient] and Hospitalisation and Surgical [Inpatient]

HRD shall review the appointment of the TPA and insurer for the above on a yearly basis. Appointment of this shall be at the Company's discretion.

5.1 Appointment of Clinics and Hospitals [Outpatient and Inpatient]

HRD shall review the services of existing appointment of clinics and hospitals [provided by the TPA and insurer] from time to time. Please note that appointment or removal of clinics/hospitals from the panel is at the sole discretion of the Company. Lists comprising of the following will be updated by HRD i.e.:

- Panel Clinics for outpatient treatment¹
- Panel Clinics for specialist treatment¹
- Panel Hospitals¹

Employees must seek treatment for outpatient and inpatient from these panel of clinics and hospitals. Expenses for such visits shall be deducted from the employees' entitlement accordingly.

6 Entitlement

An employee's entitlement for Outpatient, Dental, Optical and Group Insurance coverage shall be :

- As stipulated in each employee's Compensation and Benefits Package¹. Employees are advised to refer to their respective Compensation and Benefits Package for details of their entitlement.
- Prorated according to the employee's length of employment in a particular calendar year [01st January – 31st December]. The entitlement amount is non cumulative and as such it cannot be carried forward to the following year.
- In cases where an employee and his spouse are employees of the Company, their entitlement will be maintained separately. However, for their unmarried children's outpatient and dental utilization/expenses will be maintained under one [1] employee entitlement only.

7 Seeking Outpatient Treatments from General Practitioner

7.1 TPA Card

A TPA medical card are provided by the Company to employee and their dependants to seek treatment at panel clinics [general practitioners] for outpatient treatment only.

An employee/his dependant[s] is required to present his medical card to the panel clinics when seeking outpatient treatment.

- Upon discharge, employee is required to collect the medical card together with the receipt for the medical treatment [cashless].
- An employee may be required to pay the medical treatment bills due to some circumstances [e.g.: System Offline, etc].

To make claims, please refer to clause 13 in this procedure on "Claiming for Outpatient, Dental and Optical".

¹ Refer to Appendix 1 for information on referred document

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7.2 TPA Medical Card

For any lost, misplaced and torn/damaged of the card, a replacement charge by TPA of RM10.00 for loss of the card shall be imposed on the employee concerned. A replacement card will only be re-issued to the employee upon receiving the proof of payment from the employee. The payment of replacement charge is to be made to FIN.

For new hire, the medical card will only be distributed to the employee once they have completed their three [3] months of services.

Upon resignation, termination, dismissals or retirement, the employee must return the TPA Medical Card to HRD. The employee shall be required to pay or the amount shall be deducted from their last month pay if the card is lost.

8 Seeking Outpatient Treatments from Specialist

If an employee/his dependants need specialist treatment [even when they are outstation], the employee concerned/his dependants must first consult a Company panel doctor [if one is not available, to consult a registered medical practitioner or Government medical officer]. The panel doctor may then refer the employee/his dependants to a specialist by providing a Referral Letter. The employee should make an appointment with the doctor [specialist] from any of the Panel Clinics for Specialist Treatment¹ of which he plan to seek specialist treatment.

For issuance of Guarantee Letter [GL], all information i.e. specialist name/hospital name, appointment date and time, together with the Referral Letter must be submitted to HRD. GL can also be obtained during non-working hours or for immediate/urgent cases by the employee themselves contacting TPA directly [the contact number is on the respective medical cards] and providing the TPA the same information as normally provided for GL request.

8.1 Follow up Outpatient Treatments from Specialist

For such follow up treatments, the employee must submit a copy of the appointment card at least two [2] working days from the date of appointment to HRD.

9 Seeking Outpatient Treatment [General Practitioner and Specialist] from Non Panel

In case of an emergency where the services from the panel of clinics are not available, an employee/his dependants may seek outpatient treatment from general practitioner and specialist from any registered medical practitioner or Government medical officer [not medical assistant]. On such occasion, the employee will be required to pay for the medical treatment bills [adequate and valid justifications will be required when making claims]. Approval of such claims is at the discretion of the Company.

10 Exclusions/Non Coverage for Outpatient Treatment

The clinical benefits do not cover medical expenses arising from the following:

- i. Self inflicted injury or illness or disease caused by misconduct
- ii. Medical or surgical appliances including hearing aids
- iii. Pregnancy check up or illnesses related to pregnancy, post natal/delivery [confinement], miscarriage, abortion, pap smear,
- iv. Psychological or mental cases

¹ Refer to Appendix 1 for information on referred document

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- v. Carelessness or indiscretion of the employee
- vi. Participating in or attending any hazardous sports, pursuit or pastime
- vii. Attempted suicide
- viii. Performance of any unlawful act or exposure to unjustifiable hazards except when endeavouring to save human life.
- ix. Provoked assault
- x. Drugs not medically prescribed
- xi. Corrective surgery for cosmetic effect
- xii. Non-medical items such as :
 - a) lotion, shampoo, soap etc unless medically required for health reason[s] and prescribed by panel doctor.
 - b) wheelchair, neck guard and other accessories.
- i. Any types of medical check-ups and test [including blood test] unless medically required and referred to by panel doctor.

11 Dental

An employee and his dependants are entitled to dental care, which is confined to filling, extraction [including the cost if it involves surgery and x-ray], scaling and polishing only. As such, the Company will not cover any dental expenses, which includes crowning, root canal, beautification, orthodontic treatment, etc [including the costs if it involves surgery and x-ray] To make claims, please refer to clause 13 on "Claiming for Outpatient, Dental and Optical".

12 Optical

This benefit is applicable for employees only [not extended to the employees' dependants] who require **optical care [see note on optical care below]** due to blurred vision as certified by the doctor and/or registered optometrist. This shall also include for the purchase of Powered contact lenses [non-coloured]. An employee may claim for their optical entitlement once after every completed twelve [12] months of their last optical claim.

There are cases where an employee may claim for only :

- i. Replacement of frame without glasses
- ii. Replacement of glasses without frame

In these instances, the claim will be allowed within the entitlement balance once within the 12 months of their last claim [with condition his entitlement is still available].

Note :

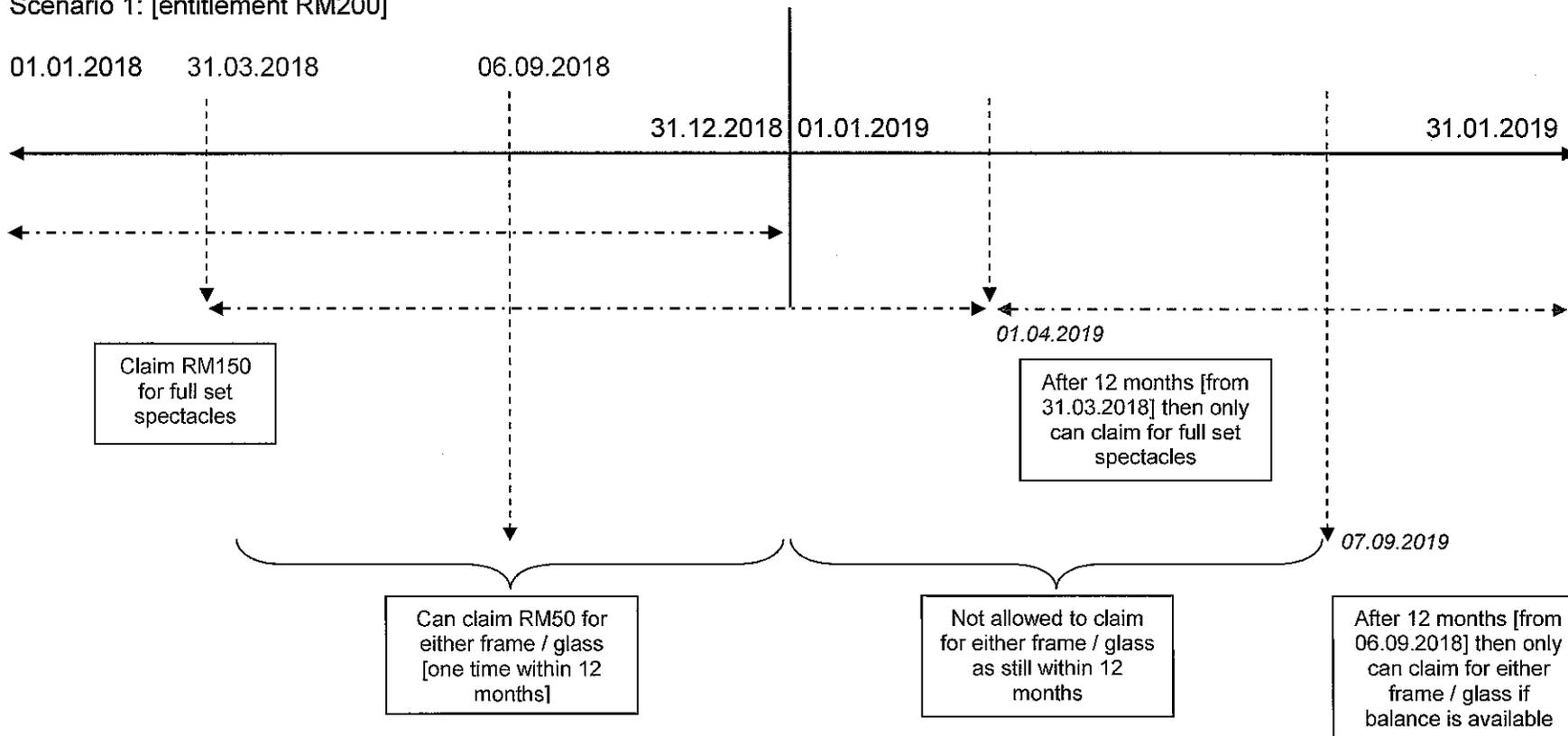
- *Definition of spectacles: An optical instrument consisting of a pair of lenses fixed in a frame for correcting defective vision.*
- *Definition of optical care: A spectacle or contact lenses in which they are worn to assist and to obviate some defects in the organs of vision*

To make claims, please refer to clause 13 on "Claiming for Outpatient, Dental and Optical".

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Example on claim duration:

Scenario 1: [entitlement RM200]



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12.1 Exclusions/Non Coverage for Optical

The Company will not cover any expenses related to purchase of the following:

- i. Coloured contact lenses
- ii. Optical accessories [including any kind of sunglasses etc]
- iii. Solution and saline or any related item for the usage of optical instrument

13 Claiming for Outpatient, Dental and Optical

Claims process shall depend on the current process whether administered by E-MAS, TPA or insurer. Employees are advised to refer to the claim process stated below or HRD for details.

13.1 Under TPA

- i. All claims related to outpatient [General Practitioner & Specialist] may be done by completing the Outpatient Reimbursement Claims Form¹ [available at HRD] and must be supported with original receipts and other supporting documents. The Company at its discretion may reject any claims made by employees, which do not have supporting documents and original receipts.
- ii. Claims for reimbursement for outpatient [**non-panel** General Practitioner & Specialist] are also made via the above form enclosed with original receipts and other supporting documents. In addition, the employee must also justify his visits to the non-panel on the same form. The Company at its discretion may reject any claims made by employees who fails to provide justification for such visits to non-panel/hospitals.
- iii. Employees to ensure that the list of medications and costs are clearly indicated in the original receipts.
- iv. All claims [with all relevant original documents] should reach HRD before **15th of each month** for submission to TPA. Incomplete claims will be rejected. Claims received after 15th will be processed in the following month.

13.2 Under E-MAS

- i. Type of claims administered by E-MAS are as follows:
 - a) maternity/delivery expenses upon attaining 7th year of service [refer respective employee's Compensation and Benefit Package¹]
 - b) employee's Health Examination [refer to clause "Employee's Health Examination"]
 - c) dental and optical treatment
- ii. An employee needs to complete the Personnel Claim Form¹, supported with original receipts and other supporting documents. The Company at its discretion may reject any claims made by an employee, which do not have supporting documents and original receipts.
- iii. All claims should reach HRD by **10th of each month** for approval after the verification by HOD/IS. Late submission of claims i.e. **more than two [2] months** will not be entertained. For ladies who are intended to claim for item [a], the claim must be submitted within 2 weeks upon returning to work after maternity leave.
- iv. The amount for claim shall be reimbursed via payroll only upon verification and approval from the HOD and HRD. This shall be read together with finance procedure: Advance Request and Claim Management [ref.no.:G00.OMA.M11160.CD.1001.*.].

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14 Group Insurance Scheme

HRD shall review the appointment of group insurance insurer on a yearly basis. The appointment shall be at the Company's discretion.

The coverage for group insurance i.e. Group Hospitalisation and Surgical [GHS], Group Term Life [GTL] and Group Personal Accident [GPA] will be effective from date of join of each employee and ceases when an employee's Contract of Employment ends.

The group insurance coverage is contained within the terms and conditions [Group Health Plan Policy¹] set by the insurer; which is available at HRD. All insurance are on twenty-four [24] hours worldwide coverage basis. The Company reserves the right to select the underwriter [insurer] and the type of plan that will be put in place. In the event information in Company's documents contradict with the underwriter's insurance policy, the latter document prevails.

Each employee is responsible to know their own entitlement. Apart from referring to the employee's respective Compensation and Benefits Package¹, kindly refer to :

- GHS : Schedule of Benefit¹ for the respective grade
- Group Hospitalization and Surgical [GHS] : General Guideline¹
- E-MAS Portal [Human Resource Development: Employee Self Service] to retrieve for the respective Compensation and Benefits Package¹ and GHS : Schedule of Benefit¹.

The entitlement shall be prorated based on the duration of service of each employee. Examples are as follows:

- When an employee joins and resigns in the same year: On 3.1.2018 and resigns on 15.4.2018, the entitlement will be prorated based on the duration as above only
- When an existing employee resigns and his last day is on 27.8.2018, the entitlement will be prorated from 1.1.2018 until 27.8.2018

In the event the amount utilized exceeds the prorated entitlement, the employee shall reimburse to the excess amount to the Company.

If the employee requires further details or clarification with regards to any group insurance coverage, they are to always seek this information from HRD.

14.1 GHS

The employee is responsible to acquire details of his entitlement and insurer's terms and conditions before utilizing his GHS benefits. The Company will not accept ignorance to this information as an excuse.

The hospital admission process may defer from time to time in accordance to the insurer's practice; as per Company's appointment of underwriter. An employee may be required to make payment for deposits prior to the admission [as and when required by the hospitals], non-coverage item before discharge and/or after any post hospitalization treatment.

Kindly refer to the list of Panel Hospitals¹ and Group Health Plan Policy [Private and Confidential]¹ for the listed exclusions under the GHS

¹ Refer to Appendix 1 for information on referred document

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14.1.1 Letter of Undertaking

For GHS purposes, on the first day reporting for duty, the employees concerned shall be required to sign a Letter of Undertaking¹.

The employee shall undertake to pay the amount:

- i. Not covered or exceeding the entitlement [please refer to HRD for entitlement details] upon request by the Company.
- ii. Being the difference between the actual cost and expenses incurred by the employee as mentioned in the underwriters' policy and his respective entitlement.

Employees are advised to refer to HRD for further details or clarification.

14.1.2 Admission to Hospitals for Hospitalisation

Employee need to notify the hospital that the Company covers them under the appointed insurer and provide their identification number as a reference. The hospital will take the necessary actions for the Pre Admission Assessment form to be completed by the attending physician and returned to our appointed insurer. Then only the Guarantee Letter [GL] will be issued by the insurer and forwarded directly to the hospital.

In the event that the hospitalisation is due to an accident, the employee or next-of-kin may contact his head of department/immediate supervisor/HRD personnel to assist with the issuance of GL.

14.1.3 Post Hospitalisation Treatment [Follow up Treatment]

An employee may require a follow up treatment after his discharge from the hospital. The GL for the post hospitalisation treatment will normally be included in the GL during the Admission. The employee may refer to HRD to confirm on the GL.

14.1.4 Hospitalisation Overseas

An employee/his dependant who are travelling outside Malaysia [leisure or work], may seek for treatment at overseas in the event of:

- i. Medical services require due to emergency or accidental reason
- ii. Medical services not available locally [subject to approval from the Insurer's Medical Director]

If this happen, an employee/his dependant need to make payment in advance and claim for reimbursement [subject to the maximum limit stated in the Schedule Benefits¹]. In order to claim for reimbursement for the above situation, below documents are required:

- Doctor's report [English version]
- Original bill and receipt with complete details[English version]

Kindly observe the explanation as provided in the GHS General Guidelines: Group Hospitalisation & Surgical¹.

14.1.5 Hospitalisation at Government Hospitals

Employees/his dependants is encouraged to seek treatment/admission at government hospitals. In such cases, the employee concerned is to inform HRD via his HOD/IS of the admission for issuance of GL. The amount will be deducted from the employee's GHS entitlement.

¹ Refer to Appendix 1 for information on referred document

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There are some unavoidable cases, where the employee may be required to make payment prior to discharge.

Kindly refer to the Flowchart – Issuance of Guarantee Letter [GL] for Government Hospital¹.

14.1.6 Hospitalisation at Non-Panel Hospitals

This includes those not appointed by E-MAS or under Insurer's GHS list. In cases, where employees/his dependants are hospitalised at a non-panel hospital; depending on the insurer's terms and conditions the employee concerned may be requested to:

- i. Pay for the amount incurred in advance. He then must collect the Insurance Claim Form¹ [available from HRD] and forward them to his attending physician to enable the attending physician to complete the Insurance Claim Form. The concerned employee shall then submit to HRD the duly completed Insurance Claim Form and HRD will then initiate the necessary insurance claim.
- ii. Pay/bear the co-payment of 20% or at insurer's agreed percentage.

14.1.7 Utilisation of GHS Entitlement Reaching Maximum

In cases where the entitlement have:

- Reached its maximum – no GL will be issued or no claims is to be made by the concerned employee
- Reached 70% of the entitlement – no follow up GL will be issued. The employee concerned may, however, submit his claims [with receipts and supporting documents] but limited within his available entitlement.

14.2 GTL

The coverage is insured in respect of death [natural or illnesses only] and is governed by rules and regulations stipulated by the insurer's policy.

The policy provides for financial assistance in the event of death or total permanent disability. The policy is arranged between E-MAS and the insurer. Therefore, any claim of monies shall be made payable to E-MAS [with complete documentation]. This arrangement ensures claims will be settled with the least delay.

14.3 GPA

The coverage is insured for accidental bodily injury resulting in death or permanent/total disablement and is governed by rules and regulations stipulated by the insurer's policy¹.

The policy provides for financial payment in the event of accidental death or total permanent disability arising from any cause due to accidents. The policy is arranged by E-MAS and therefore any claim of monies shall be made payable to E-MAS [with complete documentation]. This arrangement ensures claims will be settled with the least delay.

15 Reimbursement to E-MAS for Non-Coverage of Outpatient and Inpatient

An employee shall be required to reimburse the amount to the Company if:

- i. He has exceeded his entitlement;
- ii. For non-reimbursable or non-coverage charges

¹ Refer to Appendix 1 for information on referred document

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In addition, if an employee is found intentionally abusing [misusing] his medical entitlement and/or medical leave [refer Leave Procedure¹], he shall be liable to undertake the cost of medical expenses incurred.

HRD shall forward a memo requesting for the amount to be reimbursed and/or for non-coverage for cases involving outpatient and inpatient :

- i. Cash payment to FIN before or on the deadlines stipulated; or
- ii. Salary deduction for minimum amount of RM50 per month for a maximum repayment period of 6 months. Staff to forward the completed Authorization to Credit Salary and/or Deduction from Salary¹ form to HRD.

In the event an employee do not make good the payment as any one of the payment mechanism above within the specified period of time:

- For outpatient cases, the full amount will be automatically deducted from the employee's salary.
- For GHS cases the Letter of Undertaking¹ signed by the employee will be enforced and the full amount will be automatically deducted from the employee's salary.

16 Insurance Nominee [Beneficiary]

Any claims received from insurer in the event of death or total permanent disability, shall be paid in lump sum to the nominees as stated in the Insurance Nominee [Beneficiary] available in Employee Personal Information Form¹.

The employee is advised to complete this form [attached with nominees Identity Card or Birth Certificates] and forward it to HRD. If there is future need for changes to an employee's existing Beneficiary and Schedule of Nominees, kindly complete new set of form to notify HRD of the changes.

In reference to nomination of beneficiary, the following situations are recommended:

- i. If married, nominate spouse and/or children
- ii. If single, nominate your parent

17 Medical Surveillance and Examination

17.1 Pre Employment - New Employees

All new employees are required to undergo a pre-employment medical examination by our appointed panel of doctor[s] before the issuance of a Letter of Appointment. The pre-employment medical examination shall include the following:

- i. Physical Examination
- ii. X-Ray
- iii. Colour Blindness Test
- iv. Urine Test [including drug testing]
- v. Blood Test

Results for the pre-employment medical examination is forwarded to HRD in a sealed envelope. The determination on whether the candidate is medically fit or not will be based on the findings and recommendations of the panel doctor.

¹ Refer to Appendix 1 for information on referred document

| | | | | | |
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The cost of all pre-employment medical examination will be borne by E-MAS. However, if the result is not favorable to E-MAS and/or requires further test/examination as advised by the panel doctor, the follow-up test/examination cost shall be borne by the candidate.

17.2 During Employment

Due to the nature of E-MAS operational requirements and practice of drug free environment, a continued medical surveillance will be required during employment as well. As such, employees may be requested to undergo a medical examination/test at a time, date and place determined by the Company.

17.2.1 Request

The request for medical check – up shall be made based on the following pre-conditions:

17.2.1.1 Management Request

Request can be made at any time by any one of the following:

- i. Respective HOD
- ii. Panel of Inquiry
- iii. Management
- iv. HRD

17.2.1.2 To ensure continuous safety and reliability of the service

This medical surveillance exercise covers the following target group of Operations and Maintenance personnel **who work on or near the main line track after every 2 years of service.** This exercise shall be conducted in the second half of the particular year.

| No | Position/Nature of Work | Remarks |
|----|--|---|
| 1 | Train Driver | |
| 2 | Station Supervisors | |
| 3 | All those who are appointed as Operation Chief | |
| 4 | Safety & Security Supervisors | May be extended to the HOD and other positions who regularly works on or near the main line track |
| 5 | Appointed Person In Charge Of Possession [PICOP] | |
| 6 | Departments under Maintenance - Techincians and Supervisors [depending on the requirements as mentioned in "remarks"] | - Applicable ONLY to those who works on or near the main line track or - Those who works on the overhead catenary line - Those who works on track vehicle lorry |
| 7 | Personnel who handles chemical and who are exposed to specific work condition [e.g. dust, oil mist etc.] | |

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| | |
|---|---|
| 8 | Others as may be identified by the HOD or SAS |
|---|---|

In addition to that, in accordance to the Occupational Safety and Health Regulation 2000 [Use and Standards of Exposure of Chemicals Hazardous to Health], Subregulation 27[3] – Health Surveillance Program, a yearly medical surveillance is also required for employees who are exposed to the:

- i. Oil Mist
- ii. Hazardous Chemical

The employee/s who are to undergo such medical surveillance will be informed to HRD by SAS. HRD shall also be updated by SAS if there is any change or new employees to undergo this medical surveillance.

The panel doctor shall provide the company with proof that the employee is fit for duty. However, if the panel doctor found that the employee is not fit to work, it may lead to frustration of the employee's employment contract as the employee is not able to fulfill his part of the contract i.e. to perform the job that he is hired for.

17.2.1.3 Other conditions Company requires medical examination

- i. Where an employee is absent from his normal duties for a month or more due to illness or accident, he will be required to undergo a medical examination to confirm that he is fit to perform his work responsibilities before assuming normal duties. This is to ensure full recovery of the employee and he would not contract the same illness within a few days after returning to work. Refer to HRD Procedure: Leave Administration¹ - Hospitalisation and Prolonged Illness Leave
- ii. Random drug and/or alcohol test will be conducted at any time it is necessary as determined by the company. If the medical check-up confirms that the employee is on drug and alcohol abuse, the Company shall initiate the necessary action as per HRD Procedure: Industrial Relations¹.
- iii. Once employee reaches the age of 50, he may be required by the HOD to undergo a medical examination once every twenty-four months [depending on the nature of duties].

The cost of the first medical examination as above shall be borne by E-MAS.

17.3 Process, Report and/or Findings

HOD together with HRD shall ensure that the employee attends the medical checkup at the assigned panel clinic/hospital.

The original medical examination report and any other relating correspondence would be marked **"Strictly Private and Confidential"**

E-MAS will receive the summary of employee's medical report i.e. Fit or Unfit for work. The determination on whether the employee is medically fit or otherwise and to continue with the employment shall be based on the findings and recommendation of the medical doctor. Based on the findings of the medical examination, a summary of the report is prepared and provided to the HOD and Management for their review and action if any.

¹ Refer to Appendix 1 for information on referred document

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17.4 Employee's Health Examination

It is the employee's responsibility to ensure that his health is well taken care as recommended and advised by the medical doctor. Ignorance not to take care of his own health shall not be taken as an excuse. An employee inability to be presence to perform his job that he has been hired may result to the frustration of his contract of employment.

An employee must forward a written request to HRD for a health/medical examination [normal/critical illnesses for employee only] to be conducted on himself [once every 12 months of service] by panel clinic.

The amount however is limited to RM400.00 per year and shall be deducted from the employees' medical outpatient entitlement. The employee is required to make payment in advance to the clinic and upon returning to work, to forward a reimbursement claim to HRD. However, should they still have any balance from the entitlement, they are not allowed to make second claim on the same year.

E-MAS [HRD] does not require the full health/medical report. However, the responsibility to submit the summary of the medical report lies with the respective employees for information without any obligation.

E-MAS is responsible to ensure safe and healthy work place for all employees; therefore it's prudent for employees to update HRD on his health status accordingly should there be any infectious type of sickness identified. Refer Clause "Exclusions/Non Coverage for Outpatient Treatment".

18 Light Duty

The Company has an obligation to meet under the O&M Contract with the owner, ERLSB. As such, hiring of an employee is required to be specific to the responsibilities within the relevant department's requirement. An employee is to discharge his job responsibilities accordingly within his job scope as hired.

In the event an employee is recommended for light duty and not able to perform his designated responsibilities as required, the Company may need to reconsider the employee's position due to:

- The Company has an obligation to perform as the required performance as set by ERLSB and may not be able to accept the light duty recommendation as there is no available position/job scope
- Unavailing manpower which,
 - o affect the relevant department's daily operational work
 - o will create additional cost due to overtime in covering the specified job

Light duty recommendation shall only be accepted for cases due to accidents and major operations. Recommendation for light duty by the attending doctor must be clearly justified i.e. to indicate the illness, duration of light duty, type of light duty where it specifies the type of work allowed/not allowed to be done by the employee during the light duty period [i.e. what an employee can and cannot do under his job scope]. The Company may not consider approving any light duty recommendation if the above details are not stated by the doctor.

Any recommendation for Light Duty must be submitted to HRD for CEO's approval together with the proposed employee's duty allocation and period of light duty via memo attaching with original supporting documents.

Any light duty period shall not **exceed two [2] months**. Upon completion of the Light Duty period, the employee shall submit a "**Fit-to-Work**" certificate from the attending doctor to HRD before resuming his normal duties. Any continuity of light duty may lead to frustration of

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contract [i.e. dismissal of employee] as the Company has an obligation in meeting the owner's requirement. The Company will also evaluate an employee with repetitive light duty on case to case basis. However, it may also lead to frustration of contract [i.e. dismissal of employee].

HOD may contact HRD to obtain verification from the relevant hospital, of the light duty given before any approval is given

Light duty shall not be interpreted as prolonged illness. The Company is not obliged to create a position for light duty if there is no requirement for such job/position. As such, those under light duty may be reassigned or given new position/responsibilities due to light duty recommended by the doctor. However, this will affect the employee's salary commensurate with the new position/responsibilities until they are medically fit to resume their normal duty.

An employee's condition on continuous Light Duty may lead to frustrations of his employment contract, where the employee concerned is unable to work/perform his actual assigned duties/responsibilities that he is hired for.

19 Medically Boarded Out

In case where the employee is unable to prove that he is fit to carry out his daily work/responsibilities, the Company reserves the right to retire the employee concerned on medical grounds. However, the following medical report would be required and/obtained i.e a medical report from SOCSO Medical Board or the Company's appointed panel clinic/hospital to substantiate that the employee is not fit to carry out his daily work/responsibilities; arising from any medical condition including, disablement due to accident and/or any other illness.

The decision whether to proceed with the boarding out or otherwise is at the CEO's discretion.

20 Others

Disciplinary action will be taken [as per stipulated in the HRD Procedure: Industrial Relation¹] against any employees found to abuse any of the benefits provided which also includes making false claims [e.g. purchase of sunglasses/coloured contact lenses, claiming optical benefit for spouse of dependant] and tampering with receipts.

21 Appendices

Note : Asterisk [*] refers to the latest version of the document

21.1 Appendix 1 : Reference Procedure / Manual / Form

| No | Reference Procedure / Manual / Form | Doc. No | Description |
|----|---|--------------------------|--|
| 1 | Advance Request and Claim Management | G00.OMA.M11160.CD.1001.* | Finance Procedure |
| 2 | Appendix 1: Management of Terminal and Contagious Illness | G00.OMH.M11740.ZP.0003.* | To provide guidance to all concerns on managing terminal and contagious diseases including HIV/AIDS at the workplace |
| 3 | Authorization to Credit Salary and/or Deduction from Salary [HRD0014] | G00.OMH.M11760.ZF.0001.* | Employee to authorise E-MAS for salary deduction |

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| No | Reference Procedure / Manual / Form | Doc. No | Description |
|----|---|--------------------------|--|
| 4 | Company Procedure Manual | G00.OMQ.M11150.CA.0004.* | General overview of Company Procedure Manual (CPM) |
| 5 | Compensation and Benefits Packages | G00.OMH.M11751.ZP.* | Listing the reference for all the Compensation and Benefits [C&B] Packages. Employees to refer to their respective C&B Package |
| 6 | Employee Handbook | G00.OMH.M11750.ZG.0001.* | Provide an introduction to the Company's backgrounds as well as the Company's rules and regulations, policies and procedures. |
| 7 | Employee Personal Information Form [HRD0012] | G00.OMH.M11700.ZF.0007.* | Employee to update/notify any changes on personal, family, statutory, emergency contact and insurance beneficiary details. |
| 8 | Flowchart – Issuance of Guarantee Letter [GL] for Government Hospital | G00.OMH.M11740.CC.1002.* | To provide guideline on the issuance of GL |
| 9 | GHS : Schedule of Benefit [Private and Confidential] | G00.OMH.M11740.ZA.* | GHS : Schedule of Benefit for each grades [Total 5 categories] |
| 10 | Group Health Plan Policy [Private and Confidential] | TRD.OMH.M11740.1003.* | Policy for GHS [including exclusions] |
| 11 | Group Hospitalisation and Surgical [GHS] : General Guideline | G00.OMH.M11740.ZG.1003.* | GHS General Guidelines: Group Hospitalisation & Surgical |
| 12 | Group Term Life Plan Policy [Private and Confidential] | TRD.OMH.M11740.1004.* | Policy for GTL and GPA |
| 13 | HRD Terms and Definitions | G00.OMH.M10580.ZG.1002.* | List of human resource used abbreviations and definitions |
| 14 | Industrial Relations Procedure | G00.OMH.M11780.ZP.0001.* | Industrial Relations Procedure |
| 15 | Insurance Claim Form | G00.OMH.M11740.ZF.1013.* | TPA Claim Form to be completed by employee when claiming for inpatient reimbursement |
| 16 | Letter of Undertaking | G00.OMH.M11740.ZF.0008.* | Employee undertakes to pay and made good any payment due to the Company arising from this hospitalisation [GHS] |
| 17 | Leave Administration Procedure | G00.OMH.M11750.ZP.0001.* | Leave Administration Procedure |

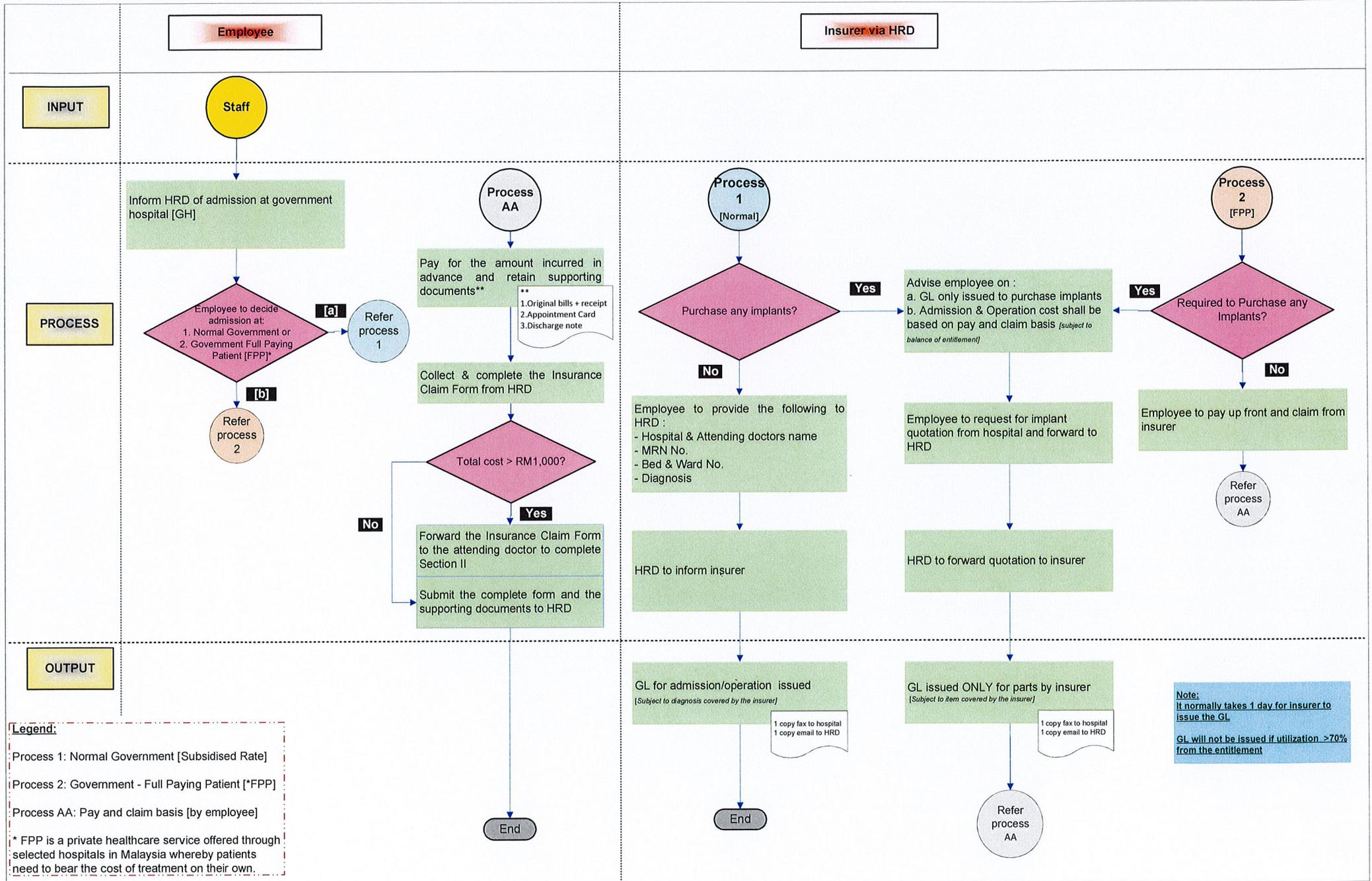
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| No | Reference Procedure / Manual / Form | Doc. No | Description |
|-----------|--|--------------------------|---|
| 18 | Medical Outpatient : General Guideline | G00.OMH.M11740.ZG.1004.* | Medical Outpatient General Guidelines: Medical Treatment |
| 19 | Outpatient Reimbursement Claims Form | G00.OMH.M11740.ZF.1012.* | TPA Claim Form to be completed by employee when claiming for outpatient reimbursement |
| 20 | Personnel Claim Form [HRD0028] | G00.OMH.M11745.ZF.0001.* | E-MAS Claim Form to be completed by employee when claiming for claims administered by E-MAS |
| 21 | Panel Clinic for Outpatient Treatment | G00.OMH.M11740.ZA.1022.* | List of panel clinics for seeking outpatient clinical treatment |
| 22 | Panel Clinic for Specialist Treatment | G00.OMH.M11740.ZA.1023.* | List of panel clinics for seeking outpatient specialist treatment |
| 23 | Panel Hospitals | G00.OMH.M11740.ZA.1024.* | List of panel hospitals for seeking inpatient treatment |

Flow Chart – Issuance of Guarantee Letter for Government Hospital



Legend:

- Process 1: Normal Government [Subsidised Rate]
- Process 2: Government - Full Paying Patient [*FPP]
- Process AA: Pay and claim basis [by employee]

* FPP is a private healthcare service offered through selected hospitals in Malaysia whereby patients need to bear the cost of treatment on their own.