

# PROTECTION FOR YOUR EMPLOYEES



AIA PUBLIC Takaful Bhd. is a member of PIDM.

The benefit(s) payable under eligible takaful certificates / products is (are) protected by Perbadanan Insurans Deposit Malaysia ("PIDM") up to limits. Please refer to PIDM's Takaful and Insurance Benefits Protection System ("TIPS") Brochure or contact AIA PUBLIC Takaful Bhd. or PIDM (visit [www.pidm.gov.my](http://www.pidm.gov.my)).



**AIA PUBLIC**  
**TAKAFUL**

Member of PIDM

# A-SME Flex-i

## PROTECTION FOR YOUR EMPLOYEES

### Protect Your Most Valuable Asset

#### Important Notice

Thank you for your interest in the Employee Benefits products offered by AIA PUBLIC Takaful Bhd. (AIA PUBLIC). Firstly, before participating in any Medical and Health Takaful (MHT) product, you should ensure that you understand the basic and important features of the product; and that all important information regarding the Certificate has been disclosed to you. Our Life Planner is available to help you with the following questions:

- What are the basic and salient features of Medical and Health Takaful in general?
- What are the basic and salient features of the product proposed to my company?
- Do I have all the information needed to make an informed decision?
- Am I satisfied that the product proposed best suits the needs of my company and as well as my company's resources?

Below is a checklist of items that can serve as a guide for you, to enable you to make an informed decision before participating this product.

#### Information Checklist

- You may refer to the Takaful info booklet on "Medical and Health Insurance" for more information on Medical and Health products.
- Refer to the Product Disclosure Sheet (PDS), Product Illustration and Master Certificate Contract for details of important product features.
- Find out whether there are other avenues (e.g. Takaful Operator's website) where details of the important features of the product can be obtained.
- Understand the benefits that are payable under the Takaful Certificate.
- Understand the significant medical or technical exclusions or restrictions applicable.
- Comprehend and note if there are any limitation of benefits (e.g. percentage (%) of costs covered by the Takaful Certificate, ceiling to total claim costs and deductible amounts).
- Note the contribution amount payable, the term of payment and the payment mode applicable and ascertain that the amount, the term and the mode are acceptable to you.
- Comprehend the nature and extent of AIA PUBLIC's right to review and revise the contribution payable. If you are agreeable, understand how and when notification of the revision will be made.
- Ascertain if there are any pre-existing conditions, specified illnesses and qualifying period and how long the relevant periods will be applicable for.
- Understand the possible conditions that would lead to the following scenarios on the Takaful Certificate renewal:
  - Takaful Certificate is renewed with a level contribution;
  - Takaful Certificate is renewed with an increased contribution; or
  - Takaful Certificate is not renewed.
- Understand the implications of switching Certificates from one Takaful Operator to another.
- Comprehend the nature and extent of AIA PUBLIC's right to repudiate liability in the event that you have failed to disclose relevant information that would have affected AIA PUBLIC's decision to accept or reject the risk, and on the contribution and terms to be applied to you.

# A-SME Flex-i

## PROTECTION FOR YOUR EMPLOYEES

Attracting, motivating and retaining employees are the challenges that any organisation encounters. Your employees are the driving force behind your company and ensuring that their health and welfare are well taken care of should be a top priority.

A-SME Flex-i is a one-stop source for all employee benefit needs, providing comprehensive protection and solutions to small and medium-sized enterprises. It offers companies a variety of healthcare cover options and benefits to suit different budgets, as well as the demands of various types of businesses. You can customise the plan according to your employee's protection needs with our wide range of benefits, including outpatient benefits, life, critical illness and many more.

Employees are your greatest asset. Looking after your employees is looking after your business.



## Our Solutions for SMEs



**BENEFITS  
RECOMMENDATION**

Create the right plan  
for your employees



**FLEXIBLE &  
CUSTOMISABLE**

Flexibility to pick and choose  
benefit options and limits



**COMPREHENSIVE  
PLAN**

More options to suit  
different needs and budgets



**DIGITALISED**

Fast and seamless  
experience

# A-SME Flex-i At A Glance

## BENEFITS RECOMMENDATION



- We provide recommendations and need-based solutions through fact finding.
- Enables you to benchmark with companies of the same or similar industries to create the right plan for your employees.
- Provides the right benefits package to help you attract and retain employees.

### 1 Offers solutions through fact finding



Manufacturing



Food & Beverages



Retail

### 2 Provides recommendation based on the same or similar industries to create the right plan for your employees

### 3 Choose from 3 recommended plans that is most suitable for your company

| BENEFITS                   | STARTER   | RECOMMENDED<br>STANDARD | BUSINESS   |
|----------------------------|-----------|-------------------------|------------|
|                            | Category  | Executives              | Executives |
| <b>Hospitalisation</b>     |           |                         |            |
| Room & Board               | 120       | 180                     | 250        |
| Annual Limit               | 40,000    | 80,000                  | 120,000    |
| <b>Outpatient</b>          |           |                         |            |
| General Practitioner Limit | 2,000     | 3,000                   | Unlimited  |
| Specialist Limit           | 2,000     | 3,000                   | Unlimited  |
| Total Contribution         | RM111,240 | RM142,740               | RM181,320  |

The above is for illustration purposes only and the total contribution is quoted based on 60 headcounts.

## FLEXIBLE & CUSTOMISABLE



- Customise your group health plan, select the medical and term coverage that suits your business needs and budget.
- Flexibility to choose from an extensive range of benefits and sum covered options for different category of employees.



## DEDUCTIBLE



- Deductible options to help you manage costs while providing health coverage relevant to your employees' needs.
- With deductible, you will also be able to manage any risk of unnecessary claims or misuse as your employees would also participate to manage the cost.

## GROUP MEDCARE



- Exclusive access to Personal Medical Case Management services, ensuring your employees to receive the best possible treatment and personalised on-going support throughout their medical journey when diagnosed with a serious or complex condition.
- Supported by a dedicated and personal medical team, led by physician case manager to reassess and manage your employee's medical condition.
- This is an add-on benefit administered by our service provider, Teladoc Health, Inc (Teladoc), a company that specialises in quality global medical management.

## CORPORATE AIA VITALITY



- Designed to build a healthier workforce for your employees and you.
- Corporate AIA Vitality is an add-on health programme that empowers employees with knowledge and tools to make healthier choices, and also motivates and rewards you and your employees to get healthier. Healthy employees means higher productivity.

# How A-SME Flex-i Makes Group Health Takaful Convenient

From considering and participating in the right plan to managing your certificate and claims, your journey with A-SME Flex-i made easier and more convenient. Here's how:



## EASY TO CUSTOMISE

We offer a **range of plans and optional benefits** to suit different budgets and needs.



## EASY TO PARTICIPATE

Our application process is **simple, fast and hassle-free**. Get your quote on-the-spot, confirm, sign and submit electronically.



## EASY TO MANAGE

Managing employee benefits is time-consuming. We provide **hassle-free experience** from onboarding to the claim process; offering advantages such as an **e-Medical card, claim reimbursement in 5 days**, and a variety of value-added services at your employee's finger tips.



## EASY TO CHOOSE

We provide **benefits recommendation** based on your industry to help you create the right plan for your employees.



# Medical Basic Benefits

## HOSPITAL & SURGICAL CARE

Care for your employees by providing them with a complete hospitalisation plan. Select from a wide range of benefits options to provide the most suitable plan for your employees. You also have the option to provide hospitalisation coverage for your employees' dependents.

|                         |  |
|-------------------------|--|
| <b>Room &amp; Board</b> | Choose from RM80 to RM600                                |
| <b>Overall Limit</b>    | Choose from RM20,000 to RM400,000                        |
| <b>Class Covered</b>    | Per Member / Per Family <sup>1</sup>                     |
| <b>Plan Type</b>        | Cashless / Reimbursement / Government Hospital (GH) only |
| <b>Deductible</b>       | RM0 / RM300  |

## Optional Medical Benefits

### OUTPATIENT CARE

Provide your employees and their dependents the convenience of accessing outpatient care at General Practitioner (GP) and Specialist Care (SP). Together with a hospitalisation plan, your employees will enjoy a comprehensive healthcare coverage.

| General Practitioner (GP) |   |
|---------------------------|---|
| <b>Overall Limit</b>      | Choose from RM1,500 to RM5,000 or unlimited |
| <b>Plan Type</b>          | Panel Clinics / Panel & Non Panel Clinics   |
| <b>Deductible</b>         | RM0 / RM5 / RM10                            |

| Specialist Care (SP) |  |
|----------------------|--|
| <b>Overall Limit</b> | Choose from RM1,000 to RM5,000 or unlimited  |
| <b>Plan Type</b>     | Cashless <sup>2</sup> / Reimbursement / Referral / Direct Access <sup>2</sup> / Direct PAED <sup>2</sup> |
| <b>Deductible</b>    | RM0 / RM15 / RM30  |

| Outpatient Care Limit                     |  |
|---|--|
| Standalone Limit / Combined GP & SP Limit |  |

<sup>1</sup> Per Family Limit is not available for Outpatient Medical Benefits.

<sup>2</sup> Cashless, Direct Access and Direct PAED is subject to minimum limit of RM2,000.

# Group Term Takaful Basic Benefits

## DEATH BENEFIT

The Death Benefit provides your employees with financial security in the event of an untimely death.

## TOTAL AND PERMANENT DISABILITY

If an employee becomes disabled as a result of an injury or sickness, the compensation from this benefit can help reduce the financial burden suffered.

## PARTIAL AND PERMANENT DISABILITY

Compensation according to the Scale of Indemnity as stated under the Takaful Certificate's Schedule of Benefits will be paid if an employee suffers a permanent partial disability as a result of sickness or accident.

## TERMINAL ILLNESS

This benefit will be paid if the Covered Member passes away within twelve (12) months of suffering from a Terminal Illness.

## REPATRIATION EXPENSES

Covers expenses for transportation of mortal remains back to the country of origin if the Covered Member passes away while traveling outside of Malaysia.

## Optional Group Term Takaful Benefit

### CRITICAL ILLNESS

A serious illness can be a financial burden. When diagnosed with a critical illness, the Covered Member will receive compensation which would help ease some of the financial burden.

- Non-Accelerated Critical Illness Rider
- Accelerated Critical Illness Rider

## Optional Benefits

### GROUP MEDCARE

Personal Medical Case Management (PMCM)\* is a value-added benefit that provides:

- Access to the world's leading specialist
- Medical support from diagnosis to recovery

\* This benefit is applicable to Group Hospitalisation and Surgical Care Plan only.

### CORPORATE AIA VITALITY

AIA Vitality is a science-backed health programme that rewards your employees' healthy choices. It empowers them with the knowledge, tools and motivation to achieve their health goals. Using the latest research in behavioural economics and incentives, it is designed to encourage long-term behavior changes in health. Organisation can leverage on AIA Vitality platform to drive employee health and engagement.

Terms & conditions apply

# Schedule of Benefits

| <b>Hospital &amp; Surgical Care - Basic</b>  |   |
|--|---|
| <b>Overall Limit (Per Certificate Year)</b>  | <b>RM20,000 to RM400,000</b><br>(in multiple of RM20,000) |
| <b>Deductible Amount</b>   | Zero Deductible or<br>RM300 per disability                |
| <b>1. In Hospital Care</b>   |   |
| 1.1 Hospital Room and Board  |   |
| i) Ordinary Room (up to max 180 days per disability)   | RM80 to RM600 (in multiple of RM10)                       |
| ii) Intensive Care Unit (up to max 30 days per disability)                                       | As charged  |
| 1.2 Hospital Supplies and Services   |   |
| 1.3 Surgical Fees  |   |
| 1.4 Anaesthetist Fees  | As charged  |
| 1.5 Operating Theatre Charges  |   |
| 1.6 In-Hospital Physician Visit<br>(maximum 2 visits per day, up to max 180 days per disability) |   |
| 1.7 Malaysian Government Hospital Daily Cash Allowance<br>(up to max 180 days per disability)    | RM200   |
| <b>2. Ambulatory Care</b>  |   |
| 2.1 Pre-Surgical/Medical Diagnostic Services (within 60 days)                                    |   |
| 2.2 Pre-Surgical/Medical Specialist Consultation (within 60 days)                                |   |
| 2.3 Second Surgical Opinion  |   |
| 2.4 Post-Hospitalisation Treatment<br>(up to max 60 days following discharge from hospital)      | As charged  |
| 2.5 Emergency Outpatient Accidental Treatment<br>(within 24 hours up to max 60 days)             |   |
| 2.6 Accidental Dental Treatment<br>(within 24 hours up to max 14 days)                           |   |
| 2.7 Day Care Procedure (Surgical/Medical)  |   |
| 2.8 Ambulance Fees   |   |
| 2.9 Emergency Outpatient Treatment<br>(maximum per Disability from 10.00pm to 8.00am)            | RM100   |
| 2.10 Medical Report Fee Reimbursement  | RM80  |
| 2.11 Outpatient Rehabilitation Therapy, Chemotherapy, Radiation<br>Therapy, Kidney Dialysis      | As charged  |
| <b>3. Compassionate Allowance (All Causes)</b>   | <b>RM10,000</b>   |

| <b>Outpatient GP &amp; Specialist - Optional</b>                         |  |
|--|--|
| Coverage Limit   | Standalone Limit or<br>Combined GP & SP Limit                        |
| <b>1. Outpatient General Practitioner Care (GP)</b>                      |  |
| 1.1 Overall limit per certificate year                                   | RM1,500 to RM5,000<br>(in multiple of RM500) or unlimited            |
| 1.2 Deductible Amount  | Zero Deductible or RM5 or RM10                                       |
| 1.3 GP Clinic Visit  | Cashless<br>(Panel Clinics or Panel &<br>Non-Panel Clinics)          |
| 1.4 Emergency Non-Panel GP Clinic Visit                                  |  |
| 1.5 Pap-Smear at Panel GP Clinic only (max once per certificate<br>year) | As charged   |
| 1.6 Overseas coverage  | Reimbursement Basis<br>RM40 per visit                                |
| <b>2. Outpatient Specialist Care</b>                                     |  |
| 2.1 Overall limit per certificate year                                   | RM1,000 to RM5,000<br>(in multiple of RM500) or unlimited            |
| 2.2 Deductible Amount  | Zero Deductible or RM15 or RM30                                      |
| 2.3 Specialist Visit   | Cashless/Reimbursement Basis<br>(Referral/Direct Access/Direct Paed) |
| 2.4 Outpatient Diagnostic Services                                       |  |
| 2.5 Overseas coverage  | Reimbursement Basis<br>RM150 per visit                               |

Notes: Cashless is not applicable for Non-Panel Clinics.  
Minimum limit for Cashless/Direct Access/Direct Pediatrician is RM2,000.

## **Group MedCare - Personal Medical Case Management - Optional**

A value-added benefit that provides Personal Medical Case Management services, which ensures that you receive the best possible treatment and personalised ongoing support throughout your medical journey when you are diagnosed with a serious medical condition. For more information, please refer to the Group MedCare brochure.

### Notes:

- Overall Limit – The maximum benefit payable within the certificate year regardless of number of disabilities.
- Please refer to the Master Certificate Contract for a detailed description of the benefits.
- Any follow-up or post hospitalisation treatments and visits will be on a reimbursement basis.

| Group Term Takaful - Basic   | Sum Covered (RM)   |         |         |         |         |         |
|--|--|---------|---------|---------|---------|---------|
|  | Option (A) : Fixed Sum Covered   |         |         |         |         |         |
|  | 500,000  | 450,000 | 400,000 | 350,000 | 300,000 | 250,000 |
| Selection of Basic Sum Covered   | 200,000  | 150,000 | 100,000 | 50,000  | 20,000  |         |
|  | Option (B) : Monthly Basic Salary (MBS)  |         |         |         |         |         |
|  | 60xMBS   | 48xMBS  | 42xMBS  | 36xMBS  | 30xMBS  |         |
|  | 24xMBS   | 18xMBS  | 12xMBS  | 6xMBS   |         |         |
| 1. Death (all causes**)  | 100% of Basic Sum Covered  |         |         |         |         |         |
| 2. Total and Permanent Disability (TPD) (all causes**)                               | 100% of Basic Sum Covered  |         |         |         |         |         |
| 3. Partial and Permanent Disability (PPD) (all causes** - as per Scale of Indemnity) | 100% of Basic Sum Covered  |         |         |         |         |         |
| 4. Repatriation Benefit  | Actual expenses incurred for the covered repatriation services or up to maximum of RM100,000, whichever is lower |         |         |         |         |         |
| 5. Terminal Illness  | 100% of Basic Sum Covered or up to maximum amount of RM100,000, whichever is lower                               |         |         |         |         |         |

\*\*Subject to Terms and Conditions of the Master Certificate Contract

## Percentage of Amount of Coverage

| Partial and Permanent Disability Scale of Indemnity  | Percentage of Amount of Coverage      |
|--|---------------------------------------|
| 1. Permanent Total Loss of sight of both eyes  | 100%                                  |
| 2. Permanent Total Loss of sight of one eye  | 100%                                  |
| 3. Loss of or the Permanent Total Loss of Use of two limbs   | 100%                                  |
| 4. Loss of or the Permanent Total Loss of Use of one limb  | 100%                                  |
| 5. Loss of speech and hearing  | 100%                                  |
| 6. Permanent and incurable insanity  | 100%                                  |
| 7. Permanent and incurable paralysis of all limbs  | 100%                                  |
| 8. Permanent Total Loss of hearing in<br>(a) both ears<br>(b) one ear  | 75%<br>25%                            |
| 9. Loss of speech  | 50%                                   |
| 10. Permanent Total Loss of the lens of one eye  | 50%                                   |
| 11. Loss of or the Permanent Total Loss of Use of four fingers and thumb of<br>(a) right hand<br>(b) left hand   | 70%<br>50%                            |
| 12. Loss of or the Permanent Total Loss of Use of four fingers of<br>(a) right hand<br>(b) left hand   | 40%<br>30%                            |
| 13. Loss of or the Permanent Total Loss of use of one thumb<br>(a) both right phalanges<br>(b) one right phalanx<br>(c) both left phalanges<br>(d) one left phalanx  | 30%<br>15%<br>20%<br>10%              |
| 14. Loss of or the Permanent Total Loss of Use of fingers<br>(a) three right phalanges<br>(b) two right phalanges<br>(c) one right phalanx<br>(d) three left phalanges<br>(e) two left phalanges<br>(f) one left phalanx | 10%<br>7.5%<br>5%<br>7.5%<br>5%<br>2% |
| 15. Loss of or the Permanent Total Loss of Use of toes<br>(a) all – both feet<br>(b) great – both phalanges<br>(c) great – one phalanx<br>(d) other than great, each toe   | 15%<br>5%<br>3%<br>1%                 |
| 16. Fractured leg or patella with established non-union  | 10%                                   |
| 17. Shortening of leg by at least 5cm  | 7.5%                                  |

### Notes:

1. Basic Sum Covered is subject to a maximum limit of RM4.0 million
2. No-Evidence Limit (NEL) is applicable only for headcount of 11-200 employees.
3. Exclusions: TPD/PPD: 5 -200 Employees subject to 12 months pre-existing conditions

Note: Where the Covered Member is left-handed, the percentages relating to the right arm shall apply to the left arm and vice versa.

| Group Term Takaful:<br>Critical Illness (CI) - Optional         | Sum Covered (RM)   |
|---|--|
| <b>Option (A): Non-Accelerated Critical Illness<sup>1</sup></b> | Lump Sum payment of 25% / 50% / 75% / 100% of the Basic Sum Covered upon diagnosis of critical illness |
| <b>Option (B): Accelerated Critical Illness<sup>2</sup></b>     |  |
| Critical Illness Covered  |  |
| 1. Kidney Failure   | 22. Parkinson's Disease  |
| 2. Heart Attack   | 23. Motor Neurone Disease  |
| 3. Stroke   | 24. Chronic Aplastic Anaemia   |
| 4. Cancer   | 25. Loss of Speech   |
| 5. Multiple Sclerosis   | 26. End-Stage Liver Failure  |
| 6. Primary Pulmonary Arterial Hypertension                      | 27. Encephalitis   |
| 7. Fulminant Viral Hepatitis                                    | 28. Bacterial Meningitis   |
| 8. Blindness - Permanent and Irreversible                       | 29. Brain Surgery  |
| 9. Coronary Artery By-Pass Surgery                              | 30. Angioplasty and Other Invasive Treatments for Coronary Artery Disease                              |
| 10. Major Organ / Bone Marrow Transplant                        | 31. Serious Coronary Artery Disease  |
| 11. Heart Valve Surgery   | 32. Cardiomyopathy   |
| 12. Surgery To Aorta  | 33. Loss of Independent Existence  |
| 13. Third Degree Burns  | 34. Paralysis of Limbs   |
| 14. Muscular Dystrophy  | 35. Major Head Trauma  |
| 15. HIV Infection Due To Blood Transfusion                      | 36. Medullary Cystic Disease   |
| 16. Coma  | 37. Full-blown AIDS  |
| 17. Deafness - Permanent and Irreversible                       | 38. Occupationally Acquired Human Immunodeficiency Virus (HIV) Infection                               |
| 18. End-Stage Lung Disease                                      | 39. Systemic Lupus Erythematosus with Severe Kidney Complications                                      |
| 19. Benign Brain Tumor  |  |
| 20. Alzheimer's Disease / Severe Dementia                       |  |
| 21. Terminal Illness  |  |

<sup>1</sup> A lump sum payment of not more than the percentage (%) selected shall be payable upon diagnosis of any of the covered Critical Illnesses and the **full amount** of Basic Sum Covered (100%) shall be payable upon death or total and permanent total disability (TPD), subject to a maximum amount of RM500,000.

<sup>2</sup> A lump sum payment of not more than the percentage selected shall be payable upon diagnosis of any of the covered Critical Illnesses and the **remaining percentage (%)** of the Basic Sum Covered shall be payable upon death or total and permanent disability (TPD), subject to a maximum amount of RM500,000.

#### Example:

Assuming the Basic Sum Covered of GTT is RM100,000 and the percentage selected for Critical Illness rider is 25%.

| Type of Benefit                  | Amount Payable Upon Diagnosis (RM) | Amount Payable Upon Death or TPD (RM) |
|----------------------------------|------------------------------------|---------------------------------------|
| Non-Accelerated Critical Illness | 25,000                             | 100,000                               |
| Accelerated Critical Illness     | 25,000                             | 75,000                                |

#### Medical or Group Term Takaful - AIA Vitality (AIAV)

Only one (1) membership can be purchased per employee. If an employee is already an existing AIA Vitality member, the employee's membership will be sponsored by the employer. The employee's membership year or any AIA Vitality Points accumulated will not be affected.

Kindly refer to AIA Vitality brochure for further information.

#### Notes:

- All amounts shown in the Schedule of Benefits above are in Ringgit Malaysia (RM) unless stated otherwise.
- We shall only reimburse reasonable and customary charges on eligible expenses.
- The information above is not exhaustive. It is recommended that you request a copy of the Product Disclosure Sheet to know more about this product. For a detailed explanation of its benefits, exclusions, terms and conditions, please refer to the Master Certificate Contract.

# Medical Benefit (Hospitalisation & Outpatient Care)

## Exclusions

No benefit shall be payable for any of the following services, products or conditions or injuries resulting from:

- Plastic/Cosmetic surgery or treatment including (but not limited to) for e.g. double eyelids, acne, keloids, scars, skin tags, gynaecomastia, diffused alopecia/hair loss, etc., or treatment of their complications.
- Care and treatment that is experimental, investigative or unproven services and not according to accepted professional standards and/or is not medically necessitated. This exclusion includes (but is not limited to) treatments such as:
  - Stem cell treatment, related workout and any complications arising thereafter.
  - Blood surety.
  - Hormone therapy and hormone replacement therapy except for surgically induced menopause.
  - Surgical treatment specifically for weight reduction or gain.
- Treatment for injuries sustained while committing a crime or felony, or while under the influence of alcohol, narcotics, or mind altering substance, or suicide, attempted suicide or intentionally self-inflicted injury while sane or insane.
- Any treatment, services and supplies for smoking cessation programs and the treatment for or arising from substance abuse such as alcohol, narcotics, etc.
- Private nursing care, custodial care in any setting or house calls engaged by Covered Member or services for rest cure provided by rest/nursing home purely for recuperative purposes.
- Mechanical or chemical contraceptive methods of birth control or treatment pertaining to infertility. Sexual dysfunction and tests or treatment related to impotence or sterilization.
- Investigation and treatment relating to pregnancy including childbirth, Ectopic Pregnancy and Vesicular Mole and all complications arising therefrom. However this exclusion does not apply to any miscarriage of below 28 weeks due to accidental causes under the Basic Certificate coverage but is subject to its limitations for such coverage. If however, a Covered Member has Maternity Benefit coverage, it shall be subject to its respective benefit limitations.
- Sex transformation surgery and sex hormone therapy related to such surgery.
- Circumcision unless medically necessary for treatment of a disease.
- Conditions related to sexually transmitted diseases, AIDS and AIDS Related Complex or its sequelae, and any communicable diseases requiring quarantine by law.
- Alternative therapies such as (but not limited to) Acupuncture, Acupressure, Chiropractic, Osteopathy, Reflexology, Bonesetting, Massage, Aroma Therapy, Herbal, Podiatric, Dietetic consultation and treatment, education services/therapies & Traditional Complimentary Medicine etc.
- Vitamins/Supplements, Herbal Cures, Anti Obesity/Weight Reducing Agents, Eye Lubricants and any over the counter purchases of supplements, medicines or outpatient prescribed and non prescribed medical supplies.
- Soaps, Shampoos, Cleansers, Vitamin Creams, Vitamin Ointment, Moisturizers, Lubricants, Anti-Aging, Fairness Treatment and any product with similar effect.
- Psychotic, mental or nervous disorders and behavioral conditions including any neurosis and their physiological or psychosomatic manifestations.
- Any treatment or assessment for congenital, hereditary or developmental ailments, deformities and any Disability or complications arising therefrom inclusive of but not restricted to such as dermoid cysts, childhood hernias/hydrocele (all hernia up to age of six is not covered), clubfoot, Ventricular Septal Defect (VSD), Atrial Septal Defect (ASD), Thalassemia, Squint, Haemangioma, Traditional Complimentary Medicine etc.

16. Diseases or disabilities of a newborn child contracted prior to or during birth or within the first 14 days thereafter.
17. Allergy testing - blood/topical including patch test.
18. Hospitalisation primarily for investigatory purposes, routine physical examinations, health check-ups, preventive treatments and diagnostic tests not incidental to treatment or diagnosis of a covered Disability.
19. Speech and Occupational therapy when not part of a rehabilitation program following hospitalisation due to trauma, unless it is a follow-up to an inpatient Disability and subject to its limitations.
20. Any corrective treatment for refractive errors inclusive of but not limited to the following such as Orthoptics, Visual stimulation, Radial Keratotomy, Lasik, Intralase, Xyoptics, phacik IOL implant or intra-ocular lenses replacement surgery.
21. All corrective glasses or contact lenses, except monofocal intraocular lenses in cataract surgery.
22. Dental conditions including:-
  - i) Dental care/treatment or oral surgery except as necessitated by Accidental Injuries. However to exclude the replacement of natural teeth, placement of denture and prosthetic services such as bridges & crowns of their replacement for Accidental Injury cases.
  - ii) Upper and lower jawbone surgery except for direct treatment of acute traumatic Injury or cancer.
  - iii) Orthognathic surgery, jaw alignment, or treatment for the temporomandibular joint.Otherwise an Covered Member must have Dental Benefit coverage, subject to its limitations.
23. Use or acquisition of all appliances (e.g. artificial limbs, hearing aids, aero chambers and equipment for nebulising, Continous positive airway pressure (CPAP), Continous ambulatory peritoneal dialysis(CAPD), orthopedic pads) and the rental charges of such devices except during hospital confinement under the Basic Certificate coverage but is subject to its limitation for such coverage.
24. Effects from radiation or contamination by radioactivity from any source.
25. War, riot, rebellions, insurrection, civil commotion, explosion of war weapons, terrorism related activity, active duty in any armed forces, direct participation in strikes, nuclear war, biological and chemical warfare/activities.
26. Services of a non-medical nature provided by a hospital such as television, telephone, fax, radio or similar facilities. Admission kit/pack and other ineligible non-medical items (except for registration fees incurred during hospitalisation only). Charges for these services must be paid by the Covered Member prior to discharge from hospital or daycare centre unless otherwise specified.
27. Out-Patient physical therapy or physiotherapy is not covered and cannot be referred at GP level. This service would only be covered when referred by a Specialist and treatment must be provided by a registered physiotherapist. A Covered Member must have Basic Certificate coverage, subject to its limitations.
28. Outpatient rehabilitation therapy, chemotherapy, radiation therapy, immunotherapy, photodynamic therapy, kidney dialysis and other selected medically necessary treatment protocols, unless a Covered Member has the Basic Certificate coverage, subject to its respective benefit limitations.
29. Preventive vaccinations except those stated under the guideline of Ministry of Health Malaysia that are applicable to eligible children only (subject to Out-Patient benefit limit, if any):-
30. Expenses incurred for donation of any body organ by a Covered Member and costs of acquisition of the organ including all costs incurred by the donor during organ transplant and its complications.
31. Investigation and treatment of sleep and snoring disorders.
32. Expenses incurred for contact lens, use of cosmetic topically/orally/surgical procedures and any complications arising there from.

### Limitations

1. No benefit shall be payable in respect of any period of hospital confinement unless the entire confinement and all the special hospital services rendered and operations performed, if any, had been recommended and approved by a legally qualified medical practitioner.
2. No benefit shall be payable if the hospital confinement upon which the claim is based is not related to the diagnosis and treatment of the condition for which hospital confinement is required by the attending medical practitioner.
3. No benefit is payable for charges, fees or expenses not mentioned in the Description of Benefits as per the Master Certificate Contract.

### Special Conditions

The following conditions will be applicable to all Covered Members and their dependents, if any:

- a) Waiting Period  
Eligibility for benefits starts thirty (30) days after the Covered Member has been included in the Takaful Certificate, except for a covered Accident occurring after the effective date of coverage.
- b) Specified Illnesses  
No benefits shall be payable for hospitalisation, surgery and/or charges incurred which are caused directly or indirectly by Specified Illnesses and its related complications. "Specified Illnesses" shall mean the following disabilities and its related complications, occurring within the first hundred twenty (120) days after the effective date of coverage:
  - i) Hypertension, diabetes mellitus and cardiovascular disease.
  - ii) All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system.
  - iii) All ear, nose (including sinuses) and throat conditions.
  - iv) Hernias, haemorrhoids, fistulae, hydrocoele, varicocele.
  - v) Endometriosis including disease of the reproduction system.
  - vi) Vertebro-spinal disorders (including disc) and knee conditions.

# Group Term Takaful

### Exclusions

#### Death Benefit

No benefits shall be payable on the account of the Covered Member, whether sane or insane, commits suicide within six (6) months from the effective date of coverage.

#### Total and Permanent Disability (All causes)

#### Partial and Permanent Disability (Natural causes)

#### Partial and Permanent Disability (Accidental causes)

Benefits under this clause shall not be made for the following:

- a) Suicide, self-inflicted injuries or any attempt thereat, while sane or insane;
- b) War, declared or undeclared, revolution or any warlike operations;
- c) Violation or attempted violation of the law or resistance to arrest;
- d) Entering, operating or servicing, riding in or on, ascending or descending from or with any aerial device, or conveyance except while the Covered Member is in an aircraft operated by a commercial passenger airline on a regular scheduled passenger trip over its established passenger route ; and
- e) Pre-existing conditions for which the Covered Member received medical treatment, diagnosis, consultation or prescribed drugs during the ninety (90) days preceding the effective date of coverage and such disability begins in the first twelve (12) months after the effective date of coverage.

#### Repatriation Benefit

No benefit shall be payable for:

- a) Any expenses incurred for services and supplies provided by a mortician or undertaker, including but not limited to the cost of casket, embalming and/or cremation.
- b) Any expenses for the transportation of the Covered Member's remain not approved and arranged by AIAS, or an authorised representative of AIAS.

#### Critical Illness

No benefit shall be payable to a Covered Member where, in our opinion, the Diagnosis of the Critical Illness of the Covered Member was caused directly or indirectly, wholly or partly, by Acquired Immuno-Deficiency Syndrome (AIDS) or any Human Immunodeficiency Virus (HIV).

### Terminal Illness

No benefit shall be payable for any of the following resulting from:

- a) attempted suicide while sane or insane and whether felonious or not, self-inflicted bodily injury, disorderly conduct on the part of the Covered Member, or upon the Covered Member deliberately exposing himself/herself to unnecessary danger, or
- b) Acquired Immune Deficiency Syndrome (AIDS), or
- c) the Covered Member having been engaged in hunting, mountaineering, aviation (except as a fare paying passenger on a commercial airline), naval, military or aeronautical service, or racing (other than foot racing) of any kind, or
- d) war, riot, rebellions, insurrection, civil commotion, explosion of war weapons, nuclear war, biological and chemical warfare/activities, or
- e) radiation or contamination by radioactivity from any source; or
- f) being under the influence of drugs, narcotics, or alcohol.

### Special Conditions

#### Critical Illness

- Only one payment shall be made for any Critical Illness benefit. (There shall be no second payment on the re-occurrence of the same Critical Illness or upon diagnosis of a different Critical Illness).
- No benefit shall be payable to the Covered Member who has at any time prior to the commencement of the Takaful Certificate incurred a Critical Illness or had sought medical advice for signs and symptoms that are present and related to the diagnosis of the Critical Illness covered.
- There will be a waiting period of thirty (30) days from the Covered Member's effective date of coverage with the exception of the following, which shall be subject to a waiting period of sixty (60) days. No benefits shall be payable if
  - i) Cancer.
  - ii) Heart Attack.
  - iii) Other Serious Coronary Artery Disease.
  - iv) Coronary Artery By-Pass Surgery.

#### Terminal Illness

- a) Only one payment would be made (i.e. no second payment on the re-occurrence of a Terminal Illness or on diagnosis of a different Terminal Illness).
- b) Upon approval for a Terminal Illness payment, the Covered Member's coverage under the Basic Certificate will become non-renewable.

No benefit will be payable to a Covered Member who has at any time prior to the commencement of this scheme suffered a Terminal Illness or sought medical advice for signs or symptoms that are present and related to the diagnosis of a Terminal Illness.

For a new Covered Member, there will be a waiting period of ninety (90) days from the Covered Member's effective date of coverage. There will be no Takaful cover and if contributions have been paid, such contributions will be refunded without profit in the following event:

- a) If the Covered Member is diagnosed of having a Terminal Illness within this waiting period; and/or
- b) The Covered Member sought medical advice for signs or symptoms that are present that are related to the diagnosis of the Terminal Illness within this waiting period.

However, where the Takaful Certificate is issued as a "Take-over Certificate" then the waiting period is not applicable.

"Take-over Certificate" means a Takaful Certificate which we have issued on similar or largely similar terms and conditions of a Takaful certificate/insurance policy which was previously immediately issued by another Takaful operator/insurance company.

In the case of a Take-over Certificate, if a Covered Member is diagnosed of having a Terminal Illness at the effective date of coverage, the benefit payable will be the benefit under the previous Takaful certificate/insurance policy or the benefit under this Takaful Certificate, whichever is higher, on condition we have secured the approved amount of coverage and a copy of the previous Takaful certificate/insurance policy.

- You are to ascertain that this product will best serve the needs of your company and company's resources and that you are agreeable to the contribution payable under the Takaful Certificate. The Takaful Certificate will be terminated if contributions are not paid within the sixty (60) days grace period from the due date.
- Please note that the exclusions, limitations, terms and conditions as stated in this brochure are not exhaustive. Please refer to the actual Master Certificate Contract for detailed benefits, exclusions, limitations, terms and conditions.
- You should ensure that important information regarding the Takaful Certificate is disclosed to you and that you understand the information disclosed. Where there is ambiguity, you should seek clarification from AIA PUBLIC.
- Please note that for any disability arising out of injury during employment, whereby the Covered Member has received benefits under Workmen's Compensation Act 1952, SOCSO or similar legislation, AIA PUBLIC shall bear no charges unless benefits received do not fully cover incurred charges, which are covered under the Takaful Certificate.
- Please note that if a Covered Member has received other medical insurance/Takaful coverage or government plans, AIA PUBLIC shall bear no charges unless benefits received do not fully cover incurred charges, which are covered under the Takaful Certificate.
- The information enclosed is accurate as at the date of printing.

# Frequently Asked Questions

## Q: Who is eligible for coverage?

A: All full time and actively at work employees (between the age of 16 to 64 years of age), in occupational classes 1 to 4 are eligible for Medical and Group Term Takaful coverage.

An employee's spouse (between the age of 16 to 64 years of age) and unmarried children (over fourteen (14) days but below nineteen (19) years of age or twenty three (23) years of age if still studying full time and not gainfully employed) are eligible for Medical (basic and optional) coverage only.

## Q: How do I enroll my company for the A-SME Flex-i?

A: It's simple, just speak to an AIA PUBLIC's representative and he/she will help to complete and submit your application through the electronic platform. Please submit the completed application together with the contribution payment. Coverage for your company will commence upon acceptance, subject to satisfactory evidence of Takaful permissibility.

## Q: Are there any other forms to be completed/requirements to be met?

A: For the Group Term Takaful Benefit, all employees are required to complete the Personal Health Declaration Form in any of the following circumstance(s):

- Number of employees equals to or is less than ten (10); or
- Employees with Sum Covered exceeding the No-Evidence Limit amount.

However, for the Medical Benefit, the completed Personal Health Declaration Form is required for companies with ten (10) employees or less.

## Q: How will the contribution rates be charged?

A: The contribution rates at certificate inception are based on the underlying claims experience and medical claims inflation of AIA PUBLIC's corporate employee benefits portfolio. The certificate is issued for the term of one (1) year and the contribution may be revised for subsequent renewals. The renewal terms will be issued thirty (30) days before the certificate expiry.

## Q: What happens when an employee resigns or when there are new employees?

A: The addition and deletion of employees can be done via AIA's corporate portal which is made available to you 24/7 at your fingertips. Similarly, the request can be done via email to [my.mbrupdate@aia.com](mailto:my.mbrupdate@aia.com) or contact your servicing agent. AIA PUBLIC will charge contribution on a pro-rated basis upon your certificate bill adjustment frequency.

## Q: Can I change/upgrade my employees' benefits?

A: Yes, change/upgrade of benefits can be done at Certificate Anniversary and is subject to our acceptance.

## Q: What do you mean by an emergency?

A: An emergency means treatment needed where immediate medical attention is required within twenty four (24) hours from the injury, illness or symptoms which are sudden and severe failing which, it will be life threatening (eg. accident and heart attack) or lead to significant deterioration of health.

## Q: Does the A-SME Flex-i provide overseas coverage?

A: Yes, all benefits are applicable worldwide for twenty-four (24) hours a day. However, if the Covered Member chooses to or is referred to be treated outside Malaysia by the attending doctor, benefits payable will be based on the reasonable and customary and medically necessary charges for such an equivalent to treatment in Malaysia excluding the cost of transport to the place of treatment.

For outpatient care, the Covered Members are covered up to max limit per visit of RM40 for General Practitioner (GP) and RM150 for Specialist Care (SP).

## Q: What is Deductible?

A: If a deductible amount of RM300 for hospitalisation is selected for example, the Covered Member/Master Certificate Owner will need to pay for the first RM300 incurred per disability, while we will take care of the eligible expenses balance. For example, if a Covered Member incurs a RM1,000 medical bill, the Covered Member/Master Certificate Owner would pay a RM300 deductible and the Takaful plan would pay for the remaining RM700.

## Q: What are the coverages under Government Hospital (GH Only) plan?

A: If "GH only" plan is selected, the Covered Member is entitled to maximum overall limit of RM20,000 per certificate year and the maximum cost of Room and Board that he/she can claim is RM80 per day. For Specialist Care (SP) benefit, the maximum overall limit is RM1,000 per certificate year.

## Q: What is the difference between "Per Member Limit" and "Per Family Limit"?

A: "Per Member Limit" is referring to the maximum amount of money AIA PUBLIC will pay for covered claims for each covered individual. This means, the employee and his/her dependents will each have a separate limit. In case of a claim by one member, the limit available for other members remain intact.

"Per Family Limit" means the employee and his/her dependents is covered under one single limit per certificate year. This means, the limit can be utilised by any or all members including the employee and his/her eligible spouse and children and not restricted to one individual as in the case of "Per Member Limit". Please note that "Per Family Limit" is applicable only for In Hospital Care Benefits.

## Q: What is the difference between "Standalone Limit" and "Combined GP & SP Limit"?

A: "Standalone Limit" means the Outpatient General Practitioner (GP) Care and Outpatient Specialist (SP) Care will have its own limit. For example, RM2,000 for GP and RM1,000 for SP. Whilst, "Combined GP & SP Limit" means it is a shared limit for GP and SP. The minimum requirement for a "Combined GP & SP Limit" is RM2,000. In this instance, if the "Combined GP & SP Limit" is RM2,000, the Covered Member can claim up to RM2,000 in full for GP or SP or combination of GP and SP.

## Q: How can I enroll my employees for the Group MedCare - Personal Medical Case Management benefit?

A: You need to take up the hospitalisation plan for your employees in order to enroll them for Group Medcare - Personal Medical Case Management.

## Q: How does the PMCM work?

A: Our service provider, Teladoc, will appoint a dedicated and personal medical case management team ("PMCM team"), led by Physician Case Manager, to reassess and manage your medical condition. The PMCM team will first help you to gather and review your existing medical information and test results. The PMCM team will also consult leading specialists around the world, across multiple disciplines, to reach the correct diagnosis for your medical condition, monitor your progress and support you throughout your medical journey until recovery. Please contact AIA PUBLIC Care Line at 1300 88 8933 to check your certificate eligibility.

# Important note to Prospective Certificate Owner

- You are to ascertain that this plan will best serve your needs and that you are agreeable to the contributions payable under this plan. If the contributions are not paid within the Grace Period of 30 days from the due date, the benefits under this plan may be suspended and / or terminated.
- If this Certificate is cancelled within the 15 days free look period, the full Contributions less medical expenses (if any) will be refunded. In the event of non-payment of your Contribution, your Certificate shall lapse after the grace period.
- Please note that the exclusions, limitations, terms and conditions as stated in this brochure are not exhaustive. Please refer to the actual Certificate for detailed benefits, exclusions, limitations, terms and conditions.
- You should ensure that important information regarding the Certificate is disclosed to you and that you understand the information disclosed. Where there is ambiguity, you should seek clarification from us.
- It may not be advantageous to switch from one Medical plan to another, as you may be subjected to new underwriting requirements for waiting period/exclusion of specified illness/pre-existing conditions under the new plan.
- Please note that for any disability arising out of injury during employment, whereby the Covered Member has received benefits under Workmen's Compensation Act 1952, SOCSO or similar legislation, we shall bear no charges unless benefits received do not fully cover incurred charges, which are covered under the Certificate.
- Please note that if a Covered Member has received other medical insurance / Takaful coverage or government Plans, we shall bear no charges unless benefits received do not fully cover incurred charges, which are covered under the Certificate.
- The information enclosed is accurate as at the date of printing.
- The certificate will not provide benefit amount from the respective funds on termination of the certificate. The Certificate will not provide benefit amount from the respective funds on maturity or expiry of the Certificate.
- Please note that contributions paid by business organisations are subject to the applicable tax imposed by the Government of Malaysia at the prevailing rate.

This brochure contains only a brief description of the product and is not exhaustive. It is recommended that you request for a copy of the Product Disclosure Sheet to know more about this product. For a detailed explanation of its benefits, exclusions, terms and conditions, please refer to the Master Certificate.

## About AIA PUBLIC

AIA PUBLIC Takaful Bhd. (AIA PUBLIC) is a jointly owned company by AIA Bhd. (AIA), Public Bank Berhad (PBB) and Public Islamic Bank Berhad (A wholly-owned subsidiary of PBB). Incorporated on 11 March 2011, AIA PUBLIC Takaful leverages on AIA and PBB Group's leadership positions as well as established infrastructure and distribution networks in the insurance and banking industries to drive growth and increase the Family Takaful penetration in the domestic market. AIA PUBLIC Takaful is committed to offering the right Shariah solutions to meet the different life stages needs of our customers.

# A-SME Flex-i

## PERLINDUNGAN UNTUK PEKERJA-PEKERJA ANDA

### Lindungilah aset anda yang paling berharga

#### Notis Penting

Terima kasih kerana berminat dengan produk Faedah Pekerja yang ditawarkan oleh AIA PUBLIC Takaful Bhd (AIA PUBLIC). Sebelum menyertai sebarang produk Takaful Perubatan dan Kesihatan (MHT), pastikan anda faham segala ciri-ciri asas dan penting tentang produk ini; dan semua maklumat penting mengenai Sijil telah didedahkan kepada anda. Perancang Hayat kami bersedia untuk membantu anda dengan soalan-soalan berikut:

- Apakah ciri-ciri asas dan utama yang mengenai Takaful Perubatan dan Kesihatan secara amnya?
- Apakah ciri-ciri asas dan utama yang mengenai produk yang dicadangkan kepada syarikat saya?
- Adakah saya mendapat segala maklumat yang diperlukan untuk membuat keputusan yang sebaiknya?
- Adakah saya berpuas hati bahawa produk yang dicadangkan adalah pilihan terbaik yang diperlukan oleh syarikat dan pekerja saya?

Berikut adalah senarai semakan butir-butir yang boleh dijadikan panduan kepada anda, untuk membolehkan anda membuat keputusan yang sebaiknya sebelum menyertai produk ini.

#### Senarai Semak Maklumat

- Anda boleh merujuk kepada buku kecil info Takaful mengenai 'Perlindungan Perubatan dan Kesihatan' untuk maklumat lanjut mengenai produk-produk Perubatan dan Kesihatan.
- Sila rujuk kepada Helaian Pendedahan Produk, Ilustrasi Jualan dan Kontrak Sijil Induk untuk butir-butir terperinci bagi ciri-ciri penting produk.
- Mengetahui sama ada terdapat saluran lain (contohnya laman web pihak Pengendali Takaful) di mana butir-butir mengenai ciri-ciri penting produk boleh diperolehi.
- Fahami segala faedah yang dibayar dibawah Sijil Takaful.
- Fahami pengecualian perubatan atau teknikal penting atau had yang berkenaan.
- Fahami dan mengerti sekiranya ada sebarang had faedah (contohnya peratus (%) kos yang dilindungi Sijil Takaful, had tertinggi jumlah kos tuntutan dan amaun deduktibel).
- Beri perhatian kepada amaun yang dibayar, tempoh pembayaran dan cara bayaran yang disediakan dan memastikan bahawa amaun, tempoh dan cara pembayaran yang boleh diterima oleh anda.
- Fahami keadaan bahawa AIA PUBLIC berhak untuk mengkaji dan mengubah caruman yang dibayar. Jika anda bersetuju, fahami bagaimana dan bila notis pemberitahuan tentang perubahan ini akan dibuat.
- Sila pastikan sekiranya terdapat sebarang keadaan pra-wujud, penyakit-penyakit tertentu, tempoh kelayakan dan berapa lama tempoh kelayakan yang berkaitan akan dikenakan.
- Fahami keadaan-keadaan yang mungkin akan membawa kepada senario-senario yang berikut pada pembaharuan Sijil Takaful:
  - Sijil Takaful yang diperbaharui dengan caruman yang separas;
  - Sijil Takaful yang diperbaharui dengan caruman tambahan; atau
  - Sijil tidak diperbaharui.
- Fahami implikasi yang akan terjadi sekiranya menukar Sijil dari satu Pengendali Takaful ke Pengendali Takaful yang lain.
- Sila fahami keadaan bahawa AIA PUBLIC berhak untuk menolak segala liabiliti sekiranya anda gagal memberi maklumat yang berkaitan yang mungkin mempengaruhi keputusan AIA PUBLIC untuk menerima atau menolak risiko, dan pada caruman dan terma-terma yang dikenakan kepada anda.

# A-SME Flex-i

## PERLINDUNGAN UNTUK PEKERJA-PEKERJA ANDA

Usaha mendapatkan, mendorong dan mengekalkan kakitangan membawa seribu satu cabaran bagi mana-mana organisasi. Kakitangan anda ibarat nadi penggerak yang memacu kejayaan syarikat. Menjaga kesihatan dan kesejahteraan mereka seharusnya menjadi antara perkara yang paling diutamakan.

A-SME Flex-i ialah penyelesaian serba lengkap yang memenuhi semua keperluan manfaat pekerja, menyediakan perlindungan dan penyelesaian komprehensif kepada perusahaan saiz kecil dan sederhana. Pelan ini menawarkan pelbagai pilihan perlindungan penjagaan kesihatan dan manfaat kepada syarikat perniagaan untuk memenuhi belanjawan berbeza. Anda boleh menyesuaikan pelan mengikut keperluan perlindungan kakitangan anda dengan rangkaian manfaat kami yang luas, termasuk manfaat pesakit luar, hayat, penyakit kritikal dan banyak lagi.

Kakitangan ialah aset paling berharga anda. Melindungi kakitangan anda bermakna melindungi perniagaan anda.



## Penyelesaian Kami Bagi PKS



**CADANGAN  
MANFAAT**

Merangka pelan yang sesuai untuk kakitangan anda



**FLEKSIBEL &  
BOLEH DISESUAIKAN**

Fleksibiliti untuk memilih dan menentukan pilihan dan had manfaat



**PELAN  
KOMPREHENSIF**

Lebih banyak pilihan untuk memenuhi keperluan dan peruntukan berbeza



**DIGITAL**

Perkhidmatan pantas dan lancar

# A-SME Flex-i Sepintas Lalu

## CADANGAN MANFAAT



- Kami menyediakan cadangan dan penyelesaian berasaskan keperluan anda selepas mengumpulkan maklumat yang berkenaan.
- Membolehkan anda membuat perbandingan dengan syarikat-syarikat dalam industri sama atau serupa untuk merangka pelan yang sesuai untuk kakitangan.
- Menyediakan pakej manfaat yang sesuai untuk membantu anda menarik dan mengekalkan kakitangan.

### 1 Menawarkan penyelesaian berasaskan maklumat yang dikumpulkan



Pengilangan



Makanan & Minuman



Peruncitan

### 2 Memberikan cadangan berasaskan industri sama atau serupa untuk merangka pelan yang sesuai untuk kakitangan anda

### 3 Pilih daripada 3 pelan disyorkan yang paling sesuai untuk syarikat anda

| MANFAAT                   | DISYORKAN |           |            |
|---------------------------|-----------|-----------|------------|
|                           | PERMULAAN | STANDARD  | PERNIAGAAN |
| Kategori                  | Eksekutif | Eksekutif | Eksekutif  |
| <b>Kemasukan Hospital</b> |           |           |            |
| Bilik & Makanan           | 120       | 180       | 250        |
| Had Tahunan               | 40,000    | 80,000    | 120,000    |
| <b>Pesakit Luar</b>       |           |           |            |
| Had Doktor Am             | 2,000     | 3,000     | Tanpa Had  |
| Had Doktor Pakar          | 2,000     | 3,000     | Tanpa Had  |
| Jumlah Caruman            | RM111,240 | RM142,740 | RM181,320  |

Maklumat di atas adalah untuk tujuan penerangan sahaja dan jumlah caruman yang disebut harga berasaskan 60 kakitangan.

## FLEKSIBEL & BOLEH DISESUAIKAN



- Sesuaikan pelan kesihatan kumpulan anda, pilih perlindungan perubatan dan bertempoh yang memenuhi keperluan dan peruntukan perniagaan anda.
- Fleksibiliti untuk memilih rangkaian manfaat yang luas dan pilihan jumlah dilindungi untuk kategori kakitangan berbeza.



## DEDUKTIBEL



- Pilihan deduktibel untuk membantu anda menguruskan kos sambil memberikan perlindungan kesihatan yang berkaitan mengikut keperluan kakitangan anda.
- Menerusi deduktibel, anda juga boleh menguruskan risiko tuntutan yang tidak perlu atau salah guna tuntutan kerana kakitangan anda juga terlibat dalam pengurusan kos.

## GROUP MEDCARE



- Capaian eksklusif kepada perkhidmatan Pengurusan Kes Perubatan Peribadi, memastikan kakitangan anda menerima rawatan terbaik dan sokongan peribadi berterusan sepanjang rawatan perubatan mereka apabila disahkan mengalami keadaan serius atau rumit.
- Disokong oleh pasukan perubatan berdedikasi dan terkhusus, yang diketahui oleh pengurus kes pakar perubatan untuk menilai semula dan menguruskan keadaan perubatan kakitangan anda.
- Manfaat ini merupakan manfaat tambahan yang ditadbir oleh penyedia perkhidmatan kami, Teladoc Health, Inc (Teladoc), syarikat yang mengkhusus dalam pengurusan perubatan global berkualiti.

## AIA VITALITY KORPORAT



- Direka untuk memupuk tenaga kerja lebih sihat demi manfaat anda dan kakitangan.
- AIA Vitality Korporat ialah program kesihatan tambahan yang memperkasakan kakitangan dengan ilmu dan alat untuk membuat pilihan lebih sihat dan juga mendorong dan memberi ganjaran kepada anda dan kakitangan anda untuk meningkatkan tahap kesihatan. Lebih sihat kakitangan, lebih tinggi produktiviti.

# Bagaimana A-SME Flex-i Memudahkan Urusan Takaful Kesihatan Kumpulan

Daripada mempertimbangkan dan menyertai pelan yang sesuai kepada menguruskan sijil dan tuntutan, perjalanan anda dengan A-SME Flex-i lebih mudah dan menyenangkan. Begini caranya:



## MUDAH DISESUAIKAN

Kami menawarkan **pelbagai pelan dan manfaat pilihan** untuk disesuaikan mengikut peruntukan dan keperluan berbeza.



## MUDAH DISERTAI

Proses permohonan kami **mudah, pantas dan tidak merumitkan**. Dapatkan sebut harga serta-merta, sahkan, tandatangan dan hantar secara elektronik.



## MUDAH DIURUSKAN

Pengurusan manfaat kakitangan memakan masa. Kami menyediakan **pengalaman mudah** daripada penyertaan kepada proses tuntutan; dengan menawarkan kelebihan seperti **e-Kad perubatan, pembayaran balik tuntutan dalam 5 hari**, dan pelbagai perkhidmatan nilai tambah di hujung jari pekerja anda.



## MUDAH UNTUK MEMILIH

Kami memberikan **cadangan manfaat** berasaskan industri anda untuk membantu anda merangka pelan yang sesuai bagi kakitangan anda.



# Manfaat Asas Perubatan

## PENJAGAAN HOSPITAL DAN PEMBEDAHAN

Berikan kemudahan mendapatkan rawatan pesakit luar daripada Doktor Am (GP) dan Doktor Pakar (SP) buat kakitangan dan tanggungan mereka. Bersama pelan kemasukan hospital, kakitangan anda akan menikmati perlindungan penjagaan kesihatan yang menyeluruh.

|                            |   |
|----------------------------|---|
| <b>Bilik &amp; Makanan</b> | Pilihan RM80 hingga RM600                                   |
| <b>Had Keseluruhan</b>     | Pilihan RM20,000 hingga RM400,000                           |
| <b>Kelas Dilindungi</b>    | Setiap Ahli / Setiap Keluarga <sup>1</sup>                  |
| <b>Jenis Pelan</b>         | Tanpa Tunai / Bayaran Balik / Hospital Kerajaan (GH) sahaja |
| <b>Deduktibel</b>          | RM0 / RM300   |

## Manfaat Perubatan Pilihan

### PENJAGAAN PESAKIT LUAR

Berikan kemudahan mendapatkan rawatan pesakit luar daripada Doktor Am (GP) dan Doktor Pakar (SP) buat kakitangan dan tanggungan mereka. Bersama pelan kemasukan hospital, kakitangan anda akan menikmati perlindungan penjagaan kesihatan yang menyeluruh.

| Doktor Am (GP)         |   |
|------------------------|---|
| <b>Had Keseluruhan</b> | Pilihan RM1,500 hingga RM5,000 atau tanpa had |
| <b>Jenis Pelan</b>     | Klinik Panel / Klinik Panel & Bukan Panel     |
| <b>Deduktibel</b>      | RM0 / RM5 / RM10                              |

| Doktor Pakar (SP)      |  |
|------------------------|--|
| <b>Had Keseluruhan</b> | Pilihan RM1,000 hingga RM5,000 atau tanpa had  |
| <b>Jenis Pelan</b>     | Tanpa Tunai <sup>2</sup> / Bayaran Balik / Rujukan / Kunjungan Terus <sup>2</sup> / Pakar Pediatrik Terus <sup>2</sup> |
| <b>Deduktibel</b>      | RM0 / RM15 / RM30  |

### Had Penjagaan Pesakit Luar

Had Berasingan / Had GP & SP Tergabung

<sup>1</sup> Had Setiap Keluarga bagi Manfaat Perubatan Pesakit Luar tidak disediakan.

<sup>2</sup> Tanpa Tunai, Kunjungan Terus dan Pakar Pediatrik Terus tertakluk kepada had minimum RM2,000.

# Manfaat Asas Takaful Bertempoh Kumpulan

## MANFAAT KEMATIAN

Manfaat Kematian memberikan jaminan kewangan kepada kakitangan sekiranya berlaku kematian awal.

## HILANG UPAYA MENYELURUH DAN KEKAL

Jika seseorang kakitangan hilang upaya disebabkan oleh kecederaan atau penyakit, pampasan daripada manfaat ini boleh mengurangkan beban kewangan yang dialami.

## HILANG UPAYA SEBAHAGIAN DAN KEKAL

Pampasan menurut Skala Indemniti seperti yang dinyatakan di bawah Jadual Manfaat Sijil Takaful akan dibayar jika kakitangan mengalami hilang upaya sebahagian kekal disebabkan oleh penyakit atau kemalangan.

## PENYAKIT MAUT

Manfaat ini akan dibayar jika Ahli Dilindungi meninggal dunia dalam masa dua belas (12) bulan selepas mengalami Penyakit Maut.

## PERBELANJAAN PENGHANTARAN PULANG

Melindungi kos perbelanjaan bagi pengangkutan jenazah pulang ke negara asal jika Ahli Dilindungi meninggal dunia semasa mengembara di luar Malaysia.

## Manfaat Takaful Bertempoh Kumpulan Pilihan

### PENYAKIT KRITIKAL

Penyakit serius boleh menimbulkan beban kewangan. Apabila disahkan menghidap penyakit kritikal, Ahli Dilindungi akan menerima pampasan yang boleh membantu meringankan beban kewangan.

- Rider Penyakit Kritikal Tidak Dipercepatkan
- Rider Penyakit Kritikal Dipercepatkan

## Manfaat Pilihan

### GROUP MEDCARE

Pengurusan Kes Perubatan Peribadi (PMCM)\* ialah manfaat nilai tambah yang menyediakan:

- Capaian kepada doktor pakar yang terkemuka di dunia
- Sokongan perubatan daripada peringkat diagnosis kepada pemulihan

\*Manfaat ini diguna pakai bagi Pelan Penghospitalan dan Penjagaan Pembedahan Kumpulan sahaja.

### AIA VITALITY KORPORAT

AIA Vitality ialah program kesihatan berasaskan sains yang memberi ganjaran kepada kakitangan anda yang membuat pilihan sihat. Program ini memperkasakan mereka dengan ilmu, alat dan dorongan untuk mencapai matlamat kesihatan masing-masing. Berasaskan kajian terbaharu dalam bidang ekonomi tingkah laku dan insentif, pelan ini dirangka untuk menggalakkan perubahan tingkah laku jangka panjang dalam kesihatan. Sesebuah organisasi boleh memanfaatkan platform AIA Vitality untuk meningkatkan penjagaan kesihatan dan penglibatan kakitangan.

Tertakluk kepada terma & syarat

# Jadual Manfaat

| Penjagaan Hospital & Pembedahan – Asas   |  |
|--|--|
| Had Keseluruhan (Setiap Tahun Sijil)   | <b>RM20,000 hingga RM400,000</b><br>(dalam gandaan RM20,000) |
| Jumlah Deduktibel  | Deduktibel Sifar atau RM300 setiap hilang upaya              |
| 1. Penjagaan Dalam Hospital  |  |
| 1.1 Bilik dan Makanan Hospital   |  |
| i) Bilik Biasa<br>(sehingga maks 180 hari setiap hilang upaya)                                     | RM80 hingga RM600<br>(dalam gandaan RM10)                    |
| ii) Unit Rawatan Rapi<br>(sehingga maks 30 hari setiap hilang upaya)                               | Mengikut Caj   |
| 1.2 Bekalan dan Perkhidmatan Hospital  |  |
| 1.3 Yuran Pembedahan   |  |
| 1.4 Yuran Pakar Bius   | Mengikut Caj   |
| 1.5 Caj Bilik Pembedahan   |  |
| 1.6 Kunjungan Doktor Di Hospital<br>(sehingga maks 180 hari setiap hilang upaya)                   |  |
| 1.7 Elaun Tunai Harian Hospital Kerajaan Malaysia<br>(sehingga maks 180 hari setiap hilang upaya)  | RM200  |
| 2. Penjagaan Ambulatori  |  |
| 2.1 Perkhidmatan Prapembedahan/Diagnostik Perubatan<br>(dalam masa 60 hari)                        |  |
| 2.2 Rundingan Prapembedahan/Pakar Perubatan<br>(dalam masa 60 hari)                                |  |
| 2.3 Pandangan Kedua Tentang Pembedahan   |  |
| 2.4 Rawatan Selepas Keluar Hospital<br>(sehingga maks 60 hari selepas keluar dari hospital)        | Mengikut Caj   |
| 2.5 Rawatan Kemalangan Pesakit Luar Kecemasan<br>(dalam masa 24 jam sehingga maks 14 hari)         |  |
| 2.6 Rawatan Pergigian Akibat Kemalangan<br>(dalam masa 24 jam sehingga maks 14 hari)               |  |
| 2.7 Prosedur Penjagaan Siang (Pembedahan/Perubatan)  |  |
| 2.8 Yuran Ambulans   |  |
| 2.9 Rawatan Pesakit Luar Kecemasan (maksimum setiap<br>Hilang upaya dari 10.00 mlm hingga 8.00 pg) | RM100  |
| 2.10 Bayaran Balik Yuran Laporan Perubatan   | RM80   |
| 2.11 Terapi Pemulihan Pesakit Luar, Kemoterapi, Terapi Radiasi,<br>Dialisis Buah Pinggang          | Mengikut Caj   |
| 3. Elaun Ehsan (Semua Sebab)   |  |
|  | <b>RM10,000</b>  |

#### Perhatian:

- Had Keseluruhan – Manfaat maksimum yang boleh dibayar dalam tahun sijil tanpa mengira bilangan hilang upaya.
- Sila rujuk kepada Kontrak Sijil Induk untuk keterangan terperinci manfaat.
- Sebarang rawatan dan kunjungan susulan atau selepas keluar hospital adalah atas dasar bayaran balik.

| Penjagaan Pesakit Luar GP & Doktor Pakar – Pilihan                       |  |
|--|--|
| Had Perlindungan   | Had Berasingan atau Had GP & SP Tergabung  |
| 1. Penjagaan Pesakit Luar Doktor Am (GP)                                 |  |
| 1.1 Had keseluruhan setiap tahun sijil                                   | RM1,500 hingga RM5,000 (dalam gandaan RM500) atau tidak terhad                         |
| 1.2 Jumlah Deduktibel  | Deduktibel Sifar atau RM5 atau RM10  |
| 1.3 Kunjungan ke Klinik GP   | Tanpa Tunai<br>(Klinik Panel atau Klinik Panel & Bukan Panel)                          |
| 1.4 Kunjungan Kecemasan ke Klinik GP Bukan Panel                         |  |
| 1.5 Pap-Smear di Klinik GP Panel sahaja (maks sekali setiap tahun sijil) | Mengikut Caj   |
| 1.6 Perlindungan luar negara (Atas Dasar Bayaran Balik)                  | RM40 setiap kunjungan  |
| 2. Penjagaan Pesakit Luar Doktor Pakar                                   |  |
| 2.1 Had keseluruhan setiap tahun sijil                                   | RM1,000 hingga RM5,000 (dalam gandaan RM500) atau tidak terhad                         |
| 2.2 Jumlah Deduktibel  | Deduktibel Sifar atau RM15 atau RM30   |
| 2.3 Kunjungan Doktor Pakar   | Tanpa Tunai / Atas Dasar Bayaran Balik (Rujukan/Kunjungan Terus/Pakar Pediatrik Terus) |
| 2.4 Perkhidmatan Diagnostik Pesakit Luar                                 |  |
| 2.5 Perlindungan luar negara   | Atas Dasar Pembayaran Balik<br>RM150 setiap kunjungan                                  |

Perhatian: Kemudahan tanpa tunai tidak disediakan bagi Klinik Bukan Panel.  
Had minimum bagi Tanpa Tunai/Kunjungan Terus/Pakar Pediatrik Terus ialah RM2,000.

#### Group MedCare – Pengurusan Kes Perubatan Peribadi – Pilihan

Manfaat nilai tambah yang menyediakan perkhidmatan Pengurusan Kes Perubatan Peribadi, untuk memastikan anda menerima rawatan yang terbaik dan sokongan peribadi secara berterusan sepanjang proses rawatan apabila anda disahkan menghidap masalah perubatan serius. Untuk maklumat lanjut, sila rujuk kepada brosur Group MedCare.

| Takaful Bertempoh Kumpulan – Asas   | Jumlah Dilindungi (RM)   |
|---|--|
| Pilihan Jumlah Dilindungi Asas  | <b>Pilihan (A) : Jumlah Dilindungi Tetap</b>   |
|   | 500,000 450,000 400,000 350,000 300,000 250,000<br>200,000 150,000 100,000 50,000 20,000   |
|   | <b>Pilihan (B) : Gaji Pokok Bulanan (MBS)</b>  |
|   | 60xMBS 48xMBS 42xMBS 36xMBS 30xMBS<br>24xMBS 18xMBS 12xMBS 6xMBS   |
| 1. Kematian (semua sebab**)   | 100% daripada Jumlah Dilindungi Asas   |
| 2. Hilang Upaya Menyeluruh dan Kekal (HUMK) (semua sebab**)                           | 100% daripada Jumlah Dilindungi Asas   |
| 3. Hilang Upaya Sebahagian dan Kekal (HUSK) (semua sebab** - menurut Skala Indemniti) | 100% daripada Jumlah Dilindungi Asas   |
| 4. Manfaat Penghantaran Pulang  | Perbelanjaan sebenar ditanggung bagi perkhidmatan penghantaran pulang yang dilindungi atau sehingga maksimum RM100,000, yang mana lebih rendah |
| 5. Penyakit Maut  | 100% daripada Jumlah Dilindungi Asas atau sehingga jumlah maksimum RM100,000, yang mana lebih rendah   |

\*\* Tertakluk kepada Terma dan Syarat Kontrak Sijil Induk.

## Peratus Jumlah Perlindungan

| Jadual Indemniti Hilang Upaya Sebahagian & Kekal   | Peratus Jumlah Perlindungan           |
|--|---------------------------------------|
| 1. Kehilangan penglihatan menyeluruh kekal kedua-dua belah mata  | 100%                                  |
| 2. Kehilangan penglihatan menyeluruh kekal sebelah mata  | 100%                                  |
| 3. Kehilangan atau Kehilangan Penggunaan Menyeluruh Kekal dua anggota  | 100%                                  |
| 4. Kehilangan atau Kehilangan Penggunaan Menyeluruh Kekal satu anggota   | 100%                                  |
| 5. Hilang upaya bertutur dan mendengar   | 100%                                  |
| 6. Tidak siaman secara kekal dan tidak boleh sembuh  | 100%                                  |
| 7. Lumpuh semua anggota secara kekal dan tidak boleh sembuh  | 100%                                  |
| 8. Kehilangan pendengaran menyeluruh kekal dalam<br>(a) kedua-dua telinga<br>(b) sebelah telinga   | 75%<br>25%                            |
| 9. Hilang upaya bertutur   | 50%                                   |
| 10. Kehilangan Menyeluruh Kekal kanta pada sebelah mata  | 50%                                   |
| 11. Kehilangan atau Hilang Penggunaan Menyeluruh empat jari dan ibu jari<br>(a) tangan kanan<br>(b) tangan kiri  | 70%<br>50%                            |
| 12. Kehilangan atau Hilang Penggunaan Menyeluruh Kekal Empat Jari<br>(a) tangan kanan<br>(b) tangan kiri   | 40%<br>30%                            |
| 13. Kehilangan atau Hilang Penggunaan Menyeluruh Kekal satu ibu jari<br>(a) kedua-dua ruas kanan<br>(b) satu ruas kanan<br>(c) kedua-dua ruas kiri<br>(d) satu ruas kiri                                 | 30%<br>15%<br>20%<br>10%              |
| 14. Kehilangan atau Hilang Penggunaan Menyeluruh Kekal jari tangan<br>(a) tiga ruas kanan<br>(b) dua ruas kanan<br>(c) satu ruas kanan<br>(d) tiga ruas kiri<br>(e) dua ruas kiri<br>(f) satu ruas kiri  | 10%<br>7.5%<br>5%<br>7.5%<br>5%<br>2% |
| 15. Kehilangan atau Hilang Penggunaan Menyeluruh Kekal jari kaki<br>(a) semua – kedua-dua kaki<br>(b) ibu jari – kedua-dua ruas<br>(c) ibu jari – satu ruas<br>(d) selain daripada ibu jari, setiap jari | 15%<br>5%<br>3%<br>1%                 |
| 16. Patah kaki atau patela yang tidak boleh bercantum  | 10%                                   |
| 17. Pemendekan kaki sekurang-kurangnya 5sm   | 7.5%                                  |

### Perhatian:

- Jumlah Dilindungi Asas tertakluk kepada had maksimum RM4.0 juta.
- Had Tanpa Bukti (NEL) diguna pakai hanya untuk 11-200 kakitangan.
- Pengecualian: HUMK/HUSK: 5-200 Kakitangan tertakluk kepada keadaan sedia ada 12 bulan.

Perhatian: Bagi Ahli Dilindungi yang kidal, peratus yang merujuk kepada tangan kanan akan diguna pakai untuk tangan kiri dan begitu juga sebaliknya.

| Takaful Bertempoh Kumpulan: Penyakit Kritikal (CI) – Pilihan          | Jumlah Dilindungi (RM)  |
|---|---|
| <b>Pilihan (A): Penyakit Kritikal Tidak Dipercepatkan<sup>1</sup></b> | Pembayaran Jumlah Sekali Gus 25% / 50% / 75% / 100% daripada Jumlah Dilindungi Asas selepas diagnosis penyakit kritikal |
| <b>Pilihan (B): Penyakit Kritikal Dipercepatkan<sup>2</sup></b>       |   |
| Penyakit Kritikal Yang Dilindungi                                     |   |
| 1. Kegagalan Buah Pinggang  | 22. Penyakit Parkinson  |
| 2. Serangan Jantung   | 23. Penyakit Neuron Motor   |
| 3. Strok  | 24. Anemia Aplastik Kronik  |
| 4. Kanser   | 25. Hilang Upaya Bertutur   |
| 5. Sklerosis Berbilang  | 26. Kegagalan Hati Peringkat Akhir  |
| 6. Hipertensi Arteri Plumonari Utama                                  | 27. Ensefalitis   |
| 7. Hepatitis Virus Fulminan   | 28. Meningitis Bakteria   |
| 8. Buta   | 29. Pembedahan Otak   |
| 9. Pembedahan Pintasan Arteri Koronari                                | 30. Angioplasti Dan Rawatan Invasif Lain Untuk Penyakit Arteri Koronari   |
| 10. Pemindahan Organ Utama / Sumsum Tulang                            | 31. Penyakit Arteri Koronari Serius   |
| 11. Pembedahan Injap Jantung  | 32. Kardiomiopati   |
| 12. Pembedahan Aorta  | 33. Hilang Upaya Berdikari  |
| 13. Luka Terbakar/Kelecuran Tahap Ketiga                              | 34. Lumpuh Anggota  |
| 14. Distrofi Otot   | 35. Trauma Kepala Serius  |
| 15. Jangkitan HIV Disebabkan Transfusi Darah                          | 36. Penyakit Sistik Medulari  |
| 16. Koma  | 37. Aids Gejala Penuh   |
| 17. Pekak   | 38. Jangkitan Virus Kurang Daya Tahan Penyakit (HIV) Disebabkan Pekerjaan   |
| 18. Penyakit Paru-Paru Peringkat Akhir                                | 39. Lupus Eritematosus Sistemik Dengan Kerumitan Buah Pinggang Teruk  |
| 19. Tumor Otak Benigna  |   |
| 20. Penyakit Alzheimer/Demensia Teruk                                 |   |
| 21. Penyakit Maut   |   |

<sup>1</sup> Pembayaran sekali gus tidak lebih daripada peratus (%) yang dipilih perlu dibayar selepas diagnosis mana-mana Penyakit Kritikal dilindungi dan **nilai penuh** Jumlah Dilindungi Asas (100%) akan dibayar apabila berlaku kematian dan hilang upaya menyeluruh dan kekal (HUMK), tertakluk kepada jumlah maksimum RM500,000.

<sup>2</sup> Pembayaran sekali gus tidak lebih daripada peratus yang dipilih perlu dibayar selepas diagnosis mana-mana Penyakit Kritikal dilindungi dan **baki peratus (%)** Jumlah Dilindungi Asas perlu dibayar apabila berlaku kematian atau hilang upaya menyeluruh kekal (HUMK), tertakluk kepada jumlah maksimum RM500,000.

Contoh:

Andaikan Jumlah Dilindungi Asas Takaful Bertempoh Kumpulan ialah RM100,000 dan peratus yang dipilih bagi rider Penyakit Kritikal ialah 25%.

| Jenis Manfaat                         | Jumlah Perlu Dibayar Selepas Diagnosis (RM) | Jumlah Perlu Dibayar Apabila Berlaku Kematian atau HUMK (RM) |
|---------------------------------------|---|--|
| Penyakit Kritikal Tidak Dipercepatkan | 25,000                                      | 100,000  |
| Penyakit Kritikal Dipercepatkan       | 25,000                                      | 75,000   |

#### Perubatan atau Takaful Bertempoh Kumpulan – AIA Vitality (AIAV)

Hanya satu (1) keahlian boleh dibeli bagi setiap kakitangan. Jika kakitangan sudah menjadi ahli AIA Vitality, keahlian kakitangan akan ditaja oleh majikan. Tahun keahlian kakitangan atau sebarang Mata AIA Vitality yang dikumpulkan tidak terjejas.

Sila rujuk kepada brosur AIA Vitality untuk maklumat lanjut.

Perhatian:

- Semua jumlah yang ditunjukkan pada Jadual Manfaat adalah dalam Ringgit Malaysia (RM) melainkan dinyatakan sebaliknya.
- Kami hanya membayar balik caj wajar dan munasabah bagi perbelanjaan layak.
- Maklumat di atas adalah tidak menyeluruh. Anda disyorkan untuk meminta salinan Helaian Pendedahan Produk untuk mendapatkan maklumat lanjut tentang produk ini. Untuk penjelasan terperinci tentang manfaat, pengecualian, terma dan syarat, sila rujuk kepada Kontrak Sijil Induk.

# Manfaat Perubatan (Kemasukan Hospital & Penjagaan Pesakit Luar)

## Pengecualian

Tiada manfaat akan dibayar bagi mana-mana daripada perkhidmatan, produk atau keadaan berikut atau kecederaan yang disebabkan oleh:

1. Pembedahan plastik/kosmetik atau rawatan termasuk (tetapi tidak terhad kepada) kelopak mata berganda, akne (jerawat batu), keloid, parut, kutil kulit, ginekomastia, alopecia tersebar / keguguran rambut dll atau rawatan bagi kerumitannya.
2. Rawatan dan penjagaan yang bersifat eksperimen, penyiasaan atau perkhidmatan tidak terbukti dan tidak menurut piawaian profesional yang diterima pakai dan/atau tidak perlu dari segi perubatan. Pengecualian termasuk (tetapi terhad kepada) rawatan seperti:
  - rawatan sel tunjang, rawatan berkaitan dan sebarang kerumitan yang timbul selepas itu,
  - jaminan darah,
  - terapi hormon dan terapi penggantian hormon kecuali menopause yang dicetus menerusi pembedahan.
  - rawatan pembedahan secara khusus untuk mengurangkan atau menambah berat badan.
3. Rawatan untuk kecederaan yang dialami semasa melakukan jenayah, feloni atau semasa berada di bawah pengaruh alkohol, narkotik atau bahan yang menjejaskan pertimbangan, atau bunuh diri, percubaan bunuh diri atau kecederaan yang disengajakan sama ada semasa siuman atau tidak siuman.
4. Sebarang rawatan, perkhidmatan dan bekalan untuk program pemberhentian merokok dan rawatan untuk atau yang timbul daripada salah guna bahan seperti, alkohol, narkotik dll.
5. Penjagaan kejururawatan peribadi, penjagaan kawalan dalam apa-apa persekitaran atau khidmat kunjungan ke rumah yang diambil oleh Ahli Dilindungi atau perkhidmatan untuk rawatan rehat yang disediakan oleh pusat rawatan / rumah penjagaan khususnya untuk tujuan pemulihan.
6. Kaedah perancang keluarga kontraseptif kimia atau mekanikal atau rawatan berkaitan dengan ketidaksuburan. Disfungsi seks dan ujian atau rawatan berkaitan dengan mati pucuk atau pemandulan.
7. Penyiasaan dan rawatan berkaitan kehamilan termasuk melahirkan anak, Kehamilan Ektopik dan Tahi Lalat Vesikel dan semua kerumitan yang timbul daripadanya. Bagaimanapun, pengecualian ini tidak diguna pakai bagi sebarang keguguran di bawah 28 minggu atas sebab kemalangan di bawah Sijil Asas tetapi tertakluk kepada had bagi perlindungan tersebut. Bagaimanapun, jika perlindungan Ahli Dilindungi meliputi Manfaat Bersalin, ia tertakluk kepada had manfaat yang berkenaan.
8. Pembedahan pertukaran jantina dan terapi hormon seks yang berkaitan dengan pembedahan tersebut.
9. Berkhatan melainkan perlu dari segi perubatan untuk merawat penyakit.
10. Keadaan yang berkaitan dengan penyakit kelamin, AIDS dan kerumitan berkaitan AIDS dan susulannya, dan sebarang penyakit berjangkit yang memerlukan kuarantin di bawah undang-undang.
11. Terapi alternatif seperti (tetapi tidak terhad kepada) Akupunktur, Akutekanan, Kiropraktor, Refleksologi, Pelarasan Tulang, Urut, Aromaterapi, Herba, Podiatri, rundingan dan rawatan Diet, perkhidmatan/terapi pendidikan & Ubat Sampingan Tradisional dll.
12. Vitamin/Pemakanan Tambahan, Rawatan Herba, Agen Antikegemukan / Mengurangkan Berat, Pelincir Mata dan sebarang pemakanan tambahan, ubat dan bekalan perubatan preksripsi dan bukan preksripsi pesakit luar.
13. Sabun, Syampu, Pembersih, Krim Vitamin, Minyak Vitamin, Pelembap, Pelincir, Antipenuaan, Rawatan Pencerahan dan sebarang produk dengan kesan yang serupa.
14. Gangguan psikotik, mental atau saraf dan masalah tingkah laku termasuk sebarang neurosis dan tanda fisiologi atau psikosomatik.
15. Sebarang rawatan atau penilaian bagi penyakit kongenital (sejak lahir), keturunan atau tumbesaran, kecacatan dan sebarang Kehilangan upaya atau kerumitan yang timbul daripadanya termasuk tetapi tidak terhad kepada sista dermoid, hernia / hidrosel kanak-kanak (semua hernia sehingga usia enam tahun adalah tidak dilindungi), kaki tombol, Kecacatan Septum Ventrikel (VSD), Kecacatan Septum Atrium (ASD), Talasemia, Juling, Hemangioma, Ubat Sampingan Tradisional dll.
16. Penyakit atau kehilangan upaya anak baru lahir yang dialami sebelum atau semasa dilahirkan atau dalam masa 14 hari pertama selepas itu.
17. Ujian alahan – darah/topikal termasuk ujian tempok.
18. Kemasukan hospital terutamanya untuk tujuan penyiasaan, pemeriksaan fizikal rutin, pemeriksaan kesihatan, rawatan pencegahan dan ujian diagnostik yang tidak berkaitan dengan rawatan atau diagnosis kehilangan upaya dilindungi.
19. Terapi Pertuturan dan Pekerjaan apabila bukan sebahagian daripada program pemulihan selepas dimasukkan ke hospital akibat trauma, melainkan ia merupakan susulan kepada Kehilangan Upaya Pesakit Dalam dan tertakluk kepada hadnya.
20. Sebarang rawatan pembetulan bagi kesilapan refraksi termasuk tetapi tidak terhad kepada yang berikut seperti Ortoptik, rangsangan Visual, Keratotomi Radial, Lasik, Intralase, Xioptik, implan IOL fasik atau pembedahan penggantian kanta intraokular.
21. Semua kaca mata atau kanta lekak pembetulan, kecuali kanta intraokular monofokus dalam pembedahan katarak.
22. Masalah pergigian termasuk:-
  - i) Penjagaan/rawatan pergigian atau pembedahan oral kecuali perlu disebabkan Kecederaan Akibat Kemalangan. Bagaimanapun ini tidak termasuk penggantian gigi asli, pemasangan gigi palsu, dan perkhidmatan prostetik, seperti jambatan & korona penggantinya dalam kes Kecederaan Akibat Kemalangan.
  - ii) Pembedahan tulang rahang atas dan bawah kecuali bagi rawatan langsung untuk kecederaan atau kanser traumatik akut.
  - iii) Pembedahan ortopedik, penjarangan rahang, atau rawatan bagi sendi temporomandibular.Jika tidak, Ahli Dilindungi mesti mempunyai perlindungan Manfaat Pergigian, tertakluk kepada hadnya.
23. Penggunaan atau pembelian semua peralatan (contoh anggota palsu, alat bantu dengar, kebuk udara dan penebula, tekanan saluran udara positif berterusan (CPAP), dialisis peritoneum bergerak berterusan (CAPS), pad ortopedik) dan caj sewa untuk peranti tersebut kecuali semasa penginapan hospital di bawah perlindungan Sijil Asas tetapi tertakluk kepada had bagi perlindungan tersebut.
24. Kesan daripada radiasi atau pencemaran menerusi radioaktiviti dari mana-mana sumber.
25. Peperangan, rusuhan, pemberontakan, kebangkitan, kekacauan awam, letupan senjata perang, aktiviti berkaitan keganasan, perkhidmatan aktif dalam angkatan tentera, penyertaan langsung dalam mogok, perang nuklear, perang/aktiviti biologi dan kimia.
26. Perkhidmatan bukan berbentuk perubatan yang disediakan oleh hospital seperti televisyen, telefon, faks, radio atau kemudahan serupa. Kit/pek pendaftaran dan barangan bukan perubatan lain yang tidak layak (kecuali yuran pendaftaran yang ditanggung semasa dimasukkan ke hospital sahaja). Caj untuk perkhidmatan ini mesti dibayar oleh Ahli Dilindungi sebelum keluar dari hospital atau pusat penjagaan siang melainkan dinyatakan sebaliknya.
27. Terapi fizikal atau fisioterapi pesakit luar tidak dilindungi dan tidak boleh dirujuk di peringkat GP. Perkhidmatan ini hanya akan dilindungi apabila dirujuk oleh Pakar dan rawatan mesti disediakan oleh ahli fisioterapi berdaftar. Ahli Dilindungi mesti mempunyai perlindungan Sijil Asas, tertakluk kepada hadnya.
28. Terapi pesakit luar, kemoterapi, terapi radiasi, imunoterapi, terapi fotodinamik, dialisis buah pinggang dan protokol rawatan lain yang perlu dari segi perubatan, melainkan Ahli Dilindungi mempunyai perlindungan Sijil Asas, tertakluk kepada had manfaat yang berkenaan.
29. Pemvaksinan pencegahan kecuali yang dinyatakan di bawah garis panduan Kementerian Kesihatan Malaysia yang diguna pakai untuk kanak-kanak yang layak sahaja (tertakluk kepada had manfaat Pesakit Luar, jika ada).
30. Perbelanjaan yang ditanggung untuk menderma mana-mana organ badan oleh Ahli Dilindungi dan kos pemerolehan organ termasuk semua kos yang ditanggung oleh penderma semasa pemindahan organ dan kerumitannya.

31. Penyiasatan dan rawatan gangguan tidur dan berdengkur.
32. Perbelanjaan yang ditanggung bagi kanta lekap, penggunaan prosedur kosmetik topikal / oral pembedahan dan sebarang kerumitan yang timbul daripadanya.

### Had

1. Tiada manfaat akan dibayar bagi mana-mana tempoh kemasukan hospital melainkan seluruh kemasukan dan semua perkhidmatan khas hospital yang diberikan dan pembedahan yang dilakukan, jika ada, telah disyorkan dan diluluskan oleh pengamal perubatan berkelayakan yang sah.
2. Tiada manfaat akan dibayar jika tuntutan penginapan hospital yang dibuat tidak berkaitan dengan diagnosis dan rawatan bagi keadaan di mana kemasukan hospital diperlukan oleh pengamal perubatan yang bertugas.
3. Tiada manfaat perlu dibayar bagi caj, yuran atau perbelanjaan yang tidak dinyatakan dalam Keterangan Manfaat dalam Kontrak Sijil Induk.

### Syarat-Syarat Khas

Syarat-syarat berikut akan dikenakan ke atas semua Ahli Dilindungi dan orang di bawah tanggungan mereka, jika ada:

- a) Tempoh Menunggu  
Kelayakan bagi manfaat bermula tiga puluh (30) hari selepas Ahli Dilindungi telah dimasukkan dalam Sijil ini, kecuali bagi Kemalangan dilindungi yang berlaku selepas tarikh kuat kuasa perlindungan.
- b) Penyakit Khusus  
Tiada manfaar perlu dibayar bagi kemasukan hospital, pembedahan dan/atau caj yang ditanggung yang disebabkan secara langsung atau tidak langsung oleh "Penyakit Tertentu" dan kerumitan yang berkaitannya. "Penyakit Tertentu" bermaksud hilang upaya berikut dan kerumitan berkaitannya, yang berlaku dalam masa seratus dua puluh (120) hari selepas tarikh kuat kuasa perlindungan:
  - i) Hipertensi, diabetes melitus dan penyakit kardiovaskular.
  - ii) Semua tumor, kanser, sista, nodul, polip, batu sistem kencing dan sistem hempedu.
  - iii) Semua penyakit telinga, hidung (termasuk sinus) dan tekak.
  - iv) Hernia, hemoroid, fistula, hidrosele, varikosele.
  - v) Endometriosis termasuk penyakit sistem reproduktif.
  - vi) Gangguan vertebrospina (termasuk cakera) dan masalah lutut.

# Takaful Bertempoh Kumpulan

## Pengecualian

### Manfaat Kematian

Tiada manfaat perlu dibayar sekiranya Ahli Dilindungi, sama ada dalam keadaan siuman atau tidak siuman, membunuh diri dalam masa enam (6) bulan dari tarikh kuat kuasa perlindungan.

### Hilang Upaya Menyeluruh dan Kekal (Semua punca)

### Hilang Upaya Sebahagian dan Kekal (Punca semula jadi)

### Hilang Upaya Sebahagian dan Kekal (Punca kemalangan)

Manfaat di bawah fasal ini tidak akan dibayar untuk kejadian berikut:

- a) Bunuh diri, kecederaan disengajakan atau sebarang percubaan melakukannya, sama ada semasa siuman atau tidak siuman;
- b) Peperangan, sama ada diisytiharkan atau tidak, revolusi atau operasi mirip peperangan;
- c) Perlanggaran atau percubaan melanggar undang-undang atau menentang tangkapan;
- d) Memasuki, mengendalikan atau menservis, berada di dalam atau di atas, menaiki atau menuruni sebarang alat atau pengangkutan udara, kecuali semasa Ahli Dilindungi berada dalam pesawat yang dikendalikan oleh syarikat penerbangan penumpang komersial dalam perjalanan penumpang terjadual biasa, menggunakan laluan penumpang biasa; dan
- e) Keadaan sedia ada di mana Ahli Dilindungi menerima rawatan perubatan, diagnosis, rundingan atau ubat preskripsi dalam tempoh sembilan puluh (90) hari sebelum tarikh kuat kuasa perlindungan dan hilang upaya tersebut bermula untuk tempoh dua belas (12) bulan pertama selepas tarikh kuat kuasa perlindungan.

### Manfaat Penghantaran Pulang

Tiada manfaat akan dibayar bagi:

- a) Sebarang perbelanjaan yang ditanggung bagi perkhidmatan dan bekalan yang disediakan oleh pengurus mayat atau pengendali jenazah, termasuk tetapi tidak terhad kepada kos keranda, pengawetan dan/atau pembakaran.
- b) Sebarang perbelanjaan bagi pengangkutan jenazah Ahli Dilindungi yang tidak diluluskan atau diatur oleh AIAS, atau wakil sah AIAS.

### Penyakit Kritikal

Tiada manfaat akan dibayar kepada Ahli Dilindungi jika, pada pandangan Kami, diagnosis Penyakit Kritikal Ahli Dilindungi adalah disebabkan secara langsung atau tidak langsung, sepenuhnya atau sebahagiannya oleh Sindrom Kurang Daya Tahan Melawan Penyakit (AIDS) atau mana-mana Virus Kurang Daya Tahan Manusia (HIV).

### Penyakit Maut

Tiada manfaat akan dibayar bagi mana-mana daripada berikut yang timbul akibat:

- a) percubaan membunuh diri sama ada dalam keadaan siuman atau tidak siuman dan sama ada bersifat feloni atau tidak, kecederaan badan yang disengajakan, tingkah laku Ahli Dilindungi yang mengganggu ketenteraman, atau sekiranya Ahli Dilindungi sengaja mendedahkan diri kepada bahaya yang tidak perlu, atau
- b) Sindrom Kurang Daya Tahan Melawan Penyakit (AIDS), atau
- c) Ahli Dilindungi terlibat dalam aktiviti memburu, mendaki gunung, penerbangan (kecuali sebagai penumpang yang membayar tambang menaiki penerbangan komersial), perkhidmatan tentera laut, darat atau aeronautik, atau perlumbaan (selain daripada yang menggunakan kaki), atau
- d) peperangan, rusuhan, pemberontakan, kebangkitan, kekacauan awam, letupan senjata perang, perang nuklear, peperangan/ aktiviti biologi dan kimia, atau
- e) radiasi atau pencemaran menerusi radioaktiviti daripada sebarang sumber; atau
- f) berada di bawah pengaruh dadah, narkotik atau alkohol.

### Terminal Illness

No benefit shall be payable for any of the following resulting from:

- a) attempted suicide while sane or insane and whether felonious or not, self-inflicted bodily injury, disorderly conduct on the part of the Covered Member, or upon the Covered Member deliberately exposing himself/herself to unnecessary danger, or
- b) Acquired Immune Deficiency Syndrome (AIDS), or
- c) the Covered Member having been engaged in hunting, mountaineering, aviation (except as a fare paying passenger on a commercial airline), naval, military or aeronautical service, or racing (other than foot racing) of any kind, or
- d) war, riot, rebellions, insurrection, civil commotion, explosion of war weapons, nuclear war, biological and chemical warfare/activities, or
- e) radiation or contamination by radioactivity from any source; or
- f) being under the influence of drugs, narcotics, or alcohol.

### Special Conditions

#### Critical Illness

- Only one payment shall be made for any Critical Illness benefit. (There shall be no second payment on the re-occurrence of the same Critical Illness or upon diagnosis of a different Critical Illness).
- No benefit shall be payable to the Covered Member who has at any time prior to the commencement of the Takaful Certificate incurred a Critical Illness or had sought medical advice for signs and symptoms that are present and related to the diagnosis of the Critical Illness covered.
- There will be a waiting period of thirty (30) days from the Covered Member's effective date of coverage with the exception of the following, which shall be subject to a waiting period of sixty (60) days. No benefits shall be payable if
  - i) Cancer.
  - ii) Heart Attack.
  - iii) Other Serious Coronary Artery Disease.
  - iv) Coronary Artery By-Pass Surgery.

#### Terminal Illness

- a) Only one payment would be made (i.e. no second payment on the re-occurrence of a Terminal Illness or on diagnosis of a different Terminal Illness).
- b) Upon approval for a Terminal Illness payment, the Covered Member's coverage under the Basic Certificate will become non-renewable.

No benefit will be payable to a Covered Member who has at any time prior to the commencement of this scheme suffered a Terminal Illness or sought medical advice for signs or symptoms that are present and related to the diagnosis of a Terminal Illness.

For a new Covered Member, there will be a waiting period of ninety (90) days from the Covered Member's effective date of coverage. There will be no Takaful cover and if contributions have been paid, such contributions will be refunded without profit in the following event:

- a) If the Covered Member is diagnosed of having a Terminal Illness within this waiting period; and/or
- b) The Covered Member sought medical advice for signs or symptoms that are present that are related to the diagnosis of the Terminal Illness within this waiting period.

Bagaimanapun, apabila Sijil Takaful ini dikeluarkan sebagai "Sijil Pengambilalihan" maka tempoh menunggu adalah tidak terpakai.

"Sijil Pengambilalihan" bermaksud Sijil Takaful di mana kami telah mengeluarkan terma dan syarat yang serupa atau sebahagian besarnya serupa bagi sijil Takaful/polisi insurans yang sebelum ini dikeluarkan oleh pengendali Takaful/syarikat insurans lain.

Dalam kes Sijil Pengambilalihan, jika Ahli Dilindungi disahkan menghidap Penyakit Kritikal pada tarikh kuat kuasa perlindungan, manfaat yang akan dibayar ialah manfaat di bawah sijil Takaful/polisi insurans sebelumnya atau manfaat di bawah Sijil Takaful ini, yang mana lebih tinggi, dengan syarat kami telah mendapatkan nilai perlindungan yang diluluskan dan satu salinan sijil Takaful/polisi insurans terdahulu.

- Anda hendaklah memastikan bahawa produk ini paling sesuai untuk memenuhi keperluan syarikat anda dan sesuai dengan sumber syarikat anda dan anda bersetuju dengan caruman yang perlu dibayar di bawah Sijil Takaful. Sijil Takaful ini akan tamat jika caruman tidak dibayar dalam tempoh ihsan (60) hari dari tarikh perlu bayar.
- Sila ambil perhatian bahawa pengecualian, had, terma dan syarat yang dinyatakan di dalam brosur ini adalah tidak menyeluruh. Sila rujuk kepada Kontrak Sijil Induk untuk butiran terperinci mengenai manfaat, pengecualian, had, terma dan syarat.
- Anda hendaklah memastikan bahawa maklumat penting berkaitan Sijil Takaful telah didedahkan kepada anda dan anda faham maklumat yang didedahkan. Sekiranya terdapat maklumat tidak jelas, anda hendaklah mendapatkan penjelasan daripada AIA PUBLIC.
- Sila ambil perhatian bahawa bagi sebarang hilang upaya yang timbul daripada kecederaan semasa bekerja di mana Ahli Dilindungi telah menerima manfaat di bawah Akta Pampasan Pekerja 1952, PERKESO atau undang-undang yang serupa, AIA PUBLIC tidak akan menampung apa-apa caj melainkan manfaat yang diterima tidak menampung sepenuhnya caj yang ditanggung yang dilindungi di bawah Sijil Takaful.
- Sila ambil perhatian bahawa jika seseorang Ahli Dilindungi telah menerima perlindungan insurans/ Takaful perubatan atau lain-lain pelan kerajaan, AIA PUBLIC tidak akan menampung apa-apa caj melainkan manfaat yang diterima tidak menampung sepenuhnya caj yang ditanggung yang dilindungi di bawah Sijil Takaful.
- Maklumat yang terkandung di dalam ini adalah tepat pada masa percetakan.

# Soalan Lazim

## **S: Siapakah yang layak untuk menerima perlindungan?**

J: Semua kakitangan sepenuh masa dan aktif bekerja (antara umur 16 hingga 64 tahun), dalam kelas pekerjaan 1 hingga 4 layak untuk perlindungan Perubatan dan Takaful Bertempoh Kumpulan.

Suami/isteri kakitangan (antara umur 16 hingga 64 tahun) dan anak belum berkahwin (lebih empat belas (14) hari tetapi di bawah sembilan belas (19) tahun atau dua puluh tiga (23) tahun jika masih belajar sepenuh masa dan tidak bekerja) layak untuk perlindungan Perubatan (asas dan pilihan) sahaja.

## **S: Bagaimana saya mendaftarkan syarikat saya untuk A-SME Flex-i?**

J: Sungguh mudah, anda hanya perlu menghubungi seorang wakil AIA PUBLIC dan beliau akan membantu melengkapkan dan mengemukakan permohonan anda menerusi platform elektronik. Sila kemukakan permohonan yang lengkap bersama pembayaran caruman. Perlindungan bagi syarikat anda akan bermula selepas diterima, tertakluk kepada bukti boleh lindung Takaful yang memuaskan.

## **S: Adakah terdapat borang lain untuk diisi/keperluan lain untuk dipenuhi?**

J: Bagi Manfaat Takaful Bertempoh Kumpulan, semua kakitangan perlu melengkapkan Borang Perakuan Kesihatan Diri bagi mana-mana daripada keadaan berikut:

- Bilangan kakitangan bersamaan dengan atau kurang daripada sepuluh (10); atau
- Kakitangan dengan Jumlah Dilindungi yang melebihi jumlah Had Tiada Bukti.

Bagaimanapun, bagi Manfaat Perubatan, Borang Perakuan Kesihatan Diri diperlukan untuk syarikat-syarikat dengan sepuluh (10) kakitangan atau kurang.

## **S: Bagaimana kadar caruman dikenakan?**

J: Kadar caruman ada permulaan sijil adalah berasaskan pengalaman tuntutan asas dan inflasi tuntutan perubatan bagi portfolio manfaat kakitangan korporat AIA PUBLIC. Sijil ini dikeluarkan untuk tempoh satu (1) tahun dan caruman boleh disemak semula untuk pembaharuan selanjutnya. Syarat-syarat pembaharuan akan dikeluarkan tiga puluh hari (30) hari sebelum tarikh luput sijil.

## **S: Apa yang berlaku apabila seseorang kakitangan meletakkan jawatan, atau apabila terdapat kakitangan baharu?**

J: Penambahan atau pengurangan kakitangan boleh dilakukan menerusi portal korporat AIA yang disediakan untuk anda 24/7 di hujung jari anda. Pada masa yang sama, permohonan boleh dibuat menerusi e-mel ke my.mbrupdate@aia.com atau hubungi ejen perkhidmatan anda. AIA PUBLIC akan mengenakan caruman atas dasar prorata berasaskan kekerapan pelarasan bil bagi sijil anda.

## **S: Bolehkah saya menukar/menaik taraf manfaat kakitangan saya?**

J: Ya, perubahan/naik taraf manfaat boleh dilakukan pada Ulang Tahun Sijil dan tertakluk kepada penerimaan oleh AIA PUBLIC.

## **S: Apakah yang dimaksudkan dengan kecemasan?**

J: Kecemasan bermaksud rawatan yang diperlukan dalam keadaan di mana bantuan perubatan serta-merta perlu diberikan dalam masa dua puluh empat (24) jam selepas mengalami kecederaan, penyakit atau gejala yang berlaku secara tiba-tiba dan teruk, jika tidak ia mungkin mengancam nyawa (cth. kemalangan dan serangan jantung) atau boleh menyebabkan kemerosotan kesihatan yang ketara.

## **S: Adakah A-SME Flex-i menyediakan perlindungan di luar negara?**

J: Ya, semua manfaat diguna pakai di seluruh dunia, dua puluh empat (24) jam sehari. Bagaimanapun, jika Ahli Dilindungi memilih untuk atau dirujuk untuk dirawat di luar Malaysia oleh doktor yang bertugas, manfaat yang perlu dibayar adalah berasaskan caj yang lazim dan perlu dari segi perubatan untuk rawatan yang setara di Malaysia, tidak termasuk kos pengangkutan ke tempat rawatan.

Untuk penjagaan pesakit luar, Ahli Dilindungi mempunyai had maksimum sebanyak RM40 setiap kunjungan untuk Doktor Am (GP) dan RM150 untuk Doktor Pakar (SP).

## **S: Apakah maksud Deduktibel?**

J: Sebagai contoh, jika jumlah deduktibel RM300 dipilih untuk kemasukan hospital, Ahli Dilindungi/Pemilik Sijil Induk perlu membayar RM300 pertama yang ditanggung bagi setiap hilang upaya, manakala kami menanggung baki perbelanjaan layak lain. Sebagai contoh, jika Ahli Dilindungi menanggung bil perubatan RM1,000, Ahli Dilindungi/Pemilik Sijil Induk perlu membayar deduktibel RM300 dan pelan Takaful akan membayar baki RM700.

## **S: Apakah perlindungan di bawah pelan Hospital Kerajaan (GH Sahaja)?**

J: Jika pelan "GH sahaja" dipilih, Ahli Dilindungi layak menerima had keseluruhan maksimum RM20,000 setiap tahun sijil dan kos Bilik dan Makanan maksimum yang boleh dituntut ialah RM80 sehari. Bagi manfaat Doktor Pakar(SP), had keseluruhan maksimum ialah RM1,000 setiap tahun sijil.

## **S: Apakah perbezaan antara "Had Setiap Ahli" dan "Had Setiap Keluarga"?**

J: "Had Setiap Ahli" merujuk kepada jumlah wang maksimum yang akan dibayar oleh AIA PUBLIC bagi tuntutan dilindungi untuk setiap individu yang dilindungi. Ini bermaksud kakitangan dan tanggungan masing-masing mempunyai had berasingan. Sekiranya tuntutan dibuat oleh seorang ahli, had yang disediakan oleh ahli lain tetap kekal.

"Had Setiap Keluarga" bermaksud kakitangan dan tanggungannya dilindungi di bawah satu had setiap tahun sijil. Ini bermakna had boleh digunakan oleh mana-mana atau semua ahli termasuk kakitangan dan suami/isterinya yang layak dan tidak terhad kepada seorang individu dalam kes "Had Setiap Ahli". Sila ambil perhatian bahawa "Had Setiap Keluarga" diguna pakai hanya bagi Manfaat Penjagaan Hospital.

## **S: Apakah perbezaan antara "Had Berasingan" dan "Had GP & SP Tergabung"?**

J: "Had Berasingan" bermaksud Penjagaan Pesakit Luar Doktor Am (GP) dan Penjagaan Pesakit Luar Doktor Pakar (SP) akan mempunyai hadnya yang tersendiri. Sebagai contoh, RM2,000 untuk GP dan RM1,000 untuk SP. Manakala, "Had GP & SP Tergabung" bermaksud had dikongsi bagi GP dan SP. Syarat minimum bagi "Had GP & SP Tergabung" ialah RM2,000. Dalam keadaan ini, jika "Had GP & SP Tergabung" ialah RM2,000, maka Ahli Dilindungi boleh membuat tuntutan sehingga RM2,000 secara sepenuhnya bagi GP atau SP atau kombinasi secara tergabung bagi GP dan SP.

## **S: Bagaimana saya boleh mendaftarkan kakitangan saya untuk manfaat Group Medicare – Pengurusan Kes Perubatan Peribadi (PMCM)?**

J: Anda perlu mengambil pelan kemasukan hospital bagi kakitangan anda untuk mendaftarkan mereka untuk Group Medicare - Pengurusan Kes Perubatan Peribadi.

## **S: Bagaimana PMCM berfungsi?**

J: Penyedia perkhidmatan kami, Teladoc, akan melantik satu pasukan pengurusan kes perubatan peribadi yang terkhusus ("Pasukan PMCM"), yang diketuai oleh pengurus kes pakar perubatan untuk menilai semula dan menguruskan keadaan perubatan anda. Pasukan PMCM akan terlebih dahulu membantu anda mengumpulkan dan mengkaji semula maklumat perubatan dan keputusan ujian anda yang sedia ada. Pasukan PMCM juga akan berunding dengan doktor-doktor pakar terkemuka di seluruh dunia, yang mempunyai kepakaran dalam pelbagai bidang, untuk membuat diagnosis tepat tentang keadaan perubatan anda, memantau kemajuan anda dan menyokong anda sepanjang proses ini sehingga pulih. Sila hubungi AIA PUBLIC Care Line di 1300 88 8933 untuk menyemak kelayakan sijil anda.

# Notis Penting Kepada Bakal Pemilik Sijil

- Anda perlu memastikan bahawa pelan ini menepati keperluan anda dan anda bersetuju dengan caruman yang perlu di bayar di bawah pelan ini. Sekiranya caruman tidak dibayar dalam tempoh ihsan selama 30 hari dari tarikh perlu bayar, faedah di bawah pelan ini mungkin akan digantung dan / atau dibatalkan.
- Jika Sijil ini dibatalkan dalam tempoh percubaan 15 hari, caruman penuh selepas ditolak perbelanjaan perubatan (jika ada) akan dikembalikan semula. Jika caruman tidak dibayar, Sijil anda akan luput selepas tempoh ihsan.
- Sila ambil perhatian bahawa pengecualian-pengecualian, had-had, terma-terma dan syarat-syarat yang dinyatakan di dalam brosur ini adalah tidak menyeluruh. Sila rujuk kepada Sijil sebenar untuk maklumat terperinci tentang faedah-faedah, pengecualian pengecualian, terma-terma dan syarat-syarat.
- Anda hendaklah memastikan bahawa maklumat penting mengenai mengenai Sijil ini telah diberikan kepada anda dan anda memahami maklumat yang diberikan tersebut. Jika terdapat sebarang keraguan, anda perlu meminta penjelasan daripada kami.
- Ia mungkin akan merugikan anda sekiranya bertukar dari satu pelan Medikal ke pelan Medikal yang lain memandangkan anda mungkin perlu melalui keperluan pengunderaitan yang baru untuk tempoh menunggu/pengecualian penyakit-penyakit tertentu/keadaan sedia ada di bawah pelan yang baru.
- Sila ambil perhatian bahawa untuk sebarang kehilangan upaya disebabkan kecederaan semasa bekerja di mana Ahli Dilindungi telah menerima faedah dibawah Akta Pampasan Pekerja 1952, PERKESO atau undang-undang seumpamanya, kami tidak akan menanggung sebarang caj yang dikenakan melainkan jika faedah-faedah yang diterima tidak melindungi sepenuhnya caj-caj yang ditanggung yang dilindungi di bawah Sijil ini.
- Sila ambil perhatian bahawa jika Ahli Dilindungi telah menerima perlindungan di bawah insurans / Takaful perubatan lain atau pelan-pelan kerajaan, kami tidak akan menanggung sebarang caj yang dikenakan melainkan jika faedah-faedah yang diterima tidak melindungi sepenuhnya caj-caj yang ditanggung yang dilindungi di bawah Sijil ini.
- Maklumat yang disertakan di sini adalah tepat pada tarikh percetakan.
- Sijil ini tidak akan membayar amaun faedah daripada dana-dana yang ada apabila Sijil tamat, matang atau luput.
- Sila ambil perhatian bahawa caruman yang dibayar oleh organisasi perniagaan adalah tertakluk kepada cukai yang dikenakan oleh Kerajaan Malaysia pada kadar semasa.

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## Hubungi Kami untuk Maklumat Lanjut / Please Contact Us for More Information

Jika anda mempunyai sebarang pertanyaan, sila hubungi Perancang Hayat kami.  
If you have any enquiries, please contact our Life Planner.



Anda juga boleh menghubungi kami di alamat dan talian berikut:  
Alternatively, you can contact us at:

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