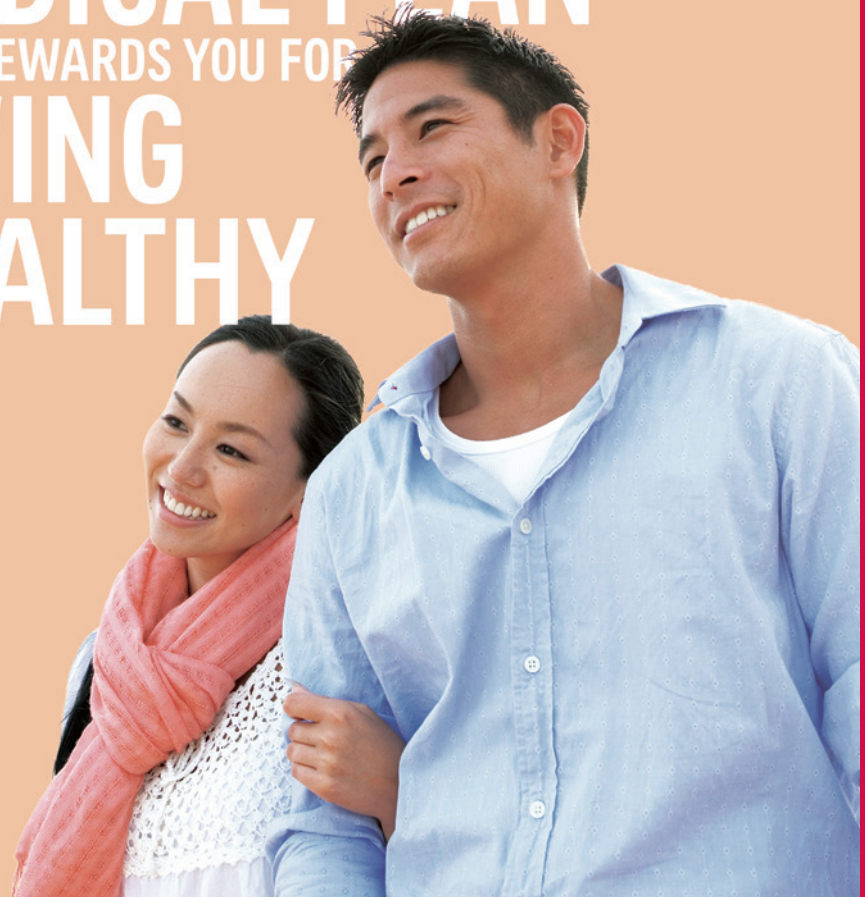


HEALTH

A-Plus Health Booster

Health
Rewards
with
AIA Vitality

A COMPREHENSIVE MEDICAL PLAN THAT REWARDS YOU FOR LIVING HEALTHY



A-Plus **Health Booster** is an optional add-on medical benefit (“rider”) that you can attach to an A-Life **Med Regular** plan.

With A-Plus **Health Booster**, your medical safety net is extended to a higher annual limit of **up to RM1.5 million**. You will also receive enhanced out-patient benefits, as well as extra benefits under the Health Wallet and Health Rewards!

HOW DOES A-PLUS HEALTH BOOSTER BENEFIT YOU?

1



HIGH ANNUAL LIMIT OF UP TO RM1.5 MILLION

Protects you against escalating medical costs with comprehensive medical coverage of up to RM1.5 million every year!

2



ENHANCED OUT-PATIENT BENEFITS

- As charged¹ for Out-patient Kidney Dialysis Treatment and Out-patient Cancer Treatment Benefit, except for Plan150.
- As charged¹ for Emergency Accidental Out-patient Treatment (inclusive of dental treatment).
- Covers Out-patient Dengue Fever Treatment

3



HEALTH WALLET TO SUPPORT YOUR HEALTH JOURNEY

An amount will be credited to your Health Wallet for every year that you do not make a claim, up to 10 times, which you can use for the following:

- Prevention Benefit
- Special Care
- Lifetime Recovery Care
- Mobility and Hearing Support
- Protect Enhancer²

4

AIA Vitality

HEALTH REWARDS WITH AIA VITALITY

Not only that, we also reward you for your efforts to stay healthy. With AIA Vitality, you may enjoy additional Health Rewards, depending on your AIA Vitality status:

- Up to 100% deductible waiver
- Hospital Room and Board Benefit upgrade - up to 100% of the benefit amount
- Annual Health Wallet Booster

5

medix
It's a matter of life

PERSONAL MEDICAL CASE MANAGEMENT (PMCM) BENEFIT

This benefit provides you with exclusive access to PMCM service should you be diagnosed with a serious or complex condition. You will receive personalised ongoing support by a dedicated 24/7 case management team throughout your medical journey from diagnosis to recovery. This benefit is administered by our service provider, Medix Medical Services Asia Limited (Medix).

Note: This benefit is not applicable for Plan 150.

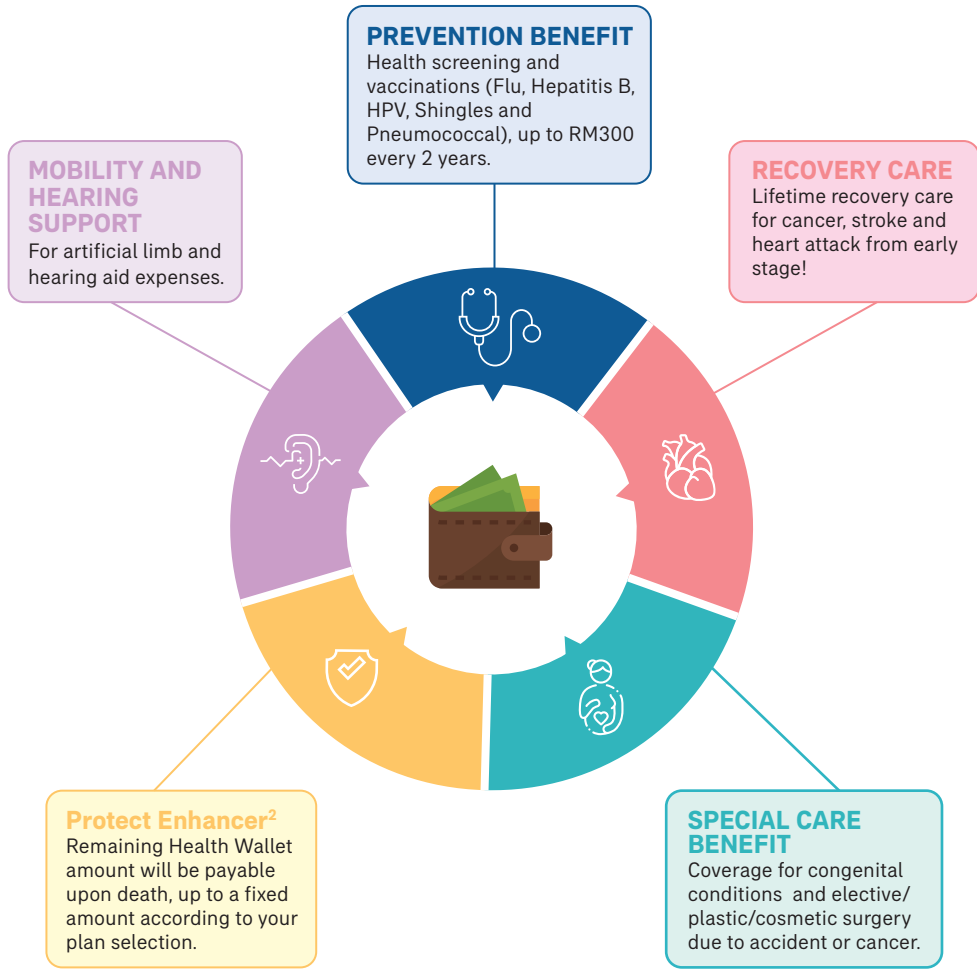
¹ This benefit is subject to the Annual Limit amount as well as reasonable and customary charges on eligible expenses.

² Should you select Plan 150, you are only entitled for the Protect Enhancer benefit under the Health Wallet.

WHAT IS HEALTH WALLET?

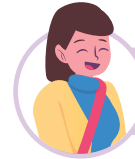
Health Wallet is a benefit that rewards you for every year that you do not make a claim, up to 10 times. An amount depending on the selected plan will be added into your Health Wallet.

Your Health Wallet will complement your healthcare journey with the benefits below:

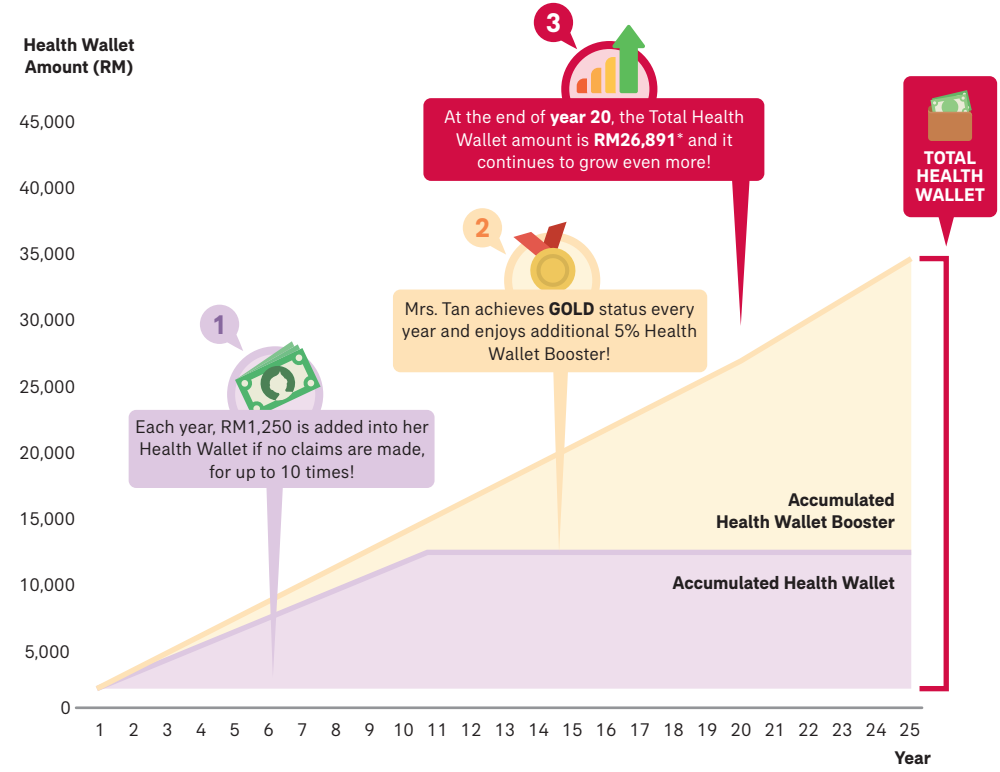


A-Plus Health Booster not only covers you if you fall sick, but also **REWARDS** you for staying healthy, and **MORE!**

HOW DOES THE HEALTH WALLET AND HEALTH WALLET BOOSTER WORK?



Mrs. Tan purchased Plan 200 with an annual limit of RM1.25 mil. She also joined AIA Vitality as a first step to leading a healthier lifestyle!



⁴ Assuming no usage of the health wallet and no claims made.

HEALTH REWARDS WITH AIA VITALITY



Join AIA Vitality to enjoy Health Rewards on top of your A-Plus Health Booster benefits without having to pay additional premium.

Earn AIA Vitality points for every effort you make to stay healthy. The more points you earn, the higher your AIA Vitality status, the better your rewards. The Health Rewards you can enjoy include:



Bronze



Silver






Gold



Platinum



	Bronze	Silver	Gold	Platinum
<p>1</p>  <p>Deductible Waiver (upon hospital admission)</p>	Nil	RM150 waived	RM300 waived	RM300 waived
<p>2</p>  <p>Hospital Room and Board Benefit Upgrade (upon hospital admission)</p>	Nil	Nil	+50% of initial Room and Board Benefit Amount	+100% of initial Room and Board Benefit Amount
<p>3</p>  <p>Health Wallet Booster</p>	Nil	Nil	+5% of Total Health Wallet Amount every year	+10% of Total Health Wallet Amount every year

So when you put more effort in to taking care of your health, the better Health Rewards you enjoy!

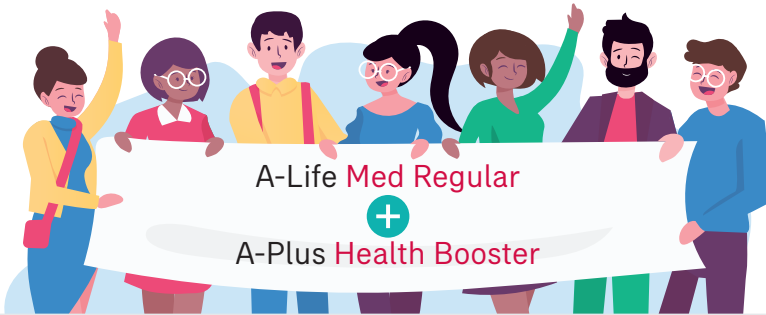
THE SCHEDULE OF BENEFITS FOR A-PLUS HEALTH BOOSTER AT A GLANCE:

Benefits	Plan 150	Plan 200	Plan 250
Annual Limit	400,000	1,250,000	1,500,000
Lifetime Limit	No limit		
Deductible Amount	Zero Deductible or RM 300 per Any One Disability		
Out-Patient Care			
1. Out-patient Dengue Fever Treatment (per Disability)	Up to 1,500	Up to 2,000	Up to 2,500
2. Emergency Accidental Out-patient Treatment and 30 days Follow-up treatment	As Charged, subject to Annual Limit		
3. Emergency Accidental Out-patient Dental Treatment			
4. Out-patient Kidney Dialysis and Out-patient Cancer Treatment	Up to 1,000,000 per lifetime	As Charged, subject to Annual Limit	
	This amount does not reduce the Annual Limit		
Value-added Service			
5. Personal Medical Case Management	Not Applicable	Applicable	Applicable
Health Wallet			
Yearly Health Wallet Amount (applicable for item no. 6 to no. 9)	400	1,250	1,500
	The amount above will be credited to the Health Wallet at every year end, provided no claims have been made in the previous year, up to a total of 10 times.		
6. Prevention Benefit i. Health Screening ii. Vaccination (age 16 and above): • Flu vaccination • Hepatitis B • HPV • Shingles • Pneumococcal	Not Applicable	Up to 300 every 2 years, subject to total amount available in Health Wallet.	

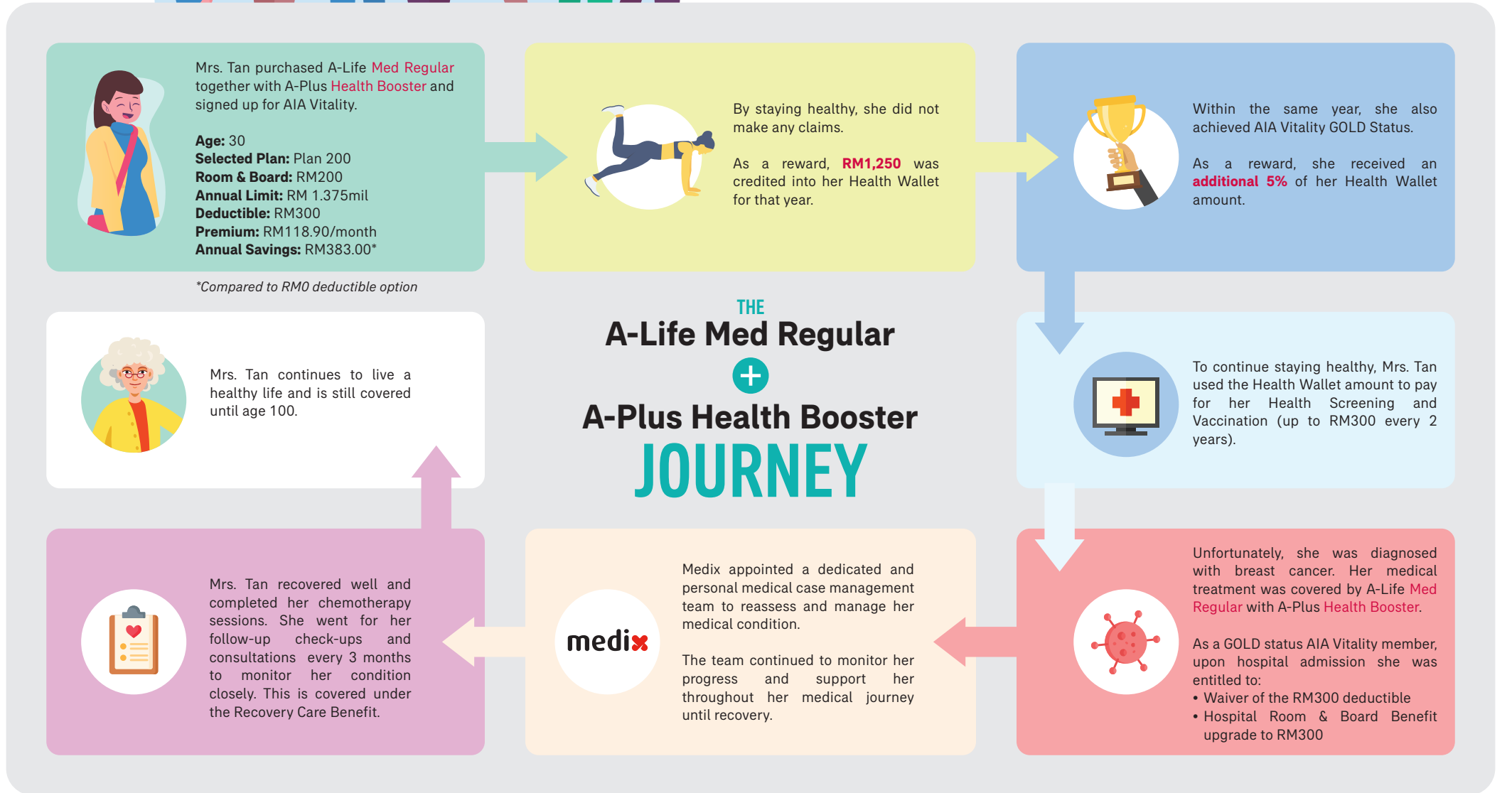
Benefits	Plan 150	Plan 200	Plan 250
7. Special Care Benefit i. Congenital Conditions ii. Elective/plastic/cosmetic surgery due to accident or cancer	Not Applicable	As Charged, subject to total amount available in Health Wallet.	
8. Recovery and Support Benefit i. Mobility and Hearing Support • Artificial Limb • Hearing Aid			
ii. Recovery Care Coverage starts from early stage for • Cancer • Stroke • Heart Attack			
9. Protect Enhancer	The total amount available in Health Wallet shall be payable upon death of the Insured, capped at the amount stated below:		
	100,000	200,000	300,000

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 Sales Illustration and Product Disclosure Sheet to know more about this product. For a detailed explanation of its benefits, exclusions, terms and conditions, please refer to the policy contract.



When you package your A-Life Med Regular with A-Plus Health Booster, it not only provides you with comprehensive medical coverage, but also a complete health solution that supports you from prevention to hospitalisation and recovery, up to age 100.



SCHEDULE OF BENEFIT FOR A-LIFE MED REGULAR + A-PLUS HEALTH BOOSTER

Benefits	Plan 150	Plan 200	Plan 250			
Total Annual Limit (applicable for item no. 1 to 20)	500,000	1,375,000	1,650,000			
Lifetime Limit	No limit					
Deductible Amount (applicable for item no. 1 to 8, 14,16)	Zero Deductible or 300 per Any One Disability					
1. Hospital Room and Board (up to 120 days per year for both Hospital Room and Board locally and overseas)	150	200	250			
2. Additional Hospital Room and Board Whilst Overseas (up to 120 days per year for both Hospital Room and Board locally and overseas)	150	200	250			
3. Intensive Care Unit Benefit (120 days per year)	As Charged, subject to Total Annual Limit.					
4. Hospital Supplies and Services						
5. Surgical Fees Benefit						
6. Operating Theatre Fees Benefit						
7. Anaesthetist's Fees Benefit						
8. In-Hospital Physician's Visit Benefit (240 days maximum visits per year)						
9. Pre-Hospitalisation Benefit (within 60 days before hospitalisation) i. Diagnosis Test Benefit ii. Specialist Consultation Benefit iii. Medication and Treatment Benefit						
10. Post-Hospitalisation Treatment Benefit (within 120 days after hospitalisation) i. Out-patient Diagnosis X-ray and Lab Tests Benefit ii. Medical expenses and consultation Benefit						
11. Day Procedure Benefit						
12. Out-patient Physiotherapy and Acupuncture Treatment Benefit (per year) (within 60 days after hospitalisation)				Up to 4,000	Up to 6,000	Up to 8,000

Benefits	Plan 150	Plan 200	Plan 250
13. Home Nursing Care Benefit (per confinement) (up to 180 days per lifetime)	Up to 3,000	Up to 4,000	Up to 5,000
14. Organ / Bone Marrow Transplant (claimable once per lifetime)	As Charged, subject to Total Annual Limit.		
15. Daily Cash Allowance at Government Hospital (up to 120 days per year)	100		
16. Daily Guardian Benefit (up to 120 days per year)	Up to 90	Up to 110	Up to 130
17. Emergency Accidental Out-patient Treatment and 30 days Follow-up Treatment	As Charged, subject to Total Annual Limit.		
18. Emergency Accidental Out-patient Dental Treatment			
19. Out-patient Kidney Dialysis Treatment Benefit and Out-patient Cancer Treatment Benefit	Up to 1,000,000 per lifetime This amount does not reduce Total Annual Limit	As Charged, subject to Total Annual Limit.	
20. Out-patient Dengue Fever Treatment (per Disability)	Up to 1,500	Up to 2,000	Up to 2,500
Value-added Service			
21. Personal Medical Case Management	Not applicable	Applicable	Applicable
22. Emergency Medical Evacuation and Repatriation	Up to USD 1,000,000 per event		

Benefits	Plan 150	Plan 200	Plan 250
Health Wallet			
Yearly Health Wallet Amount (applicable for item no. 23 to 26)	400	1,250	1,500
	The amount above will be credited to the Health Wallet at every year end, provided no claim has been made for benefits item no. 1 to 20 in the previous year, up to a total of 10 times.		
23. Prevention Benefit i. Health Screening ii. Vaccination (age 16 and above): • Flu vaccination • Hepatitis B • HPV • Shingles • Pneumococcal	Not applicable	Up to 300 every 2 years, subject to the total amount available in the Health Wallet.	
24. Special Care Benefit i. Congenital Conditions ii. Elective/plastic/cosmetic surgery due to accident or cancer	Not Applicable	As Charged, subject to total amount available in the Health Wallet.	
25. Recovery and Support Benefit i. Mobility and Hearing Support • Artificial Limb • Hearing Aid			
ii. Recovery Care Coverage starts from early stage for • Cancer • Stroke • Heart Attack			
26. Protect Enhancer	Total remaining amount in the Health Wallet will be payable upon death, capped at the amount stated below.		
	100,000	200,000	300,000

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 Sales Illustration and Product Disclosure Sheet to know more about this product. For a detailed explanation of its benefits, exclusions, terms and conditions, please refer to the policy contract.

FREQUENTLY ASKED QUESTIONS

Q: What is A-Plus Health Booster?

A: A-Plus Health Booster is an optional add-on medical benefit (“rider”) that you can attach to an A-Life Med Regular plan. With A-Plus Health Booster, it will extend your medical safety net to a higher annual limit of up to RM1.5 million and enhanced out-patient benefits.

On top of the enhanced benefits, A-Plus Health Booster also rewards you for your efforts to stay healthy:

Health Wallet: Depending on the plan you've selected, an amount will be added to your Health Wallet at the end of every year, provided no claim has been made in the previous year, up to a total of 10 times. The Health Wallet gives you extra benefits such as:

- health screening and vaccination
- coverage for congenital conditions and elective/plastic/cosmetic surgery due to accident or cancer
- external prosthetics such as artificial limb and hearing aid
- recovery care for cancer, stroke and heart attack
- death coverage

Health Rewards: Health Rewards are additional benefits that you get to enjoy when you sign up as an AIA Vitality member and purchase A-Plus Health Booster. Your Health Rewards benefits may vary depending on your AIA Vitality status upon making your claim.

When you packaged A-Life Med Regular with A-Plus Health Booster, it not only provides you with comprehensive medical coverage, but also a complete health solution that supports you from prevention to hospitalisation and recovery, up to age 100.

Q: Who is eligible to purchase A-Plus Health Booster?

A: A-Plus Health Booster is available for anyone between the age of 14 days and 70 years old. It is only attachable to A-Life Med Regular of the same plan type (i.e. A-Plus Health Booster Plan 150 can be attached to A-Life Med Regular Plan 150 only).

Q: Does A-Plus Health Booster provide worldwide coverage?

A: Yes. A-Plus Health Booster provides worldwide coverage. However, if you are residing or travelling outside Malaysia for more than 90 consecutive days, you will not be covered for any medical treatment received overseas (except for Singapore and Brunei). Please note that the overseas coverage will be in accordance with the Reasonable and Customary and Medically Necessary Charges for such equivalent local treatment in Malaysia.

If you are a foreigner or a non-resident, your coverage is confined to hospitalisation within Malaysia and hospitalisation due to medical emergency only whilst overseas.

Q: Will my premiums increase as I get older?

A: The premiums payable for A-Plus Health Booster depends on your attained age, hence it will increase as your age increases.

Q: Are the premiums for A-Plus Health Booster guaranteed?

A: The premiums for this rider are not guaranteed and the Company reserves the right to revise the premiums by giving the policyholder 30 days written notice.

Q: What are the fees and charges that I have to pay?

A: There are no fees and charges other than the premium payable.

Q: Are the premiums paid for A-Plus Health Booster eligible for income tax relief?

A: Yes, the premiums pay for this rider may qualify you for a personal tax relief of up to RM3,000 for medical and education insurance, subject to the final decision of the Inland Revenue Board of Malaysia.

Q: Can I withdraw the funds in the Health Wallet?

A: No, the funds in the Health Wallet cannot be withdrawn and can only be used for the eligible benefits listed.

Q: What is deductible?

A: If you select the RM300 deductible option, you will need to pay for the first RM300 incurred, while we will take care of the balance of the eligible expenses. This deductible amount will be applied to both A-Life Med Regular and A-Plus Health Booster.

However, if you are an AIA Vitality member and have achieved the Gold status at the time of claim, as part of your Health Rewards, your deductible amount (if any) will be waived.

Q: What are the major exclusions for A-Plus Health Booster?

A: This rider shall not cover:

- Pre-existing illness conditions;
- Treatment or Surgery for Specified Illness for a period of 120 days from the Issue Date or Commencement Date of this rider, whichever is later;
- Any medical or physical conditions arising within 30 days from the Issue Date or Commencement Date of this rider, whichever is later except for covered injury;
- Personal Medical Case Management Benefit where the medical conditions first occurred prior to or within 30 days from the Issue Date or Commencement Date of this rider, whichever is later;
- Out-Patient Kidney Dialysis Treatment where the symptoms first occurred prior to or within 30 days from the Issue Date or Commencement Date of this rider, whichever is later;
- Out-Patient Cancer Treatment Benefit where the symptoms first occurred prior to or within 60 days from the Issue Date or Commencement Date of this rider, whichever is later;
- Any medical or physical abnormalities existing at the time of birth, as well as neo-natal physical abnormalities developing within six (6) months from the time of birth. This will include:
 - (a) hernias of all types and epilepsy, except when caused by a trauma, which occurred after the date that the Insured is continuously covered under the relevant Supplementary Hospitalisation Contract, and
 - (b) any congenital or hereditary conditions which has manifested or was diagnosed before the Insured attains seventeen (17) years of age; except when it is covered under Special Care Benefit.
- Any Disability caused by self-destruction, intentional self-inflicted injuries or any attempt of self-destruction while sane or insane;
- Any Disability caused by willful exposure to danger;
- War, declared or undeclared, strikes, riots, civil war, revolution or any warlike operations;
- Service in the armed forces in time of declared or undeclared war or while under orders for warlike operations or restoration of public order;
- Any violation or attempted violation of the law or resistance to arrest;
- Pregnancy, miscarriage or child birth;
- Mental or nervous disorders, treatment of alcoholism, or drug abuse or any other complications arising from it or any drug accident not prescribed by a treating Doctor;

- Elective/Plastic/Cosmetic Surgery (except the Elective/Plastic/Cosmetic Surgery due to Accident or Cancer under the Special Care Benefit), circumcision (except circumcision due to infection), eye examination/elective surgery for visual impairments due to nearsightedness, farsightedness or astigmatism or radial keratotomy; all corrective glasses, contact lenses and intraocular lens (except monofocal intraocular lenses in cataract surgery) or the use or acquisition of external prosthetic appliances or devices (except the artificial limb and hearing aid under Mobility and Hearing Support) and prescriptions;
- Any form of dental care or Surgery including the replacement of natural teeth, placement of denture and prosthetic services such as bridges and crowns or their replacement unless necessitated by Injury covered under the Emergency Accidental Out-patient Dental Treatment Benefit;
- Hospitalisation primarily for investigatory purposes, diagnosis, X-ray examination, general physical or medical examinations, not incidental to treatment or diagnosis of a covered Disability or any treatment which is not Medically Necessary and any preventive treatments, preventive medicines or examinations carried out by a Physician (except the Health Screening and Vaccination under Prevention Benefit), vitamins/food supplements and treatments specifically for weight reduction or gain;
- Any treatment or investigation which is not Medically Necessary, or convalescence, custodial or rest care;
- Ionising radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapon material; and
- Expenses incurred for donation of any body parts or organ by the Insured and acquisition of the organ including all costs incurred by the donor during organ transplant and its complications. We will only reimburse the Reasonable and Customary Charges incurred on Major Organ/Bone Marrow Transplant Surgery for the Insured being the recipient, limited to once per Lifetime.

Q: How does the PMCM work?

A: Our service provider, Medix, will appoint a dedicated and personal medical case management team ("PMCM team"), led by a personal medical 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 Care Line at 1300 88 1899 to check your policy eligibility.

Notes:

- (i) Medix is an independent third-party company which specialises in Personal Medical Case Management. For more information about Medix, please visit their website at www.medix-global.com.
- (ii) AIA Bhd. is not involved in any recommendation that is provided. The intent is for our service provider to provide independent opinion that is neutral.

Q: What are the major exclusions for PMCM Benefit?

A: The following conditions are excluded for coverage under the PMCM benefit:

- Emergency care and or any medical conditions of urgent invasive and/or urgent surgical procedures;
- Diabetes;
- Short stature as an isolated condition;
- Endocrine conditions that affect only fertility;
- Isolated snoring (without sleep apnea);
- Cosmetic/Aesthetic surgery;
- Excluded medical conditions in the pediatric medical field:
 - a) Pediatric gastroenterological diseases of the following types:
 - i) Failure to thrive; and
 - ii) Eating disorders (e.g., anorexia, bulimia);
 - b) Attention Deficit/Hyperactivity Disorder (ADHD) and Attention Deficit Disorder (ADD); and
 - c) Any Medical Condition pertaining to premature babies during initial hospitalisation after birth or during the first six (6) months of life.
- Excluded disorders:
 - a) ADHD and ADD; and
 - b) Anorexia/Bulimia and other related eating disorders
- Fertility-related conditions or procedures, with the exception of cases of three (3) or more consecutive miscarriages;
- Obstetrics;
- Child, youth, and adult psychiatric and/or mental diseases;
- Conditions related directly or indirectly to issues of looks and aesthetics, including obesity, with the exception of reconstructive breast surgery following a mastectomy;
- Medical conditions in the fields of dentistry;
- Fibromyalgia disease;
- Chronic fatigue syndrome;
- Complete and irreversible blindness;
- Acute Cerebrovascular Accident (CVA);
- Severe burns if patient is hospitalised;
- Allergies;
- Sexually Transmitted Diseases (STD);
- Human Immunodeficiency Virus (HIV);
- Obesity;
- Any condition that necessitates urgent medical attention; and
- Any condition resulting from substance, drug or alcohol addiction.

Note: This list is not exhaustive. Please refer to the policy contract for the full list of exclusions.

FOR YOUR ATTENTION

General disclosures:

1. You should satisfy yourself that this rider will best serve your needs and that the premium payable under this policy is an amount you can afford.
2. If the basic policy of the Traditional Life Insurance to which this rider is attached, is cancelled within the 15-day free look period, the full premium less medical expenses (if any) will be refunded.
3. You are advised to refer to the sales illustration for further information.
4. You should ensure that important information regarding this rider is disclosed to you and you understand the information disclosed. If there is ambiguity, you should see clarification from the Company.
5. Should you require additional information about medical and health insurance, you may also refer to the insurance info booklet on 'Medical and Health Insurance' available at all our branches or you can obtain a copy from your AIA Life Planner or visit www.insuranceinfo.com.my.
6. It may not be advantageous to switch from one health plan to another, as you may be subject to new underwriting requirements, full waiting period and any applicable period for the exclusion of specific illnesses / pre-existing conditions of the new plan.
7. Please note that premiums paid by business organisations are subject to the applicable tax imposed by the Government of Malaysia at the prevailing rate.
8. Please note that if you decide to proceed with the treatment plan as recommended by our service provider, Medix under the PMCM Benefit, the cost of medical treatment may or may not be covered under your Policy or medical card with the Company. You are advised to confirm your Policy coverage with the Company before performing the treatment.

This brochure contains only a brief description of the product and is not exhaustive. It is recommended that you request a copy of the AIA Sales Illustration to know more about this product. For a detailed explanation of its benefits, exclusions, terms and conditions, please refer to the policy contract.

Annual Premium Rates Appendix

Annual Premium Rates below are based on standard risk (Occupational Class 1 & 2) with RM300 deductible amount.

Attained Age	RM300 Deductible Amount					
	Male Insured			Female Insured		
	Plan 150	Plan 200	Plan 250	Plan 150	Plan 200	Plan 250
0	113.00	176.00	198.00	105.00	159.00	186.00
1	113.00	176.00	198.00	105.00	159.00	186.00
2	113.00	176.00	198.00	105.00	159.00	186.00
3	113.00	176.00	198.00	105.00	159.00	186.00
4	113.00	176.00	198.00	105.00	159.00	186.00
5	113.00	176.00	198.00	105.00	159.00	186.00
6	113.00	176.00	198.00	105.00	159.00	186.00
7	113.00	176.00	198.00	105.00	159.00	186.00
8	113.00	176.00	198.00	105.00	159.00	186.00
9	113.00	176.00	198.00	105.00	159.00	186.00
10	113.00	176.00	198.00	105.00	159.00	186.00
11	120.00	210.00	277.00	112.00	203.00	256.00
12	120.00	210.00	277.00	112.00	203.00	256.00
13	120.00	210.00	277.00	112.00	203.00	256.00
14	120.00	210.00	277.00	112.00	203.00	256.00
15	120.00	210.00	277.00	112.00	203.00	256.00
16	138.00	223.00	300.00	120.00	212.00	276.00
17	138.00	223.00	300.00	120.00	212.00	276.00
18	138.00	223.00	300.00	120.00	212.00	276.00
19	138.00	223.00	300.00	120.00	212.00	276.00
20	138.00	223.00	300.00	120.00	212.00	276.00
21	150.00	243.00	314.00	130.00	226.00	299.00
22	150.00	243.00	314.00	130.00	226.00	299.00
23	150.00	243.00	314.00	130.00	226.00	299.00
24	150.00	243.00	314.00	130.00	226.00	299.00
25	150.00	243.00	314.00	130.00	226.00	299.00
26	150.00	243.00	314.00	130.00	226.00	299.00
27	150.00	243.00	314.00	130.00	226.00	299.00
28	150.00	243.00	314.00	130.00	226.00	299.00
29	150.00	243.00	314.00	130.00	226.00	299.00
30	170.00	273.00	366.00	146.00	251.00	339.00
31	170.00	273.00	366.00	160.00	251.00	339.00
32	170.00	273.00	366.00	160.00	251.00	339.00
33	170.00	273.00	366.00	160.00	251.00	339.00
34	170.00	273.00	366.00	160.00	251.00	339.00
35	170.00	273.00	366.00	160.00	251.00	339.00
36	185.00	296.00	397.00	170.00	271.00	366.00
37	185.00	296.00	397.00	170.00	271.00	366.00
38	185.00	296.00	397.00	170.00	271.00	366.00
39	185.00	296.00	397.00	170.00	271.00	366.00
40	215.00	327.00	452.00	183.00	271.00	369.00
41	215.00	327.00	452.00	183.00	303.00	413.00
42	215.00	327.00	452.00	183.00	303.00	413.00
43	215.00	327.00	452.00	183.00	303.00	413.00
44	215.00	327.00	452.00	183.00	303.00	413.00
45	215.00	327.00	452.00	183.00	303.00	413.00
46	228.00	359.00	489.00	216.00	319.00	425.00
47	228.00	359.00	489.00	216.00	319.00	425.00
48	228.00	359.00	489.00	216.00	319.00	425.00
49	228.00	359.00	489.00	216.00	319.00	425.00
50	243.00	399.00	615.00	227.00	338.00	450.00

Annual Premium Rates Appendix (continued)

Attained Age	RM300 Deductible Amount					
	Male Insured			Female Insured		
	Plan 150	Plan 200	Plan 250	Plan 150	Plan 200	Plan 250
51	278.00	422.00	624.00	262.00	377.00	509.00
52	313.00	445.00	637.00	297.00	416.00	562.00
53	348.00	468.00	670.00	332.00	455.00	615.00
54	383.00	491.00	703.00	367.00	494.00	667.00
55	418.00	534.00	769.00	402.00	513.00	693.00
56	451.00	537.00	788.00	435.00	570.00	770.00
57	514.00	606.00	825.00	459.00	604.00	816.00
58	577.00	665.00	905.00	483.00	648.00	875.00
59	590.00	739.00	1,006.00	557.00	677.00	914.00
60	653.00	808.00	1,059.00	581.00	696.00	1,024.00
61	749.00	898.00	1,132.00	649.00	820.00	1,066.00
62	793.00	902.00	1,137.00	675.00	894.00	1,118.00
63	837.00	956.00	1,205.00	701.00	918.00	1,148.00
64	881.00	990.00	1,248.00	727.00	962.00	1,203.00
65	925.00	1,054.00	1,329.00	753.00	976.00	1,220.00
66	1,008.00	1,141.00	1,415.00	801.00	986.00	1,292.00
67	1,091.00	1,236.00	1,533.00	864.00	1,031.00	1,351.00
68	1,174.00	1,331.00	1,651.00	927.00	1,101.00	1,443.00
69	1,257.00	1,401.00	1,738.00	990.00	1,196.00	1,567.00
70	1,340.00	1,496.00	1,856.00	1,053.00	1,266.00	1,659.00
71	1,423.00	1,591.00	1,957.00	1,116.00	1,336.00	1,737.00
72	1,531.00	1,686.00	2,057.00	1,154.00	1,406.00	1,828.00
73	1,614.00	1,781.00	2,173.00	1,217.00	1,476.00	1,905.00
74	1,697.00	1,901.00	2,301.00	1,280.00	1,521.00	1,947.00
75	1,805.00	1,996.00	2,416.00	1,318.00	1,591.00	2,037.00
76	1,888.00	2,091.00	2,510.00	1,381.00	1,661.00	2,110.00
77	1,971.00	2,211.00	2,632.00	1,444.00	1,706.00	2,150.00
78	2,054.00	2,306.00	2,745.00	1,507.00	1,776.00	2,238.00
79	2,137.00	2,401.00	2,834.00	1,570.00	1,846.00	2,308.00
80	2,220.00	2,496.00	2,946.00	1,633.00	1,916.00	2,395.00
81	2,353.00	2,641.00	3,090.00	1,646.00	1,936.00	2,401.00
82	2,486.00	2,736.00	3,202.00	1,659.00	2,006.00	2,468.00
83	2,569.00	2,831.00	3,284.00	1,722.00	2,076.00	2,554.00
84	2,652.00	2,926.00	3,395.00	1,785.00	2,146.00	2,640.00
85	2,735.00	3,021.00	3,475.00	1,848.00	2,216.00	2,704.00
86	2,843.00	3,166.00	3,641.00	1,886.00	2,236.00	2,728.00
87	2,926.00	3,261.00	3,751.00	1,949.00	2,306.00	2,814.00
88	3,009.00	3,356.00	3,860.00	2,012.00	2,376.00	2,875.00
89	3,092.00	3,451.00	3,935.00	2,075.00	2,446.00	2,960.00
90	3,175.00	3,546.00	4,043.00	2,138.00	2,516.00	3,045.00
91	3,258.00	3,691.00	4,208.00	2,201.00	2,536.00	3,069.00
92	3,341.00	3,786.00	4,317.00	2,264.00	2,606.00	3,154.00
93	3,424.00	3,881.00	4,425.00	2,327.00	2,676.00	3,212.00
94	3,507.00	3,976.00	4,493.00	2,390.00	2,746.00	3,296.00
95	3,590.00	4,071.00	4,601.00	2,453.00	2,816.00	3,380.00
96	3,673.00	4,166.00	4,708.00	2,516.00	2,886.00	3,406.00
97	3,756.00	4,261.00	4,815.00	2,579.00	2,956.00	3,459.00
98	3,839.00	4,406.00	4,979.00	2,642.00	2,976.00	3,473.00
99	3,894.00	4,477.00	5,060.00	2,695.00	3,019.00	3,492.00

Note: The annual premium rates for age 71 and above are for renewals only.

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Contact Us & Find Out More

Please contact your AIA Life Planner / AIA authorised representative if you have any questions. We are always happy to help.



Underwritten by:

AIA Bhd. (790895-D)
Menara AIA, 99 Jalan Ampang,
50450 Kuala Lumpur.
Care Line: 1300 88 1899
Tel: 03-2056 1111
Fax: 03-2056 3891

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