

Prepared for: _____ Printed date as: _____

PRODUCT DISCLOSURE SHEET

(Read this Product Disclosure Sheet before you decide to take up Allianz Booster Care. Be sure to also read the general terms and conditions.)

Financial Service Provider : Allianz General Insurance Company (Malaysia) Berhad (“Allianz/”US”/We”/”Our/”)
Product Name : Allianz Booster Care

1. What is the product about?

Allianz Booster Care is an insurance policy that provides compensation for hospitalization and surgical expenses incurred due to an accident and illness covered under the policy. This product offers 5 plans with different level of deductibles. The deductible amount is the portion of Eligible Expense for which Insured Person is liable before any benefits are payable under this Policy. The eligible expenses are accumulated by policy year basis for the purpose of the calculation of deductible. This product offers full coverage for treatment in Singapore.

2. What are the covers/benefits provided?

Deductible* (per annum)	Plans (RM)				
	30,000	40,000	50,000	70,000	100,000
Ordinary Room (up to 150 days)					
Intensive Care Unit (up to 150 days)					
Surgical Fees					
Anaesthetist Fee					
Operating Theatre					
Hospital Supplies & Services					
In- Hospital Physician Visit (daily up to 150 days and maximum of 2 visit per day)					
Pre-Hospital Diagnostic Test (within 60 days)					
Pre-Hospital Specialist Consultation (within 60 days)					
Second Surgical Opinion (within 31days)					
Goods and Services Tax (on taxable supplies and services)					
Emergency Accidental Outpatient Treatment (includes follow-up treatment up to 31 days from the date of accident)					
Daycare Procedure					
Outpatient Cancer Treatment					
Outpatient Kidney Dialysis Treatment					
Post Hospitalization Treatment (within 60 days from the date of discharge from hospital)					
Ambulance Fee (by road only)					
Medical Report Fee					
Home Nursing Care (up to 150 days Per Lifetime)					
Annual Limit					RM 200,000
Lifetime Limit					RM 1,000,000

As charged
(Subject to reasonable and customary charges)

Notes:

- (a) Please refer to the full features and the benefits and scale of benefits in the policy contract
- (b) Duration of cover is for one year. You need to renew your insurance cover annually

3. How much premium do I have to pay?

The total premium that you have to pay may vary depending on the choice of deductible, your age, occupation, location of work and underwriting requirements.

Annual Premiums for Occupation Class 1 & 2

Age Band (age of next birthday)	Premium Rates (RM)				
	Plan 30,000	Plan 40,000	Plan 50,000	Plan 70,000	Plan 100,000
30 days - 5 years	480	410	360	310	270
6 years - 25 years	370	320	280	240	210
26 years - 45 years	580	490	430	370	320
46 years - 55 years	1,000	830	730	620	530
56 years - 70 years	1,660	1,380	1,210	1,020	870
71 years - 80 years	3,820	3,170	2,770	2,320	1,980

Annual Premiums for Occupation Class 3

Age Band (age of next birthday)	Premium Rates (RM)				
	Plan 30,000	Plan 40,000	Plan 50,000	Plan 70,000	Plan 100,000
6 years - 25 years	410	350	310	270	240
26 years - 45 years	650	550	480	410	360
46 years - 55 years	1,120	930	820	690	600
56 years - 70 years	1,870	1,550	1,360	1,140	980
71 years - 80 years	4,320	3,570	3,130	2,620	2,240

Notes:

- Applicants residing in Malaysia and working in Singapore will be subject to 100 % premium loading
- Renewal age is from sixty (60) years up to eighty (80) years
- Premium rates are not guaranteed. Factors contributing to the increase in premiums rates are plan specific, medical inflation, age band, location of work and underwriting requirement. However, past experience does not necessarily reflect future trends. Allianz will notify the Insured Person in writing at least thirty (30) days before the Policy anniversary effecting such revision of the premium rate

4. What are the fees and charges that I have to pay?

Type	Amount
Commissions paid to the insurance intermediary (if any)	15% of premium
Stamp duty	RM10
Service tax (applicable for corporate policy)	6% of premium

Upon implementation of Goods and Services Tax (GST), we, the insurance company, will charge the applicable GST for the applicable period of coverage in accordance with the statutory requirement of GST.

5. What are some of the key terms and conditions that I should be aware of?

(a) Duty of Disclosure

- Consumer Insurance Contract**

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance wholly for purposes unrelated to your trade, business or profession, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in the Proposal Form and/or all the questions required by Allianz fully and accurately and disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied, otherwise it may result in avoidance of contract, claim denied or reduced, terms changed or varied, or contract terminated.

- Non-Consumer Insurance Contract**

Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance for purposes related to your trade, business or profession, you have a duty to disclose any matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be

applied and any matter a reasonable person in the circumstances could be expected to know to be relevant, otherwise it may result in avoidance of contract, claim denied or reduced, terms changed or varied, or contract terminated.

This duty of disclosure for Consumer and Non-Consumer Insurance Contract shall continue until the time the contract is entered into, varied or renewed. You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us, any of the information given in inaccurate or has changed.

- (b) Deductible is defined as that portion of eligible expenses that the Insured is liable for, before any benefits are payable. Deductible is on a per policy year basis
- (c) Cash Before Cover – The premium due must be paid and received by Allianz prior to the commencement of coverage
- (d) Eligibility – Insured Person aged between 30 days to 80 years based on age next birthday
- (e) Qualifying/Waiting Period – the eligibility for the benefits under the policy will only start 30 days after the effective date of the policy except for accidental injuries
- (f) Cooling off period – Insured may return the policy for cancellation within fifteen (15) days the date of delivery of the Policy. Insured will be entitled to full refund less deduction of medical expenses incurred
- (g) The Insured shall give immediate notice to AGIC of any change in his/her name, nature of occupation, business or place Of residence
- (h) Unless renewed, the coverage will cease on expiry date and Allianz shall strictly not be liable for any expenses that are incurred after the expiry date.
- (i) Specified Illnesses shall mean the following Disabilities and its related complications, occurring within the first one hundred and twenty (120) days of Insurance of the Insured Person:
 - Hypertension, diabetes mellitus and cardiovascular disease
 - All tumours, cancers, cysts, nodules, polyps, stones in the urinary system and biliary system
 - All ear, nose (including sinuses) and throat conditions
 - Hernias, haemorrhoids, fistulae, hydrocele, varicocele
 - Endometriosis including disease of the reproduction system
 - Vertebro-spinal disorders (including disc) and knee conditions
- (j) Overseas Treatment (excluding Singapore) of a Disease, Sickness or Injury which is diagnosed in Malaysia and non-emergency or chronic conditions where treatment can reasonably be postponed until return to Malaysia are excluded

6. What are the major exclusions under this policy?

This policy does not cover hospitalization or surgical charges caused by the following events:

- (a) Pre-existing illness unless declared by Insured Person and accepted by Allianz in writing, on or prior to Policy issue date
- (b) Specified illness occurring during the first one hundred and twenty (120) days of continuous cover
- (c) Any medical or physical conditions arising within the first thirty (30) days of the Insured Person's cover or date of reinstatement whichever is latest except for Accidental Injuries
- (d) Plastic/cosmetic Surgery except reconstructive surgery necessary to restore function after an Accident that has occurred during Period of Insurance, circumcision, eye examination, glasses and refraction or surgical correction of nearsightedness (Radial Keratotomy or Lasik) and the use or acquisition of external prosthetic appliances or devices such as artificial limbs, hearing aids, implanted pacemakers and prescriptions thereof
- (e) Dental conditions including dental treatment or oral Surgery except as necessitated by accidental injuries to sound natural teeth occurring wholly during the Period of Insurance
- (f) Private nursing, rest cures or sanatoria care, illegal drugs, intoxication, sterilization, venereal disease and its sequelae, AIDS (Acquired Immune Deficiency Syndrome) or ARC (Aids Related Complex) and HIV related diseases, and any communicable diseases required quarantine by law
- (g) Any treatment or surgical operation for congenital abnormalities or deformities including hereditary conditions
- (h) Pregnancy, child birth (including surgical delivery), miscarriage, abortion and prenatal or postnatal care and surgical, mechanical or chemical contraceptive methods or birth control or treatment pertaining to infertility. Erectile dysfunction and tests or treatment related to impotence or sterilization
- (i) Hospitalization 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 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, and treatments specifically for weight reduction or gain
- (j) Suicide, attempted suicide or intentionally self-inflicted Injury while sane or insane
- (k) War or any act of war, declared or undeclared, criminal or terrorist activities, active duty in any armed forces, direct participation in strikes, riots and civil commotion or insurrection

- (l) Ionizing radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material
- (m) Expenses incurred for donation of any body organ by an Insured Person and costs of acquisition of the organ including all costs incurred by the donor during transplant and its complication
- (n) Investigation and treatment of sleep and snoring disorders, hormone replacement therapy and alternative therapy such as treatment, medical service or supplies, including but not limited to chiropractic services, acupuncture, acupressure, reflexology, bone setting, herbalist treatment, massage or aroma therapy or other alternative treatment
- (o) Care or treatment for which payment is not required or to the extent which is payable by any other insurance or indemnity covering the Insured Person and disabilities arising out of duties of employment of profession that is covered under a Workmen's Compensation Insurance Contract
- (p) Psychotic, mental or nervous disorders, (including any neuroses and their physiological or psychosomatic manifestation)
- (q) Costs/expenses or services of a non-medical nature, such as television, telephones, telex services, radios or similar facilities, admission kit/pack and other ineligible non-medical items
- (r) Sickness or Injury arising from racing of any kind (except foot racing), hazardous sports such as but not limited to skydiving, water skiing, underwater activities requiring breathing apparatus, winter sports, professional sports and illegal activities
- (s) Private flying other than as a fare-paying passenger in any commercial scheduled airlines licensed to carry passengers over established routes
- (t) Expenses incurred for sex changes
- (u) Terrorism
- (v) Any Person residing outside Malaysia

7. Can I cancel my policy?

You may cancel your policy by giving written notice to the insurance company. Upon cancellation, you are entitled to a refund of the premium based on the scale of short period rates provided that you have not made a claim on the policy. The scale of short period rates is available in the policy.

8. What do I need to do if there are changes to my contact/personal details?

It is important that you inform us of any change in your contact details to ensure that all correspondences reach you in a timely manner.

9. Where can I get further information?

Should you require additional information about medical and health insurance, please refer to the insurance info booklet on 'Medical & Health Insurance', available at all our branches or you can obtain a copy from the insurance agent or visit www.insuranceinfo.com.my.

If you have any enquiries, please contact us at:

Allianz Customer Service Center

Allianz Arena
Ground Floor, Block 2A, Plaza Sentral
Jalan Stesen Sentral 5, Kuala Lumpur Sentral
50470 Kuala Lumpur.
Allianz Contact Center: 1 300 22 5542
Email: customer.service@allianz.com.my
  AllianzMalaysia
 allianz.com.my

10. Other types of Medical and Health cover available

- (a) Allianz Care – Individual
- (b) Allianz Care – SMI

IMPORTANT NOTE:

YOU SHOULD READ AND UNDERSTAND THE INSURANCE POLICY AND DISCUSS WITH THE AGENT OR CONTACT THE INSURANCE COMPANY DIRECTLY FOR MORE INFORMATION.

The information provided in this disclosure sheet is valid as at 01/04/2015.