

Comprehensive hospitalisation coverage assures you seamless admission, protecting you from high medical bills



Allianz General Insurance Company (Malaysia) Berhad 200601015674 (735426-V)

Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia
A PIDM member

The benefit payable under eligible product is (are) protected by PIDM up to limits.

Please refer to PIDM's TIPS Brochure or contact Allianz General Insurance Company (Malaysia) Berhad or PIDM (visit www.pidm.gov.my)

Falling ill can be very costly, whether in a private or government hospital

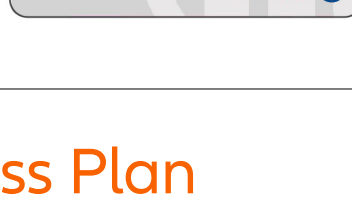
Private Hospital	VS	Government Hospital
Up to RM80,000 ¹	Heart Disease	Up to RM4,000 ¹
Up to RM395,000 ²	Cancer	Up to RM118,500 (50-70% lower than private medical institutions) ⁵
Up to RM75,000 ¹	Stroke	Up to RM4,000 ¹
Up to RM250 per dialysis ³	Kidney Failure	Up to RM162 per dialysis ³
Up to RM40,000 ¹	Kidney Stone	Up to RM10,000 ¹

Sources:

1. RinggitPlus, Government and Private Hospitals in Malaysia: How Much Do They Really Cost? (2018)
2. iMoney, Treatments You Can Get For As Low As RM1 At Malaysian Government Hospitals (2017)
3. The Star, Dialysis subsidy drying up (2013)
4. New Straits Times, Long waits at public hospitals cause anguish (2023)
5. The Star, Affordable cancer treatment for the poor (2014)

Did you know? Surgery wait time at government hospitals may exceed 6 months⁴.

Say goodbye to the wait and hello to faster access at private hospitals with the **Allianz MediCure Medical Card!**



Begin with the Cashless Plan for hassle-free admission!

Opting for a cashless plan means your medical card provides the convenience of seamless admission. Just present your card at the hospital admission counter for a hassle-free process.

Table of Benefits – Hospitalisation and Surgical Coverage

Benefits	Plan 1	Plan 2	Plan 3	Plan 4	Plan 5
Overall Annual Limit	50,000	80,000	120,000	150,000	250,000
Miscellaneous Benefit (Not Subject to Deductible)					
Daily Cash Allowance at Government Hospital	120	150	180	200	250
Hospitalisation and Surgical Benefits					
Room (daily maximum up to 120 days)	150	200	300	400	500
Intensive Care Unit (up to 120 days)					
Surgical Fees					
Hospital Supplies and Services					
Anaesthetist Fees					
Operating Theatre					
In-Hospital Medical Practitioner Visit (up to 120 days and maximum 2 visits per day)					
Pre-Hospital Diagnostic Test (within 60 days prior to hospital admission)				As Charged	
Pre-Hospital Specialist Consultation (within 60 days prior to hospital admission)					
Second Surgical Opinion (within 60 days from consultation with the first Specialist)					
Post Hospitalisation Treatment (valid within 60 days from the date of discharge from hospital)					
Daycare Procedure					
Ambulance Fee					
Medical Report Fee Reimbursement					
Home Nursing Care (up to)	500	1,000	2,000	3,000	4,000
Outpatient Treatment Benefits					
Emergency Accidental Outpatient Treatment (includes follow-up treatment up to 60 days from date of Accident)				As Charged	
Outpatient Cancer Treatment					
Outpatient Kidney Dialysis Treatment					
Bereavement Benefit (Not Subject to Deductible)					
Compassionate Allowance (Accidental causes only)			2,000		

Annual Premium for Cashless Plan (RM)

Age Band	Plan 1		Plan 2		Plan 3		Plan 4		Plan 5	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
30 days – 17 years	901	791	1,071	1,071	1,438	1,208	1,781	1,397	2,048	1,759
18 – 25 years	580	534	778	722	854	854	1,085	999	1,731	1,552
26 – 29 years	697	697	867	867	1,062	1,045	1,324	1,088	1,871	1,678
30 – 39 years	949	949	1,300	1,300	1,508	1,494	1,948	1,653	2,729	2,329
40 – 49 years	1,462	1,343	2,004	1,842	2,292	2,087	2,639	2,608	4,044	3,661
50 – 54 years	2,105	1,934	2,898	2,665	3,474	3,341	4,348	4,176	5,346	4,887
55 – 59 years	2,882	2,649	3,979	3,658	4,771	3,999	5,576	4,996	7,408	6,953
60 – 64 years	4,159	3,860	5,738	5,327	6,722	6,023	7,420	6,674	11,735	9,628
65 – 69 years	5,864	5,444	8,107	6,815	8,484	7,331	10,232	7,632	17,351	14,194
70 – 74 years (renewal only)	7,879	6,704	10,828	8,180	12,272	9,416	13,547	11,339	28,476	24,052
75 – 79 years (renewal only)	9,812	7,735	11,377	10,632	13,084	12,239	15,759	14,742	35,509	29,963

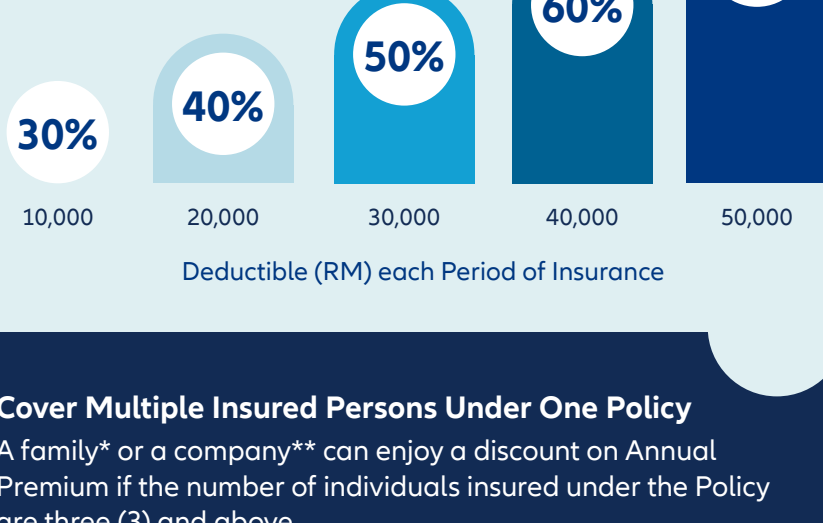
3 ways to save on your annual premium

1 Opt for Non-Cashless plan to enjoy up to 49% cheaper premium than cashless plan
You pay the Hospital first, then Allianz will reimburse you back.

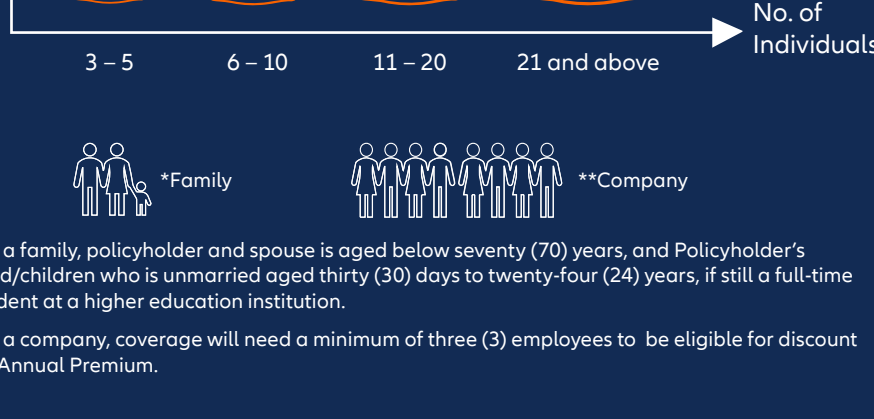
Annual Premium for Non-Cashless Plan (RM)

Age Band	Plan 1		Plan 2		Plan 3		Plan 4		Plan 5	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
30 days – 17 years	492	418	608	575	768	768	960	846	1,593	1,280
18 – 25 years	369	313	472	436	528	528	616	568	1,060	1,060
26 – 29 years	471	471	619	619	735	735	805	805	1,316	1,316
30 – 39 years	678	678	908	908	1,084	1,084	1,205	1,205	1,851	1,582
40 – 49 years	918	769	1,088	1,059	1,305	1,305	1,514	1,393	2,896	2,614
50 – 54 years	1,325	1,137	1,879	1,879	2,168	2,034	2,295	2,118	3,830	3,494
55 – 59 years	1,902	1,750	2,623	2,421	3,164	3,164	3,379	3,379	5,037	4,859
60 – 64 years	2,750	2,522	3,808	3,536	4,482	4,163	5,373	5,025	7,998	6,524
65 – 69 years	3,890	3,491	5,386	4,808	5,638	5,235	6,812	5,668	11,826	9,646
70 – 74 years (renewal only)	5,697	4,656	7,888	6,411	9,130	7,258	10,402	8,336	19,345	16,392
75 – 79 years (renewal only)	7,103	5,090	8,288	7,752	9,686	8,972	11,590	10,841	24,209	20,373

2 Choose a Deductible Option
Deductible is the upfront amount you pay before we pay your bills. Each individual can enjoy a Premium Discount based on the Deductible option selected. The higher the Deductible amount, the higher the savings.



3 Cover Multiple Insured Persons Under One Policy
A family* or a company** can enjoy a discount on Annual Premium if the number of individuals insured under the Policy are three (3) and above.



*For a family, policyholder and spouse is aged below seventy (70) years, and Policyholder's child/children who is unmarried aged thirty (30) days to twenty-four (24) years, if still a full-time student at a higher education institution.
**For a company, coverage will need a minimum of three (3) employees to be eligible for discount on Annual Premium.

Important things to know about claims

Cashless Plan / Panel Hospital

- Download our MyAllianz App to view your medical e-Card.
- Browse through the list of panel private hospital on the MyAllianz App.
- Allianz will liaise with the hospital by issuing a Guarantee Letter and facilitating your admission upon its verification.



Scan this QR code to view the **Panel Hospital listing** under Allianz MediCure.

Non-Cashless Plan / Non-Panel Hospital

- You pay the hospital upon discharge, then submit all bills to Allianz, via the MyAllianz App.
- Allianz will assess the claims against your coverage and reimburse accordingly.

General Notes

1. Managed Care Organisation ("MCO") Fee RM19.44 (inclusive of 8% Service Tax) will be charged separately for Cashless Plan.
2. For Corporate Policyholders, Premiums are further subject to 8% Service Tax.
3. The Service Tax ("ST") amount herein may be subject to change as the ST rate applied shall be based on the prevailing rate(s) in accordance with the laws of Malaysia.
4. Premium is subject to a RM10 Stamp Duty payable on the Contract of Insurance.
5. Being overweight or obese will affect your premium with loadings up to 25%.
6. The total Premium that you pay may vary depending on your choice of deductible, your age, gender and Company's underwriting requirements.

Important Exclusions

This Policy does not cover any hospitalisation, surgery or charges caused directly or indirectly, wholly or partly, by any one of the following occurrences:

1. Pre-existing illness, unless declared by the Insured Person and accepted by the Company in writing, on or prior to Policy commencement date.
2. Specified illness occurring during the first one hundred and twenty (120) days of continuous cover calculated from the commencement of the Period of Insurance.
3. Suicide, attempted suicide or intentional, self-inflicted injury while sane or insane.
4. Any person residing outside Malaysia.

Key Terms and Conditions

1. Waiting Period – Coverage under this Policy is subject to a thirty day (30) waiting period except where hospitalisation is due to a covered Accident.
2. Free-look Period – If you decide not to take up this Policy after it has been issued, you may return the Policy to the Company for cancellation provided your request for cancellation is delivered to the Company within fifteen (15) days from the date you receive the Policy.
3. The Premium rates are not guaranteed and are charged according to the age next birthday at each Policy renewal. The Company reserves the right to revise the Premium rate by giving thirty (30) days Written Notice prior to the next Policy anniversary. The adjustment in Premium rates, if any, will aim to reflect the Company's claim experience, cost of medical treatment, medical inflation and advancement in medical technology. This list is not exhaustive and the Premium rates may also be revised under other justified circumstances. Such changes, if any, shall be applicable to all Policyholders irrespective of their Policy duration and claim experience.

This brochure is valid from 18 July 2024.

Please note that the exclusions, limitations, terms and conditions as stated in this brochure are not exhaustive. Please refer to the actual Policy Wording for detailed benefits, exclusions, limitations, terms and conditions.

This brochure is not a Contract of Insurance. The description of the available cover is only a brief summary for quick and easy reference. The precise terms, benefits, conditions and exclusions that apply are stated in the Policy.

Contact us for more information: