

# PRODUCT DISCLOSURE SHEET

Date: dd/mm/yyyy

Dear Customer,

This Product Disclosure Sheet (PDS) provides You with key information on Your non-participating medical and health insurance. Please refer to the Policy Contract for the full terms and conditions.

Other customers have read this PDS and found it helpful; **You should read it too.**

## 1 What is Group Hospitalisation & Surgical Scheme?

Group Hospitalisation & Surgical Scheme is a non-participating yearly renewable group term plan that provides Hospitalisation and Surgical coverage. This plan also offers optional riders such as Group Out-Patient Clinical, Group Dental and Group Maternity.

## 2 Know Your Coverage/Benefits

**As an illustration, You will receive the following insurance coverage/benefits for a coverage period of 1 year:**

Hospitalisation and Surgical Benefit	Refer to Your Quotation for the benefits & coverage chosen by You.
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**Note:** Please read Your Policy Contract for full details of the coverage.

Your medical and health insurance **excludes** any claim arising from or accelerated by directly or indirectly, wholly or partly, any 1 of the following:

- Pre-Existing Conditions occurring during the Waiting Period, whether disclosed to Us or not. This shall include any cross over Waiting Period admission where the admission date falls within the Waiting Period and the admission continues until after the Waiting Period, in which case the entire Disability is not payable;
- Specified Illnesses occurring during the Waiting Period, whether or not caused by an Accident. This shall include any cross over Waiting Period admission where the admission date falls within the Waiting Period and the admission continues until after the Waiting Period, in which case the entire Disability is not payable;
- any Disability other than Specific Illnesses arising during the Waiting Period except for Accidental Injuries. This shall include any cross over Waiting Period admission where the admission date falls within the Waiting Period and the admission continues until after the Waiting Period, in which case the entire Disability is not payable;
- plastic/ cosmetic Surgery or treatment including but not limited to double eyelids, acne, keloids, scars, skin tags, gynaecomastia, diffused alopecia/ hair loss, or treatment of their complications;
- circumcision unless Medically Necessary for the treatment of a Disease;
- any corrective treatment for refractive errors including but not limited to Orthoptics, Visual Stimulation, Radial Keratotomy, Lasik, Intralase, Zyo optics, Phakic IOL implant or intra-ocular lenses replacement Surgery;
- all corrective glasses or contact lenses, except monofocal intraocular lenses in cataract Surgery. Expenses incurred for contact lens, use of cosmetic topically/ orally/ surgical procedures and any complications arising therefrom;
- the use or acquisition of all types of external prosthetic, external appliances, or corrective devices, including but not limited to artificial limbs, hearing aids, pacemakers, braces, aero chambers and equipment for nebulising, Continuous Positive Airway Pressure (CPAP), Continuous Ambulatory Peritoneal Dialysis (CAPD), orthopedic pads, implantable cardiac defibrillator (ICD), cochlear implants, and any prescriptions thereof or therefor, except for the rental of such equipment, devices or appliances provided by the Hospital for use during Hospitalisation only, subject to the limits as specified in the Schedule of Benefits;
- dental conditions including dental treatment or oral Surgery (except as necessitated by Accidental Injuries as specified in the Accidental Dental Treatment Clause to sound natural teeth occurring wholly during the period of cover); or
- private nursing, rest cures or sanatoria care, illegal drugs, intoxication, sterilisation, venereal Disease and its sequelae, Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) and Human Immunodeficiency Virus (HIV) related Diseases or its sequelae, and any communicable Diseases requiring quarantine by law.

**Note:** This list is **non-exhaustive**. You must refer to the **Policy Contract** and **Additional Information Sheet** for the full list of exclusions.

**If You have any questions or require assistance on Your medical and health insurance, You can:**



Call Us at  
1 300 22 5542



Email Us at:  
[customer.service@allianz.com.my](mailto:customer.service@allianz.com.my)



Scan the QR code above or visit Our website at:  
<https://www.allianz.com.my/group-hospitalisation-and-surgical>

### 3 Know Your Obligations

<b>For Your medical and health insurance, You must pay a premium of:</b>							
Premium	Refer to Your Quotation for the estimated total premium that You have to pay.						
Premium payment duration: <b>1 Year</b>							
<ul style="list-style-type: none"> <li>Please add the applicable government tax if the Policy Owner is a business organisation or where the Policy is absolutely assigned to a business organisation. The applicable government tax shall be based on the prevailing rate and is subject to change in accordance with the laws of Malaysia.</li> </ul>							
<b>You also have to pay the following fees and charges (included as part of Your Policy):</b>							
Stamp Duty (charged per Policy issued)	RM10.00						
Commission (included in the payable premium)	The maximum commission to the intermediary (if any) which is chargeable from Your premium is ten percent (10%). Below <b>example</b> shows the commission payable as nominal figures and as a percentage,						
	<table border="1"> <thead> <tr> <th>Type</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>The total annual premium for Your Policy</td> <td>RM 8,416.00</td> </tr> <tr> <td>Commission paid to the intermediary</td> <td>10% of Your premium or RM 841.60</td> </tr> </tbody> </table>	Type	Amount	The total annual premium for Your Policy	RM 8,416.00	Commission paid to the intermediary	10% of Your premium or RM 841.60
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Please refer to the **Quotation** for more details.

### 4 Other Key Terms

- You must disclose all material facts such as medical condition (if applicable) and state the age of Your Employee(s) and their Dependant(s) correctly. Otherwise, You may risk having their claim rejected or Policy terminated.
- You are allowed a grace period of 60 days from the premium due date to pay Your premium, during which period Your Policy shall remain in force. If any premium remains unpaid at the end of the grace period, Your Policy shall lapse.
- Waiting Period: The eligibility for Hospitalisation and Surgical benefit will only start after the following periods from the Eligibility Date or effective date of plan conversion or upgrade, whichever is later:
  - 30 days: for any Disability other than Specified Illnesses; and
  - 120 days: for Specified Illnesses; and
  - 120 days: for Pre-Existing Conditions.
- Unless renewed, the coverage will cease on the expiry date and We shall strictly not be liable for any expenses that take place after the expiry date.
- If an Insured Member elects or is referred by the attending Physician to receive treatment outside Malaysia, the benefits payable in respect of such treatment shall be limited to the Reasonable and Customary Charges that are Medically Necessary for such equivalent local treatment in Malaysia and shall exclude the cost of transportation to the place of treatment. For the avoidance of doubt, if there is no equivalent local treatment in Malaysia, then the benefits in respect of any treatment outside Malaysia shall be limited to the cost of the currently available treatment in Malaysia for the Insured Member's condition as recommended by the attending Physician.
- The premium rates are not guaranteed and factors likely to affect in premium adjustments on renewal will be claims experiences, significant changes in headcount and medical inflation and We reserve the right to revise the premium rates.

**Note:** This list is **non-exhaustive**. You should refer to the **Policy Contract** and **Additional Information Sheet** for the full list of terms and conditions.

### ? Can I cancel my Policy?

Yes, You may cancel Your Policy by giving a written notice to Us as follows.

- Free-look period:** You may cancel Your Policy within 15 days after Your Policy has been delivered to You. We will refund to You the premium paid without interest less any expenses incurred for medical examination.
- After free-look period:** Provided that the Policy is still in force and effect, you may cancel Your Policy. In such event, provided no claim has been made during the current Policy Year, You shall be entitled to a refund of a pro-rated premium without interest less any expenses incurred for medical examination upon cancellation of the Policy.

**The benefit(s) payable under eligible product is(are) protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Allianz Life Insurance Malaysia Berhad or PIDM (visit [www.pidm.gov.my](http://www.pidm.gov.my)).**