

## EzyMedical – Frequently Asked Questions (FAQ):

### About EzyMedical

**1. What is EzyMedical? What does it cover?**

EzyMedical is a pure medical plan that provides medical coverage renewable up to age 85. This product does not provide any savings or investment elements. Please refer to the Product Disclosure Sheet or Policy on detailed exclusions, terms and conditions of the plan.

**2. Who is this product suitable for?**

This product is suitable for children and adult who do not have any medical coverage or to complement any shortage of their existing medical plan.

**3. Who is eligible to sign up or purchase?**

Malaysians between 17 and 55 years old (age next birthday) are eligible to purchase, subject to the fulfillment of health questions. For children below age 17, parents or legal guardians may sign up for them to get them covered under this medical plan.

**4. What is age next birthday?**

The acceptance of this application is based on your age next birthday. Age next birthday simply means the age of your next birthday. If you have celebrated your 30th birthday, your next birthday will be 31st, so your age next birthday will be 31 years old.

**5. There are 2 plans, which plan is suitable for me?**

The suitability of the plan would depend on your affordability and your needs.

**6. What is annual limit?**

Annual limit is the maximum amount that you are eligible to claim for your medical expenses in every policy year. Annual limit will be refreshed every policy year.

**7. What should I do if I do not have sufficient annual limit to cover my medical charges?**

You will have to pay the differences between your eligible annual limit and the medical charges. Annual limit will be refreshed at every policy anniversary.

**8. What is deductible?**

Deductible is the amount of eligible hospitalisation expenses incurred that must be paid by you for each policy year before any benefits are payable by Us.

**9. If I purchase this plan with RM1,000 deductible, how does it work?**

You are required to pay RM1,000 of the eligible hospital & surgical expenses incurred for each policy year. We will pay the balance of the eligible expenses after deducting the first RM1,000.

**Example 1: Hospitalisation expenses**

The eligible hospitalisation expenses = RM10,000

Deductible amount per policy year = RM1,000

Amount to be paid by you = RM1,000

Amount to be paid by us = RM10,000 – RM1,000 = RM9,000

**Example 2: Outpatient expenses**

	<p>The eligible Outpatient expenses = RM5,000</p> <p>Amount to be paid by you = RM1,000</p> <p>Amount to be paid by us (by Reimbursement basis) = RM4,000</p> <p>All eligible expenses incurred under the following circumstances are not subject to deductible:</p> <ol style="list-style-type: none"> <li>Medical services in a Malaysian government healthcare facility;</li> <li>Emergency treatment; or</li> <li>Post-hospitalisation treatment for follow-up treatments for cancer or kidney dialysis.</li> </ol>
<b>10. How is the premium amount determined?</b>	<p>You are charged a certain amount of premium based on the plan type, deductible option, occupation and your age next birthday at the commencement date. The premium may increase in accordance to your age next birthday at every policy anniversary. You will need to pay the premium until age 85. Premium rates are non-guaranteed and we reserve the right to revise the premium rate by giving a 30-day prior notice.</p>
<b>11. How to pay and what is the frequency to pay the premium for the policy?</b>	<p>You may pay the premium via credit card / debit card. You may opt to pay the premium monthly, or yearly. You may continue using the credit card / debit card or switch to your bank saving account to pay for the subsequent premium.</p>
<b>12. How do I change my credit/debit card used for premium deduction?</b>	<p>You may walk in to any of our branches and fill up a Request For Change form, and a Premium Payment through Visa / Master Card form.</p>
<b>13. Why is my premium cheaper when I choose the plan with higher deductible?</b>	<p>It is cheaper because you will need to bear higher eligible hospitalisation expenses for each policy year.</p>
<b>14. How do I know if I need a low or high deductible medical plan?</b>	<p>If your existing medical plan or employer coverage is insufficient, then this plan will complement your existing medical coverage to provide additional medical protection.</p> <p>If you can afford to bear a higher amount of eligible hospitalisation expenses for each policy year, hence enjoy a lower premium rate for this medical plan.</p>
<b>15. Can I get a medical plan if I am above age 55 years old?</b>	<p>You are not eligible for this medical plan if you have exceeded your 55<sup>th</sup> birthday. However, we still have other similar types of medical plans which may be suitable for you, kindly contact Etiqa Online by calling 1-300-13-8888.</p>
<b>16. Can I get a medical plan if I am not eligible for this medical plan after answering the underwriting questions?</b>	<p>Yes, we still have other similar types of medical plans which may be suitable for you, kindly contact Etiqa Online by calling 1-300-13-8888.</p>
<b>17. Can I change my plan?</b>	<p>You may change from a higher plan to a lower plan at policy anniversary, with no underwriting.</p>
<b>18. Will there be any medical examination for this plan?</b>	<p>No medical examination is required. Your application will either be accepted or rejected based on our pre-determined requirements.</p>

<b>19. What happens if I stop paying the premium?</b>	There is a grace period of 31 days from the premium due date given to you to pay the premium. You are still covered within the grace period. If the premium due is not paid within the grace period, your policy may lapse thereafter and you will not be entitled for the benefits shall the covered event (Inpatient & Day Care Surgery Benefits, Outpatient Benefits and Other Benefits) occurs.																												
<b>20. How can I sign up? Can I go through an agent?</b>	You may sign up this plan through our website. This is an online product and it is not offered through any of our agents. There is no commission charged on this plan.																												
<b>21. Can I get more than one policy?</b>	Yes, you can sign-up multiple EzyMedical policies.																												
<b>22. How will I receive confirmation on my application? When does the cover start?</b>	The confirmation of your application is immediate through the website. The cover will start on the day your application is accepted with payment made, with a policy document and payment receipt emailed to you.																												
<b>23. Can I cancel the policy?</b>	<p>You may cancel your policy with a written instruction to us within 15 days after the policy has been received by you. We will then refund the premium received to you. However, no refund can be made when a claim has been admitted. However, if you cancel the policy after the 15 days, you are entitled to a refund of the partial premium as follows provided that you have not made any claims during the policy year:</p> <table border="1"> <thead> <tr> <th>Period Not Exceeding</th><th>Refund of Annual Premium</th></tr> </thead> <tbody> <tr><td>15 days (renewal only)</td><td>90%</td></tr> <tr><td>1 month</td><td>80%</td></tr> <tr><td>2 months</td><td>70%</td></tr> <tr><td>3 months</td><td>60%</td></tr> <tr><td>4 months</td><td>50%</td></tr> <tr><td>5 months</td><td>40%</td></tr> <tr><td>6 months</td><td>30%</td></tr> <tr><td>7 months</td><td>25%</td></tr> <tr><td>8 months</td><td>20%</td></tr> <tr><td>9 months</td><td>15%</td></tr> <tr><td>10 months</td><td>10%</td></tr> <tr><td>11 months</td><td>5%</td></tr> <tr><td>Period exceed 11 months</td><td>No refund</td></tr> </tbody> </table> <p>Note: There is no premium refund for monthly cases.</p>	Period Not Exceeding	Refund of Annual Premium	15 days (renewal only)	90%	1 month	80%	2 months	70%	3 months	60%	4 months	50%	5 months	40%	6 months	30%	7 months	25%	8 months	20%	9 months	15%	10 months	10%	11 months	5%	Period exceed 11 months	No refund
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<b>24. How to file a claim in case of covered events happen (Inpatient &amp; Day Care Surgery Benefits and Other Benefits)?</b>																													

	<p>a) If you choose to visit a panel hospital:</p> <p>For hospital admission, no medical card is required, just present your identity card and inform the hospital that you are covered with Etiqa. We will pay the eligible hospitalisation expenses that you incurred subject to the annual limit of the plan you signed up. For deductible, you will need to pay for eligible expenses up to the deductible amount per policy year before we cover the remaining eligible expenses.</p> <p>b) If you choose to visit a non-panel hospital:</p> <p>You are required to pay for the hospitalisation expenses upon discharged. Submit the list of required documents to Etiqa for reimbursement of the eligible hospitalisation expenses within 30 days from discharge date.</p> <p>For further information, visit our website at <a href="http://www.etiqa.com.my">www.etiqa.com.my</a> and download the claim guide. List of Panel Hospitals are available in the claim guide. We can be contacted via email at <a href="mailto:info@etiqa.com.my">info@etiqa.com.my</a> or call Etiqa Online at 1-300-13-8888.</p>
<b>25.</b>	<p><b>How to file a claim in case of covered events happen (Outpatient Benefits, Cancer and Dialysis Treatments)?</b></p> <p>You are required to pay for the Outpatient expenses, Cancer and Dialysis Treatments. Submit the list of required documents to Etiqa for reimbursement of the eligible Outpatient expenses, Cancer and Dialysis Treatments within 30 days from discharge date.</p> <p>For further information, visit our website at <a href="http://www.etiqa.com.my">www.etiqa.com.my</a> and download the claim guide. List of Panel Hospitals are available in the claim guide. We can be contacted via email at <a href="mailto:info@etiqa.com.my">info@etiqa.com.my</a> or call Etiqa Online at 1-300-13-8888.</p>
<b>26.</b>	<p><b>Will I have a medical card?</b></p> <p>There is no medical card issued for this policy. However, in a more convenient way, upon hospital admission, just present your identity card and inform the Panel hospital of your coverage by Etiqa.</p>
<b>27.</b>	<p><b>Can I access the medical plan if I miss a premium payment?</b></p> <p>If you missed any premium payment and provided that your policy has not lapsed, you may be able to access the medical plan, however, you may face some interruption during the discharge process from the hospital and you will need to pay back the premium due.</p>
<b>28.</b>	<p><b>What if I lose or do not receive my policy documents? Or if I need to update my personal information or contact details?</b></p> <p>You may email us at <a href="mailto:info@etiqa.com.my">info@etiqa.com.my</a> or call Etiqa Online at 1-300-13-8888.</p>
<b>29.</b>	<p><b>What if I misstate or do not disclose any of the required information during application?</b></p> <p>Misstatement or non-disclosure of material information will result in voidance of the policy, or your claim not being paid. To prevent these unwanted events, you are required to disclose all relevant information, including medical condition and age, correctly.</p>
<b>30.</b>	<p><b>Do I enjoy a tax relief on the premium paid?</b></p> <p>You may use the Medical Insurance premium paid for tax relief, as per current Malaysian tax regulation and subject to the Inland Revenue Board's approval.</p>
<b>31.</b>	<p><b>Who can I contact for further information?</b></p> <p>You may email us at <a href="mailto:info@etiqa.com.my">info@etiqa.com.my</a>, call Etiqa Online at 1-300-13-8888, or visit our website at <a href="http://www.etiqa.com.my">www.etiqa.com.my</a> for further information. A 24-hour Live Chat is also available on our website for enquiry.</p>