



## PRODUCT DISCLOSURE SHEET

Read this Product Disclosure Sheet before you decide to purchase the SmartHealth. Be sure to also read the general terms and conditions.

**Product: SmartHealth**

**Master Policyholder: Bonuskad Loyalty Sdn Bhd**

**Date Issued: 01<sup>st</sup> December 2024**

### 1. What is this product about?

- (a) This product provides compensation in the event of accidental Injury or Illness as applicable.
- (b) Coverage provided is worldwide and is valid for 24 hours.
- (c) This cover is offered to the customers/members of the Master Policyholder for themselves, and coverage can be extended to include their legal spouse and/or children.

### 2. What are the covers/benefits provided?

This policy covers:

- (a) Daily Hospital Income - up to a maximum of 180 days
- (b) Surgical Cash – up to a maximum of 2 Surgeries per annum
- (c) Recovery Cash
- (d) Medical Expenses Reimbursement (Accident only)

You may extend the policy to provide the following benefits by paying additional premium:

- (a) Home Nursing (Accident only)
- (b) In-hospital Doctor Visit (Accident only)

*Note: Please refer to the schedule of benefits which is attached in your Policy Wording for further details of the benefits.*

Duration of cover is for one month. Your coverage is renewed automatically upon payment of premium subject to the renewal condition as stated in your Policy Wording.

### 3. How much premium do I have to pay?

- (a) You may refer to the [premium table](#) for the relevant premium applicable to you.
- (b) Premium is payable on a monthly basis.
- (c) Please keep the proof of premium payment for any future reference.

### 4. Who is the insurance intermediary/agent?

Not applicable.

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

Type	Amount
Commission paid to the insurance intermediary/agent (Included in the premium)	No commission is applicable
Service Tax	8% of premium

*Note: A stamp duty of RM10.00 is paid by the Master Policyholder.*

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

#### (a) Duty of disclosure:

- (i) You must take reasonable care to ensure that all your answers to the questions are full, complete, correct and honest and to the best of your knowledge.
- (ii) You also have a duty to inform us of any change in the information given to us earlier before we issue the policy schedule to you, before you renew or change any of the terms of your policy. If you don't, your policy may be cancelled, or treated as if it never existed, or your claim rejected or not fully paid.

#### (b) Claims:

- (i) All claims must be notified to us within 30 days from the date of loss.
- (ii) All supporting documents proving the loss must be submitted 90 days from the date of loss.
- (iii) No claim will be admissible if notified after 1 year from the date of loss.
- (iv) All claims will be paid to you. In the event of death, claims will be paid to your nominee or estate.



(c) **Number of policies:**

You can only be covered under 1 policy in respect of this insurance.

(d) **Age:**

- (i) The insured must be 18 to 60 years to qualify for cover which is renewable at our discretion up to 65 years.
- (ii) Your child/s must be 30 days to 19 or 23 years, if financially dependent and are in full-time education.
- (iii) The age of an insured person is based on the age as of their last birthday.

(e) **Renewal:**

- (i) Premium rates are not guaranteed.
- (ii) Revision of premium at the time of renewal is based in the portfolio claim experience.
- (iii) A 30 days written notice will be provided to you prior to the change.

**7. What are the major exclusions under this policy?**

This policy does not cover death or injury caused by or to:

- (a) members of the armed forces, police, security guards, bodyguard, firemen, racing drivers/riders, stuntman, air crew, ship crew, fisherman, off-shore workers, divers, miners, quarry workers, loggers, tunnellers and professional sportsmen;
- (b) suicide or intentional self-inflicted injuries;
- (c) during air travel unless as a fare-paying passenger;
- (d) violation of law and any payment that would violate any government prohibition or regulation.
- (e) drug-related accidents;
- (f) mental or nervous disorders;
- (g) any pre-existing conditions manifested, contracted and have reasonable knowledge of prior to the policy effective date;
- (h) Acquired Immune Deficient Syndrome (AIDS), Human Immune Deficiency Virus (HIV);
- (i) driving or riding in any type of race using a motorized vehicle;
- (j) nuclear, chemical or biological materials;
- (k) war.

*Note: This list is non-exhaustive. Please refer to the policy contract for the full list of exclusions under this policy.*

**8. Can I cancel my policy?**

- (a) You may cancel your policy by giving us 30 days written notice. Your cover will continue for the duration which premium has been received and will terminate upon expiry of such period;
- (b) We can cancel this policy by giving you 30 days written notice. Your cover will continue for the duration which premium has been received and will terminate upon expiry of such period.

**9. 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 life profile which would affect the risk profile.

**10. Where can I get further information?**

Should you require additional information about this policy, please refer to the Insurance Info booklet on "Personal Accident Insurance", available at all our branches or visit the following website: [www.insuranceinfo.com.my](http://www.insuranceinfo.com.my)

If you have any enquiries, please contact us at:

AIG Malaysia Insurance Berhad (200701037463)  
P O Box 11768  
50756, Kuala Lumpur  
Phone : 1800 88 8811 / 603 2118 0188  
Fax : 603 2118 0288  
Email : AIGMYCare@aig.com



**11. Other types of Personal Accident cover available**

Please refer to our website at: [www.aig.my](http://www.aig.my)

**IMPORTANT NOTE:**

**YOU ARE ADVISED TO NOTE THE SCALE OF BENEFITS FOR DEATH AND DISABLEMENT IN YOUR INSURANCE POLICY. YOU MUST NOMINATE A NOMINEE AND ENSURE THAT YOUR NOMINEE IS AWARE OF THE PERSONAL ACCIDENT POLICY THAT YOU HAVE PURCHASED.**

**YOU SHOULD READ AND UNDERSTAND THE CONTRACT TERMS AND DISCUSS FURTHER WITH THE COMPANY IF THERE ARE ANY TERMS THAT YOU DO NOT UNDERSTAND BEFORE ACCEPTING THE POLICY CONTRACT. IF THERE ARE ANY QUESTIONS REGARDING THE TERMS AND CONDITIONS OF THIS PRODUCT DISCLOSURE SHEET, THE INSURED PERSON MAY CONTACT THE COMPANY.**

**BY ACCEPTING THE POLICY CONTRACT, YOU ACKNOWLEDGE THAT THE KEY CONTRACT TERMS HAVE BEEN ADEQUATELY EXPLAINED BY THE AGENT OR COMPANY TO YOU AND THAT THE POLICY CONTRACT OFFERED IS SUITABLE FOR YOUR INSURANCE NEEDS.**

AIG Malaysia Insurance Berhad is licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.

The information provided in this disclosure sheet is valid as at 01<sup>st</sup> December 2024.