



## **Frequently Asked Questions**

### **1. Who is eligible to buy SmartMedi Outpatient?**

If you are a Malaysian citizen in the age group of 3 years old to 45 years old as of your next birthday at the time of application under this policy, and residing in Malaysia with a Malaysian National Registration Identity Card (NRIC) Number, you are eligible to purchase. We offer renewal up to age 46 as of your next birthday.

For a child aged between 3 to 18 years old next birthday at the time of application, the parent or legal guardian must also be covered under **SmartMedi Outpatient** policy. The policy issued must be to a parent or guardian who is aged 18 years old and above who is a Malaysian Citizen residing in Malaysia who possesses a Malaysian National Registration Identity Card (NRIC) Number. Each of the child member to be insured in this policy must submit evidence of insurability such as birth certificate and any relevant documents from the authority.

### **2. Can I add my spouse or children into the policy?**

No, this plan is only for individual policies at the moment.

### **3. Will there be any medical examination?**

No, all you need to do is select the plan you are interested in and complete the simple health declaration truthfully to proceed with the enrolment.

### **4. Can I request to change my plan after policy is issued?**

Any increase or decrease in the insurance coverage for the Insured Person which is due to a change in Plan will become effective only on the next Policy Anniversary date. Any increase in the insurance coverage shall be subject to further evidence of health satisfactory to the Company.

### **5. When and where can I use my medical card?**

Medical card will be issued to eligible insured member who is accepted as standard risk upon inception of the policy. Simply flash your medical card at any of our Panel Providers (listing available on [www.axa.com.my/smo](http://www.axa.com.my/smo)) after 90 days from initial policy inception. Please note that you may be required to make the co-payment as stipulated in your Schedule of Benefits at the clinic.

If you do not have a medical card, the eligible medical expenses can be reimbursed on Pay and File basis.

### **6. What is co-payment?**

Co-payment is the percentage amount of the eligible claim amount that will be borne by the Insured Person. The rest of the eligible claim amount will be paid by AXA Affin General Insurance Berhad.

Example: **SmartMedi Outpatient** coverage for an Individual based on Basic Plan Option

- Total medical expenses for Specialist Treatment\*\* : RM 300
- 25% co-payment per visit : (RM 75) [25% of RM 300: will be borne by member]
- Expenses eligible for claim under **SmartMedi Outpatient** policy : **RM 225**

*\*\*Note: Assuming all medical expenses are payable and within the terms & condition of the policy*



**7. Can SmartMedi Outpatient replace my other Hospitalisation and Surgical medical plans?**

No, as **SmartMedi Outpatient** is a standalone outpatient product while primarily covers for medical expenses incurred for visitation to General Practitioner and/or Specialist Clinic without the need for hospitalisation.

It complements other Hospitalisation and Surgical Medical plans which cover medical expenses relating to hospitalisation, to offer a comprehensive medical protection for both inpatient and outpatient coverages.

**8. Does this plan cover vaccination?**

No, this plan does not cover medical expenses relating to vaccination.

**9. Can I purchase more than one SmartMedi Outpatient policy?**

No, you are only allowed to purchase one plan per Insured Person. In the event that you are covered under more than one plan, we will consider that you are to be insured under the policy which provides the highest benefit. When the benefit under each of such policies is identical, we will consider that you are to be insured under the policy first issued.

**10. My policy lapsed. Can I reinstate my policy?**

Unfortunately, no reinstatement of policy is allowed.

**11. Does this plan qualify for income tax relief?**

The insurance premium may be used for tax relief for personal insurance, as per current tax regulation subject to Inland Revenue Board's approval.

**12. Are the premiums guaranteed?**

The renewal premiums payable will increase with age and is not guaranteed. On each such anniversary, this policy is renewable at the premium rates in effect at that time as notified by us. We will give you at least 30 days written notice in the event of premium revision.

**13. When do I renew my insurance? Is the renewal guaranteed?**

This is a yearly renewable policy and the renewability is not guaranteed.

This policy is renewable at the option of Policyholder until the occurrence of any of the following:

- a) non-payment of premium or premium not made on time;
- b) fraud or misrepresentation of material fact during application;
- c) the policy is cancelled at the request of the Policyholder;
- d) the Insured Person ceases to qualify as a dependant based on the definition of the policy;
- e) the Insured Person attains the coverage age limit specified;
- f) on the death of the Insured Person; and
- g) termination of coverage for all policies in a certain market and the Company withdraws this policy completely from the market in accordance with the Portfolio Withdrawal Condition.

**14. What are the disadvantages of switching policy from one insurer to another?**

One of the main disadvantages is that if your current health status is less favourable to the new insurer, new terms may be imposed to exclude such illness. To ensure continuous cover is provided, you are advised to check with us on the accepting terms prior to your policy expiry date.



## **Claims Related Questions**

### **1. Can I claim for normal cough, flu and fever?**

Yes, you can. **SmartMedi Outpatient** is a standalone outpatient plan which provides coverage for medical expenses incurred for visits to General Practitioner and/or Specialist Clinics without the need for hospitalisation.

### **2. What is cashless facility?**

This means that you do not have to pay for the full outpatient medical bills if you seek medical consultation or treatment at any of our Panel Clinics listed on [www.axa.com.my/smo](http://www.axa.com.my/smo).<sup>\*</sup> We will pay for your eligible incurred outpatient medical bills, should the nature of accident or illness be covered under your policy.

Depending on the plan that you have purchased, you may be required to make the co-payment as stipulated in your schedule of benefits at the clinic. If you do not have any Medical Card facility, you will need to pay upfront and seek eligible reimbursement from us.

*\*Kindly note that AXA Affin General Insurance Berhad reserves the right to update and vary the panel clinic listing as and when deemed necessary.*

### **3. Can I seek treatment at a non-panel clinic?**

Yes, you can. Eligible medical expenses incurred at non-panel clinic will be reimbursed on Pay and File basis (member to pay upfront and seek eligible reimbursement from AXA Affin General Insurance Berhad) and you will need to notify us within 30 days from the date of treatment.

Please submit the claim form, original itemized bills, receipts and other relevant claims documents for us to process your claim submission.

### **4. How do I submit my claims and what are documents required?**

You may refer to the step-by-step guide and download the claims form [here](#).

### **5. What is the procedure to visit the Specialist?**

You can visit the Specialist Clinics with referral letter from your prior visit to the General Practitioner relating to the same illness. The referral letter will be valid for a period of 180 days from the date of issuance of referral letter by the General Practitioner or end of your insurance coverage period whichever is earlier.

### **6. Does SmartMedi Outpatient cover Long Term Medication?**

Long Term Medication for the listed Chronic Illnesses (Diabetes, High Blood Pressure, Asthma, Arthritis, Ischaemic Heart Disease/ Coronary Heart Disease, Stroke, Epilepsy, Gout, Hyperlipidaemia, Parkinson, Peptic Ulcer, Psoriasis, Thyroid and conditions arising therefrom or associated therewith) shall be covered subject to the following:

- ✓ the pre-existing condition(s) was declared in the proposal form at the point of application and is(are) accepted by us in writing.
- ✓ all insured members are to seek treatment at a legally registered General Practitioner. Treatment & Services rendered by a legally registered Specialist must be recommended by a legally registered General Practitioner in writing. Only drugs prescribed for use within one (1) month after receiving treatment shall be reimbursable



**7. Does SmartMedi Outpatient cover diagnostic tests other than X-ray and laboratory tests?**

Yes, you can claim for any laboratory or imaging tests as deemed necessary by the General Practitioner or Specialist for diagnostic purposes (e.g. MRI, ECG, etc). However, you will not be able to claim for any COVID-19 test as it falls under the exclusion for this product.

**8. Are there any limit on the number of times I can use the outpatient services per year?**

Yes, depending on the plan you choose, there are specific limits for Specialist Consultations, Diagnostic X-ray, Laboratory Tests and Clinical Procedures.

However, you can enjoy General Practitioner Consultations including medication for an unlimited number of times per year. You can only visit each category of outpatient services once per day.

**9. With referral letter from General Practitioner, can I consult Medical Officer in Accident & Emergency Ward?**

No. Referral letter from General Practitioner can only be used for visit to Specialist.

**10. Can I purchase medication over the counter in Pharmacy?**

No, except for long term medication and it must be supported with doctor's prescription letter.

**11. What is the validity of prescription letter for long term medication?**

Validity of prescription letter is 6 months from the date of issuance of the letter. Member is required to provide a new prescription letter after 6 months expiry date.

**12. Can I claim for outpatient physiotherapy treatment?**

No, outpatient physiotherapy treatment is not covered under **SmartMedi Outpatient** policy.

**13. Can I claim for teleconsultation and telemedicine?**

Yes, you are eligible to claim for teleconsultation and telemedicine through DoctorOnCall.

**14. Who is DoctorOnCall?**

DoctorOnCall is Malaysia's first online medical video consultation platform that combines advanced video and voice technologies with the medical knowledge and experience of Malaysia's top doctors. They provide fast and easy access to Malaysia's doctors and healthcare providers through smartphones and computers anytime and anywhere.

**15. Is there any subscription fee for the services provided by DoctorOnCall?**

The one-time subscription fee for DoctorOnCall is fully borne by AXA Affin General Insurance Berhad with no payment required from you. Also, there is no impact to your policy limit by the subscription fee.

**16. Can I obtain long term medication through DoctorOnCall?**

Yes, you can claim for long term medication with prescription through DoctorOnCall.

**17. Is Co-Payment applicable for DoctorOnCall?**

Yes, Co-Payment for basic plan is applicable for DoctorOnCall and the payment shall be made directly through DoctorOnCall platform.

**18. Can I use my cashless facility on DoctorOnCall?**



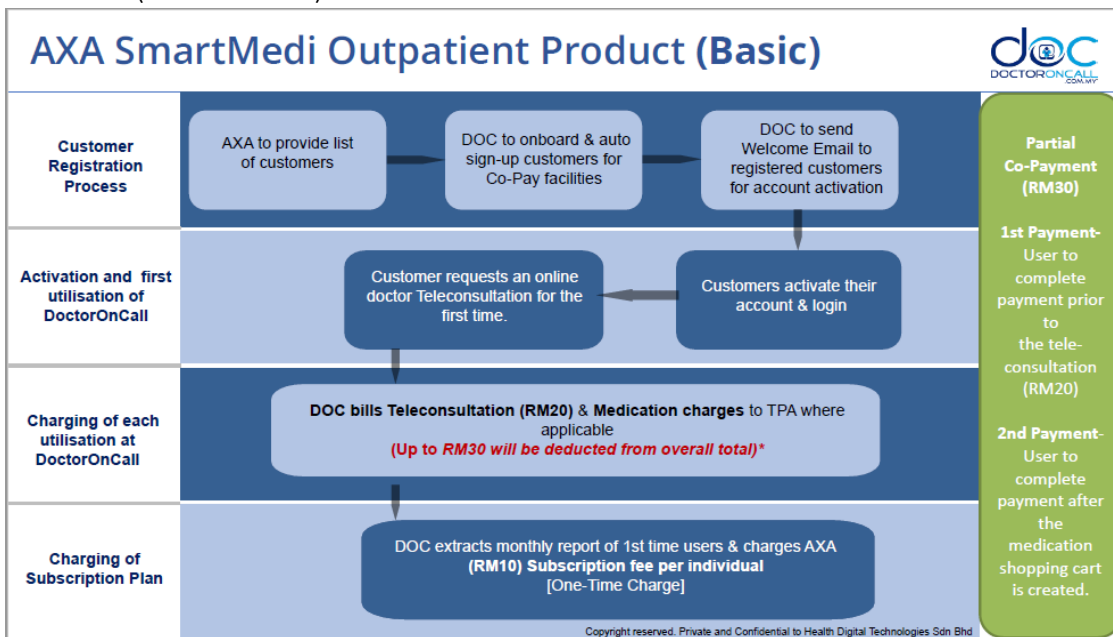
Yes, if you are standard risk with the medical card, you are not required to pay for the teleconsultation and telemedicine on DoctorOnCall. However, any applicable co-payment is still required to be paid to DoctorOnCall.

If you are sub-standard risk with no medical card, you can also use DoctorOnCall and seek eligible reimbursement (subject to deduction of co-payment if applicable). The reimbursement process is the same as the process if you were to visit a clinic.

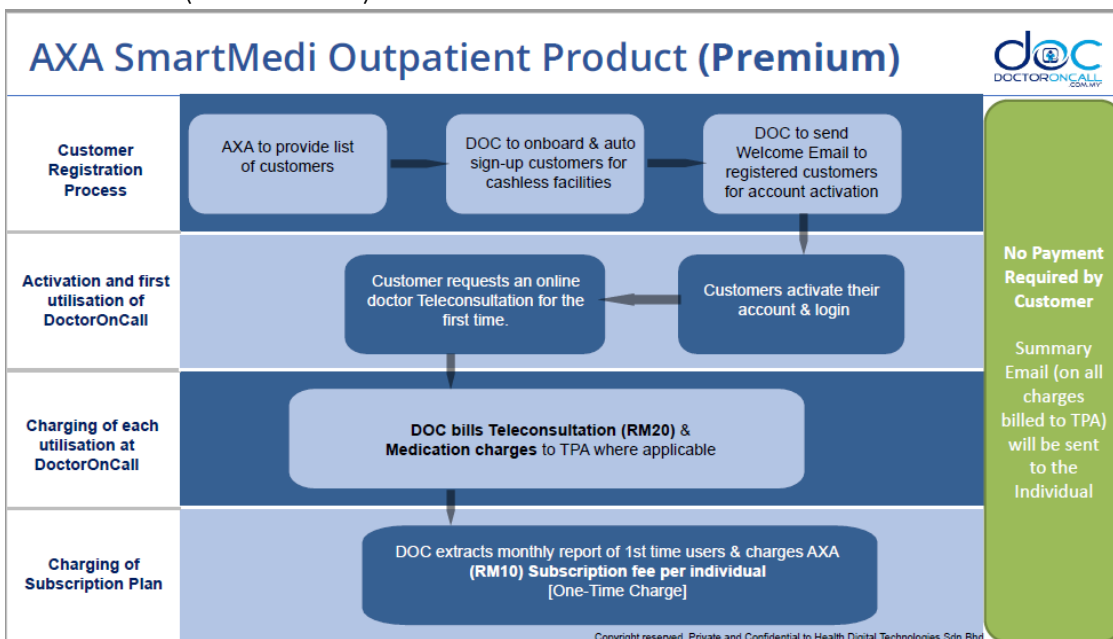
**19. What is the process flow to register and utilize DoctorOnCall?**

The process flow is as follow:

a. Basic Plan (Standard Risk) – Cashless Basis

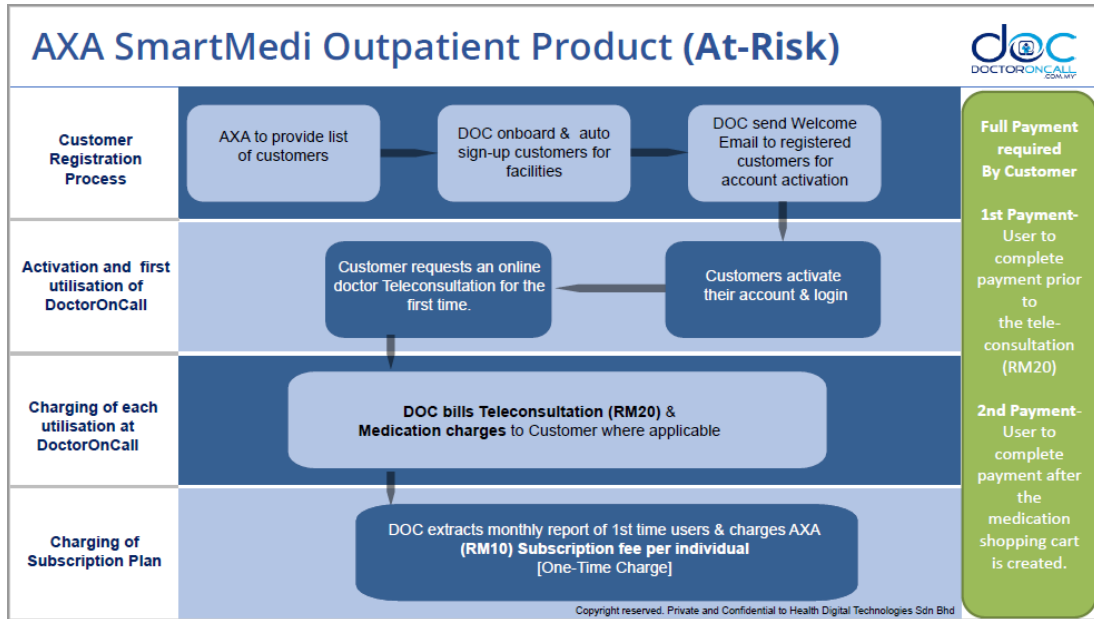


b. Premium Plan (Standard Risk) – Cashless Basis





c. Basic & Premium Plan (Sub-Standard Risk) – Reimbursement Basis



Note: The payments made to DOC can be reimbursed from AXA Affin General Insurance where applicable.