

ALLIANZ MEDICAL PROTECT Frequently Asked Questions (FAQs)

A. Product

1. What is a deductible?

Deductible refers to the amount that a Policyholder has to pay before Allianz will make any payout. Allianz is liable (subject to Policy terms and conditions) to pay the claim amount only when it exceeds the deductible.

2. How is Allianz Medical Protect beneficial to you?

Allianz Medical Protect provides comprehensive coverage for hospitalisation as well as outpatient General Practitioner (GP) and Specialist (SP) expenses. As a value-added service, you may speak to a doctor through our video consultation option and have your medicine delivered to your doorstep within 3 hours between 8am to 11pm at no additional costs when you purchase the optional outpatient riders.

3. I have existing Shield plans, do I need this plan?

Allianz Medical Protect provides comprehensive coverage for hospitalisation as well as outpatient treatments. You should buy a plan that meets your needs, therefore do consider what you would like to be covered for and whether you can afford the plan in the long term. There may be duplicate coverage when you have more than one medical insurance plan. Choosing the right deductible and coverage amount can help to provide you with comprehensive protection from rising costs of medical expenses at an affordable cost.

4. Does this plan cover my family? How do I enroll my kids / family?

You may apply as a Policyholder for covering your legal spouse and your child/ren under Allianz Medical Protect, with your spouse and your child/ren as the insured. Spouse is defined as the legally married partner of the Policyholder according to the Singapore law. As the Policy is issued individually, you will need to complete one application form per insured. If you are in a domestic partnership, your partner will need to purchase the plan as the Policyholder.

5. How many insured can I add to the Policy?

You will be able to add one insured person per Policy. Due to individual declarations needed for the application, you will need to complete one application form for each of the insured and a Policy will be issued individually. For more information on the product, please refer to the Product Factsheet and Policy Wording.

6. Why should I get Allianz Medical Protect when I am already covered under my Standard Chartered Bank Singapore Limited (SCBSL) employee medical plan?

Irrespective of your employment status with SCBSL, Allianz Medical Protect will provide you with continuous coverage until the end of the Policy, subject to payment of premium. In addition, Allianz Medical Protect may provide you with additional medical protection to supplement your employee medical coverage. For more information on the product, please refer to the Product Factsheet and Policy Wording.

7. What is the geographical coverage for this plan? Am I entitled to claim if I am hospitalised overseas?

The coverage for this plan is within Singapore. Overseas treatment is covered for Emergency Treatments only.

8. Are pre-existing conditions covered?

No. Pre-existing illness, disease or conditions and its related treatments will not be covered under Allianz Medical Protect. Allianz strongly recommends that you read the full list of exclusions and all terms and conditions when you receive your Policy contract.

9. Will the premium increase with age?

Premium payable is based on the insured person's age (last birthday) and it will change when the insured person enters into the next age band. Premium rates are not guaranteed and may be reviewed from time to time.

- 10. If another insurer is willing to accept my application at a more favourable status, will Allianz change its decision?**
No, Allianz will apply its own guidelines for underwriting. If you have any additional information about your health, you may give this to us for a review of our earlier decision.

- 11. Should my pre-existing condition improve in the upcoming years, would Allianz consider re-assessing my exclusion and/or loading applied on my policy?**
If you have any additional information about your health, you may write in to us for a review of our earlier underwriting decision. Allianz will reconsider your request (i.e. revision of premium and/or exclusions) subject to your updated health information relevancy to review earlier underwriting decision.

- 12. What are the payment methods available to me for the purchase of the product? Can I use funds in Central Provident Fund (CPF) or Supplementary Retirement Scheme (SRS) to buy this Policy?**
You may submit the application form with your credit card information via email at healthcare@allianz.com.sg. Currently, payments made via CPF or SRS are not accepted.

- 13. Can I have more than one Allianz Medical Protect plan?**
No. Only one application per insured can be accepted.

B. Eligibility

- 1. Who can purchase Allianz Medical Protect?**
The insured person must be holding a valid Singapore identification document such as a Singapore NRIC, Employment Pass, Work Permit, Long Term Visit Pass, Student Pass, Dependent's Pass, or other recognized work pass entitling the holder thereof to remain, or enter and remain, in Singapore.

- 2. What are the age limits of this plan?**
The insured person must be between 30 days and 65 years old (both ages inclusive) to purchase the Allianz Medical Protect Plans and up to 75 years old for renewals. For Outpatient Riders, renewals will be up to 70 years old.

- 3. Can a child purchase the Policy independently?**
No. As insurance policies are legally binding in nature hence the Policyholder has to be an Adult between the ages of 18 to 65 years (both age inclusive). An Adult Policyholder can buy an Allianz Medical Protect policy covering a child as an insured life subject to meeting eligibility criteria.

C. Enrolment

- 1. When is the enrolment period for Allianz Medical Protect?**
Enrolment for Allianz Medical Protect is open from 2 March 2020.

- 2. How do I apply?**
You can sign up for the product by following these simple steps:

Step 1: Download and print the Application Form.
Step 2: Complete the Application Form and the plan you wish to take up with your credit card information for payment.
Step 3: Scan and email completed Application Form to healthcare@allianz.com.sg with all supporting documents (if any).

Do note that we will take approximately 5 working days to process the application, subject to our underwriting and Policy terms and conditions.

Application Form is available for download on the website or write-in to us at healthcare@allianz.com.sg to get a copy.

- 3. Who can I contact if I have queries on this Policy?**
You may contact us at 1800 222 1818 (Local toll-free) or +65 6222 1919 and select Option 6 or healthcare@allianz.com.sg for more information on the product.

4. Am I required to go for a medical examination?

There may not be any need to go for medical examination to apply for Allianz Medical Protect. However, all plans would be subjected to medical underwriting and further clarification / information may be requested for health underwriting purposes.

5. How do I sign up for the Allianz Medical SG mobile app?

Step 1: Download "Allianz Medical SG" mobile app from IOS App Store or Google PlayStore.

Step 2: Click on "Sign Up" to register your account

Your login details for the "Allianz Medical SG" mobile app are:

Username: <Policy Number>

Password: <Insured Person's date of birth in DDMMYYYY>

With the Allianz Medical SG mobile app, you will be able to view your Policy details, activate your Allianz Medical Protect eCard, find the nearest panel clinic, submit claims and activate video consultation. Please also read the activation manual sent to you in the Welcome email upon the issuance of the Policy.

6. Can I claim the premiums from my HealthWallet?

This plan qualifies for HIP reimbursement this year, subject to the balance in your Health Savings Account.

D. Cancellation, Renewal and Upgrade

1. Can I cancel the Policy? Will there be any refund of premiums?

Yes, you may cancel the Policy by informing Allianz at customerservice@allianz.com.sg or calling us at 1800 222 1818 (Local toll-free) or +65 6222 1919 and select Option 6 with your full name, NRIC and Policy details.

Should you choose to exercise the Free Look option (14 days from the date of policy receipt), premiums paid would be refunded in full so long as no claim as arisen. However, if you cancel the Policy after the 14-days Free Look period and the premium is paid on a monthly basis, the Policy shall be cancelled on the next premium due date after the receipt and acceptance of termination notice by Allianz and no premium paid shall be refunded.

If you cancel the Policy after the 14-days Free Look period and the premium is paid on a yearly basis, the premium paid shall be refunded, less any pro rata premium received or retained by Allianz for the period during which cover has been provided.

2. Is this plan auto-renewable?

Yes.

3. Will there be any additional loading after claim(s) on renewal?

Allianz reserves the right to re-underwrite which may encompass termination and/or revision of premium and/or exclusions.

4. How do I upgrade my plan? Do I need to wait until my renewal for the upgrade to be effective?

You may request to upgrade the coverage from a lower deductible plan to a higher deductible plan upon the next renewal of the Policy. Please note underwriting will be applied for any increase in upgrades. However, you will not be allowed to downgrade the plan from a higher deductible plan to a lower deductible plan, unless otherwise accepted by Allianz.

E. Claims | General Enquiries

1. What is the waiting period for my Allianz Medical Protect Policy?

We will not pay for any treatment arising from a Disability first diagnosed or the signs or symptoms of which first occurred within the first thirty (30) days from the first effective date of the Policy, except for treatment as a result of an accident.

2. What can I claim from my Allianz Medical Protect Policy?

The benefits payable under your Allianz Medical Protect Policy are as specified in the Policy documents sent to you (i.e. Policy schedule and Policy wordings). The benefits we would pay under your Policy shall not exceed the actual medical cost incurred and are subjected to any pro-ration factor, deductible, co-payment and benefit limits of the Policy.

3. Do I have to pay if I am visiting Allianz's appointed panel clinics?

Cashless arrangement for Allianz's appointed panel clinics allows you to be free from worries of settling your outpatient medical expenses.

If you are visiting our appointed panel clinics, please note the following:

- The participating status of a panel clinic may change from time to time without prior notice. Please verify the clinic's participating status by making an advance phone call enquiry or appointment with the clinic. You may also check the list of appointed panel clinics on our mobile app.
- Present your medical eCard at clinic registration for access to the service.
- Settle any co-payment or extra cost not covered by your Policy at the clinic.
- No claims filing is required by you. After our assessment, in case of any shortfall incurred due to expenses exceeding coverage or non-eligible expenses, a shortfall notice will be sent for your settlement.
- In the event that the clinic is not able to verify your details or the eCard could not be presented at the clinic, you will need to settle the clinic bill and submit a reimbursement claim.

4. How do I claim for medical expenses that I have already paid for to my medical provider?

All medical claims must be reported to Allianz within 30 days. Payout will be via Bank Transfer and a notification would be issued for your reference.

You may submit your claim with all supporting document(s) for our assessment via the below channels:

- Allianz Medical SG mobile app
- Email: allianz@adepthealth.com.sg
- Mail: DA Adept Health, Health Claims Department 31 International Business Park #02-09 Singapore 609921

5. What are the documents which I need to attach with my claims submission?

There is a document checklist in the respective claim forms. Do prepare the required documents accordingly and complete the claim form for submission. If your claims submission requires further clarification, we will reach out to you.

6. Where can I check on my claim status?

You may check on your claims status via the Allianz Medical SG mobile app. For any clarification or if your claim is not listed after claim submission, please contact us at 1800 222 1818 (Local toll-free) or +65 6222 1919 and select Option 3.

7. Can I still claim from Allianz Medical Protect if I have made claims for my other medical insurance?

We do not pay for claims if the medical expenses have been paid by other medical insurance or you have received a reimbursement from any other source. If you have medical benefits under any employment contract, which allows you or them to claim a refund for medical expenses, you must first claim from these benefits before making any claim under your Allianz Medical Protect Policy.

If we have paid any benefit to you first before a claim is made under your employee medical benefits, you must give us all information and evidence we need to help us get back your employee medical benefit's share of the claim that we have paid.

If your claims have been first paid by your MediShield Life and/or Integrated Shield Policy, we will reimburse the eligible amount back to your MediShield Life and/or Integrated Shield Policy. Please note that we will not pay back the amount covered by the riders attached to your Integrated Shield Policy. For the reimbursement, please submit the completed claims form together with the required documents. The reimbursement will be subjected to Allianz's review.

For every claim, the total reimbursement we will make will not exceed the actual expenses paid.

8. If Allianz has requested for information, medical reports and evidence for the claims processing, will Allianz be paying for the document fees?

All information, medical reports, certificates and evidence as required by Allianz shall be furnished at your expense.

9. Do I need to submit original medical bills and receipts for my claims reimbursement?

You do not need to submit the original medical bills and receipts as long as you have provided us the scanned receipts via the Allianz Medical SG mobile app or email. However, please keep the original medical bills and receipts for at least 6 months from the date of e-submission for future verification purposes if necessary.

F. Claims | Letter of Guarantee (LOG)

1. What is a LOG?

This is a facility provided to Medical Protect Policyholders at major Hospitals in Singapore. The LOG can be used to help with the upfront cash deposit required for hospitalisation or day surgery, subject to acceptance by the Hospital.

2. Is there LOG request service for Allianz Medical Protect?

Yes, we offer LOG request service. This is a service where we would pre-authorise (pre-approve) your medical treatment and estimated bill size prior to the actual procedure and provide you with a LOG up to your eligible benefit limit. We will assess the medical necessity and cost of the treatment to ensure it is within the terms and conditions of the Policy's coverage. However, the actual claim amount, with details of the medical conditions and its treatments, will require a review by Allianz before we make any claim payment.

For any LOG requests, please fill in the LOG form and send it to us at least 7 working days before the scheduled admission.

Email: allianz@adepthealth.com.sg

Mail: DA Adept Health, Health Claims Department 31 International Business Park #02-09 Singapore 609921

You may also request for a LOG via the Allianz Medical SG mobile app.

For emergency LOG request, please contact us 1800 222 1818 (Local toll-free) or +65 6222 1919 and select Option 3 for assistance and advice.

Please note that LOG will not be issued if the insured person has been discharged.

3. What are the eligibility criteria for my LOG request?

Policies that have been in-force for more than 30 days from the start of the Policy will be eligible for your LOG request.

The following are some instances where your LOG request may not be approved:

- Incomplete LOG request form
- Case requires further medical review
- Non-covered treatment/medical condition(s) under the Policy
- No LOG facility arrangement with the Hospital/Surgery Centre
- Hospital does not accept multiple LOG from different party insurers or employer
- Policies with unpaid premiums
- Overseas hospitalisation

Do note that Allianz reserves the right to limit or decline the LOG request, even if the eligibility criteria is met. LOG request will be subjected to claims assessment.

4. With the issued LOG, would it mean that no deposit is required?

The Hospital reserves the right to collect a partial or a full deposit of the bill or accept the issued LOG only for the waiver of the initial deposit.

5. **Which are the participating Hospitals/medical institutions in Singapore?**
LOG facility are available in the following hospitals.

Government Restructured Hospitals	Private Hospitals
<ul style="list-style-type: none"> • Alexandra Hospital • Changi General Hospital • KK Women's and Children's Hospital • Khoo Teck Puat Hospital • National University Hospital • Ng Teng Fong General Hospital • Sengkang General Hospital • Singapore General Hospital • Tan Tock Seng Hospital 	<ul style="list-style-type: none"> • Gleneagles Hospital • Mount Alvernia Hospital • Mount Elizabeth Hospital • Mount Elizabeth Novena Hospital • Parkway East Hospital • Raffles Hospital • Thomson Medical Pte Ltd

G. Claims | Specialist Care Benefits

1. **Is a referral letter required for a visitation to a Specialist?**

If you visit a Specialist with a referral letter, the benefit payable will be according to the benefit limit with referral letter as mentioned in your Policy Schedule. The referral letter from your GP will be valid for 6 months from the day of issuance. Should you wish to visit the specialist after 6 months from the issuance of referral letter, you will have to obtain a new referral letter from your GP.

If you visit a Specialist without a referral letter, the benefit payable will be according to the benefit limit without referral letter as mentioned in your Policy Schedule.

2. **Is there a referral letter requirement for pediatrician visits?**

We waive GP referral letter for child below 36 months for pediatrician visits only.

H. Customer Service

1. **Where is the Allianz office located?**

12 Marina View #14-01 Asia Square Tower 2 Singapore 018961

2. **What is the Allianz Contact Centre contact number?**

For enquiries with regards to the product, policy and enrolment, call 1800 222 1818 (Local toll-free) and select Option 6. If you are overseas you can call +65 6222 1919 and select Option 6.

For support with regards to claims and video consultation support, call 1800 222 1818 (Local toll-free) and select Option 3. If you are overseas you can call +65 6222 1919 and select Option 3.

3. **What is the Allianz Contact Centre operating hours?**

Please refer to the operational hours below.

Type of Enquiries	Contact	Operating Hours
Product, policy and enrolment	<ul style="list-style-type: none"> • 1800 222 1818 (Local toll-free), Option 6. • +65 6222 1919 (For Overseas), Option 6. 	Monday to Friday, 9am to 5pm Eve of public holidays, 9am to 1pm. Closed on weekends and public holidays.
Claims and video consultation	<ul style="list-style-type: none"> • 1800 222 1818 (Local toll-free), Option 3. • +65 6222 1919 (For Overseas), Option 3. 	Monday to Friday, 9am to 6pm Closed on weekends and public holidays.