

Frequently Asked Questions (FAQs) for AXA eMedic distributed by PolicyStreet

What are you looking for?

Section	Page
Section A: Premium and Payments	1
Section B: Eligibility	4
Section C: Coverage	5
Section D: e-Card	8
Section E: Claiming and Renewal	9

Section A: Premium and Payments

1. Why is my premium more expensive without deductible?

Plan without deductible means that all your medical expenses will be paid by AXA; while for the plan with deductible, you will need to bear some of the medical expenses yourself whenever you get admitted to the hospital.

As the medical expenses to be paid by AXA is higher compared to plans with deductible, the premium charged for plan without deductible is more expensive.

2. Will my premiums paid be the same every year?

Not necessarily. Take note that at every renewal, the premium payable may increase as you age, similar to other medical insurance out there.

3. Will I get cheaper price if I opt for an annual payment term compared to a monthly payment term.

Yes you will get a slightly cheaper premium if you opt for an annual payment term.

4. Will AXA suddenly change my premium after I purchase this plan?

Rest assured that AXA won't. Any change of premium will only be effective starting next anniversary of your policy and AXA will give you at least 90 days' notice prior to the changes.

5. What are the available payment methods?

Credit card and online banking.

6. What are my payment term options when I choose to renew this policy?

This product is renewable yearly, you can choose to renew your policy up to age 80 by paying the premium.

7. Can I purchase more than 1 policy?

No, you are allowed to only purchase 1 policy.

8. Is there a family medical plan where I can buy?

No, there is no family plan on this product, however you may purchase an individual plan on behalf of your spouse or young kids aged 15 days old onwards by filling up their details and making payment.

9. If I cancel this policy, will I get back any premium that I've paid?

If you cancel the policy within 15 days from the date of transmission of your policy to you, we shall refund the Basic Premium paid. However, no refund can be made when a claim has been admitted.

After the 15 days period, if you cancel the policy, you will get a portion of refund of the premium as follows:

<i>Period from Policy Anniversary, Not exceeding</i>	<i>Premium Payment Mode</i>	
	<i>Annually</i>	<i>Monthly</i>
<i>15 days*</i>	<i>90%</i>	<i>No Refund</i>
<i>1 month</i>	<i>80%</i>	
<i>2 months</i>	<i>70%</i>	
<i>3 months</i>	<i>60%</i>	
<i>4 months</i>	<i>50%</i>	
<i>5 months</i>	<i>40%</i>	
<i>6 months</i>	<i>30%</i>	
<i>7 months</i>	<i>25%</i>	
<i>8 months</i>	<i>20%</i>	
<i>9 months</i>	<i>15%</i>	
<i>10 months</i>	<i>10%</i>	
<i>11 months</i>	<i>5%</i>	
<i>Period exceeding 11 months</i>	<i>No Refund</i>	

Section B: Eligibility

1. Can non-Malaysians purchase this policy?

Unfortunately, non-Malaysians cannot purchase this policy.

2. Do I need to go through medical checkup to obtain this plan.

You don't need to, and that's the beauty of the product! Simply answer the relevant underwriting questions and if you pass the "test", you can be covered immediately!

3. Can persons with disability purchase this product?

Unfortunately, this product does not cover persons with disability. However, AXA has other medical plans available for you, kindly leave AXA a message via WhatsApp at 017-641 8867.

4. My age falls out of 15 days to 39 years old. Can I still buy this policy?

Unfortunately, no. Kindly leave AXA a message via WhatsApp at 017-641 8867.

5. If I am not eligible to enrol for this medical plan after answering some underwriting questions, can I still purchase this plan?

Unfortunately, no. However AXA has alternative plans for you should you still wish to purchase a medical insurance. Kindly leave AXA a message via WhatsApp at 017-641 8867 to know more!

Section C: Coverage

1. Does this insurance cover clinic visits?

Yes, you are covered up to 3 times per Any One Disability for clinic visits for Bodily Injury resulting from an accident. For this claim, the treatment must be sought within 24 hours. Besides, you are covered up to 3 clinic visits for consultation and diagnostic test preceding confinement in a hospital due to illnesses.

GP visits to treat common cough, flu and fever etc are not covered.

2. What is annual limit?

Annual limit is the maximum medical expenses that is payable by AXA every year.

3. What should I do if I do not have enough annual limit to cover my medical expenses?

If the annual limit is insufficient to cover your medical expenses, you will need to fork out the balance of the medical expenses by yourself. Thus, it is advisable to ensure that you have sufficient medical coverage at the very beginning.

4. RM250 per day Room and Board is not enough for me. How do I opt for room upgrade upon admission?

You can just inform the hospital that you want to stay at the room that cost more than RM250 per day. However, please note that you will need to bear the differences of the rate of the room and board.

5. What is RM1000 deductible per hospital admission? Example please!

RM1000 deductible per hospital admission means you would need to pay RM1000 worth of hospital and medical expenses before AXA will begin paying for the rest. Your RM1000 deductible applies per hospital admission, across all the coverage year.

How it works: Ali has food poisoning, is hospitalized and bill comes up to RM1400. He pays the first RM1000 and AXA pays the remaining RM400. 2 months later, due to Murphy's law, he contracts dengue, is hospitalized and bill comes up to RM5000. This time, he would need to pay the first RM1000 and then AXA pays the remaining RM4000.

6. After I completed my application and payment online, will I be receiving an official documentation on the insurance plan?

Yes, you will receive your policy contract within 7 working days from the date of AXA's acceptance of your insurance application and payment of premium, whichever is later. In the event the policy contract is not received, kindly leave AXA a message at WhatsApp at 017-641 8867, email us at customer.care@axa-life.com.my or contact AXA AFFIN Life Customer Care Helpline at 1300-88-1616.

7. Can I buy the medical card and go to the hospital the next day?

Yes, you can. However, please note that this product does not cover any medical or physical conditions occurring within the first 30 days or Specified Illnesses within the first 120 days, except for injuries due to accidental causes.

8. Why can't I use my medical card for the first 30 days?

This product does not cover any conditions that happens on the first 30 days including dengue fever, except for injuries due to accidental causes. Injuries due to accidental causes is an injury which is caused by accident and with the evidence of a visible bruise or wound on the body.

9. Why can't I use my medical card for the first 120 days for "Specified Illnesses"? What are those?

To ensure that there isn't a misrepresentation or fraud, this product does not cover "Specified Illnesses" for the first 120 days.

"Specified Illnesses" mean any one of the following Disabilities and its related complications:

- (a) Hypertension, diabetes mellitus and cardiovascular disease;***
- (b) All tumours, cancers, cysts, nodules, polyps, stones of the urinary system and biliary system;***
- (c) All ear, nose (including sinuses) and throat conditions;***
- (d) Hernias, haemorrhoids, fistulae, hydrocele, varicocele;***
- (e) Endometriosis including Disease of the reproductive system;***
- (f) Vertebro spinal disorders (including disc) and knee conditions.***

10. Does this product give investment returns?

No, this product does not invest in any investment fund(s). Thus, no investment return will be given.

11. Is pregnancy or pregnancy complications covered?

No, excluded conditions from this plan are pregnancy, pregnancy related condition or its complications, childbirth (including surgical delivery), miscarriage, abortion and prenatal or postnatal care and surgical, mechanical or chemical contraceptive methods of birth control or treatment pertaining to infertility, erectile dysfunction and tests or treatment related to impotence or sterilisation.

12. What other causes of hospitalization are not excluded?

Hospitalisation primarily for investigatory purposes, diagnosis, X-ray examination, general physical or medical examinations, not incidental to Treatment or diagnosis of a covered Disability or any Treatment which is not Medically Necessary and any preventive Treatments, preventive medicines or examinations carried out by a Physician, and Treatments specifically for weight reduction or gain. For detailed description of said exclusions, kindly check AXA's [Fact Sheet](#) and [Product Disclosure Sheet](#) for the detailed breakdown.

13. What are the detailed coverages for this medical plan?

Please refer to our Product Page, and also AXA's [Fact Sheet](#) and [Product Disclosure Sheet](#) for the detailed coverage for this medical plan.

Section D: e-Card

1. How do I get my e-Card (virtual medical card)?

Get quick access to medical care by just presenting your e-card for hospital admission. To access this medical card, download "My AXA Health" from Google Play Store or Apple App Store. Alternative, you may login [here](#) on web. Should you prefer to have a physical medical card, you may print it out from [here](#) as well.

2. Can I use the e-card if I have missed a premium payment?

If you have missed any payment of the premium, you will not be able to use the e-card.

Section E: Claiming and Renewal

1. What are the panel hospitals for this product?

You may access the list of the panel hospitals [here](#).

2. How does the cashless admission work?

You just need to present the virtual medical card to AXA's panel hospital for the admission arrangement. However, please note that deposit might be collected by certain hospitals. You may refer to the list [here](#) for the panel hospital which require you to pay for the deposit prior to admission.

3. If I need help during claims process, what should I do?

Should you need any help during the claims process, please call AXA's Third Party Administrator (MediExpress) at 1300-80-0020.

4. What is the claim procedure?

If you choose to visit panel hospital:

Just present the virtual medical card to the hospital, mention AXA's Third Party Administrator name (MediExpress) for the admission arrangement, and AXA will settle the medical expenses for you, provide that the expenses does not exceed the annual limit of the plan you purchased and the expenses is covered by this plan. For plan with deductible, you will need to pay for expenses up to the deductible amount per hospital admission before AXA covers for the remaining expenses.

If you choose to visit non-panel hospital or want to claim for outpatient treatment:

You will need to pay for the medical expenses first, and then submit the claim to AXA for reimbursement via email or postage. For the reimbursement, you will need to submit the following documents:

- i) [Claim form \(by claimant\)](#)
- ii) [Medical claim form \(by doctor\)](#) – Not applicable for follow up visit
- iii) **Itemized Medical Bill – this is a detailed medical expenses issued by the hospital**
- iv) **Payment Receipts issued by the hospital**
- v) **Your NRIC**

AXA may request for additional copies of report for e.g. test result in certain situations.

5. Can I upgrade my plan upon admission?

No. The option to upgrade is only available upon policy renewal and the offer of upgrade will only be available to selected customer based on their claim experience. The upgrade process will be available in that email.

6. What is the nature of the renewal of the policy?

Your policy will need to be renewed manually upon the end of the coverage period.

You will receive email notification from AXA, informing you on the renewal of policy.