

Easily Accessible Protection Anytime, Anywhere



You are at the prime of your health, but are you fully prepared for this adventure called Life? Don't worry - we have your back! Introducing AXA eMedic, a standalone online medical card that ensures you have affordable and easily accessible protection against rising costs of medical fees.

AXA eMedic is available for those aged between 16 and 39, with an annual limit of up to RM100,000, renewable up to age 80. AXA eMedic is the ideal plan for you, if you are looking for your first medical card or supplementary medical protection for your existing plan.

Simple Online Application

- Click and purchase AXA eMedic online with no intermediaries involved. Simple and direct, at your convenience.
- Instant approval after you answer a few health-related questions. No medical examination required.

Unlimited Days on Room & Board

Recover at your own pace. Enjoy flexibility with no limitation on days for room and board accommodation, with a daily room limit of RM250 and the option of a double-bedded room in most hospitals.

Affordable Premium

- Affordable to ensure you have ample protection as you take your first steps towards independence.
- Affordable to even add on to your existing coverage as additional protection against rising medical fees.
- With premiums as low as RM 1.33 per day! *

Lower Premium

Enjoy more savings when you choose for annual premium payment mode or if you choose the deductible option.

Cashless Admission at Panel Hospital

Convenience when you need it the most. Get quick access to medical care by just presenting your online medical card for hospital admission.

Coverage

Determine the completeness of coverage yourself. There are 2 options of deductible limit:

Option	Description (Up to Annual Limit)
AXA eMedic Without Deductible	100% of the eligible medical bill paid by AXA AFFIN
AXA eMedic with RM1,000 Deductible	First RM1,000 of the eligible medical bill paid by customer per hospital admission, balance of the medical bill paid by AXA AFFIN

No Lifetime Limit

Some of the best things in life are fixed. Rest assure that there will be no reduction in your coverage eligibility up till age 80.

* Premium based on a person aged 25, chosen Plan 100 with deductible and pay premium annually.



Schedule of Benefits:

This plan covers:

BENEFIT	Plan 100	Plan 50	Plan 20
Section A In-patient & Day care Surgical Procedure			
Room & Board, daily ¹	RM250 ¹		
Intensive Care Unit	As charged		
Daycare Surgical Procedure			
Prescription Drugs			
Ambulance Fees			
Nursing, Operating Theatre Consumables and other Ancillary Charges			
Surgeon's Fees	As charged subject to Limits provided charges are within the recommendations of the Malaysian Medical Association Guidelines and Reasonable and Customary charges		
Anaesthetist's Fee			
Diagnostic Procedures and Physiotherapy			
Physician/Specialist Fees, 2 visits per day	As charged		
Operating Theatre	As charged		
Section B Outpatient Treatment			
Consultations & Diagnostic Procedures up to 3 times within 31 days before Hospital confinement (including medication)	As charged		
Post Hospitalisation Care and Physiotherapy Treatment within 60 Days from Hospital discharge			
Accident and Emergency Treatment up to 3 times per Any One Disability	As charged		
Annual Limit (Combined limit for Section A & B)	RM100,000	RM50,000	RM20,000
Deductible Limit per hospital admission (For Section A and Section B)	Without deductible or RM1,000		

¹ If the Insured is hospitalised at a room with higher Room and Board rate than his/her eligible benefit, the Insured shall pay the difference in the Room and Board rate.

Appendix: Premium Table

Without Deductible

Attained Age	Plan 100		Plan 50		Plan 20	
	Monthly Premium (RM)	Annual Premium (RM)	Monthly Premium (RM)	Annual Premium (RM)	Monthly Premium (RM)	Annual Premium (RM)
16 – 19	54.05	616.28	50.87	580.03	46.63	531.70
20 – 24	55.11	628.37	51.93	592.12	48.75	555.86
25 – 29	55.11	628.37	51.93	592.12	48.75	555.86
30 – 34	58.29	664.62	55.11	628.37	51.93	592.12
35 – 39	59.35	676.70	55.11	628.37	51.93	592.12
40 - 44*	72.07	821.71	67.83	773.38	63.59	725.04
45 - 49*	120.83	1,377.58	113.41	1,292.99	105.99	1,208.40
50 - 54*	169.59	1,933.44	160.05	1,824.68	149.45	1,703.84
55 - 59*	314.81	3,588.95	296.79	3,383.52	275.59	3,141.84
60 - 64*	451.55	5,147.78	426.11	4,857.77	396.43	4,519.42
65 - 79*	679.45	7,745.84	641.29	7,310.82	596.77	6,803.29

* The premium rates for age 40 - 79 are for renewal only.

Notes:

- The above rates are inclusive of the Goods and Services Tax (GST).
- The premium payable will increase according to Your age.
- Premiums are not guaranteed. We reserve the right to revise the premiums at policy anniversary by giving you 90 days notice if the overall claim experience of this class of business is worse than expected.
- The premiums paid for this plan may qualify you for income tax relief subject to the provisions of the Income Tax Act and Inland Revenue Board.
- Annualised premium = Monthly premium multiplied by 12

Appendix: Premium Table

With Deductible

Attained Age	Plan 100		Plan 50		Plan 20	
	Monthly Premium (RM)	Annual Premium (RM)	Monthly Premium (RM)	Annual Premium (RM)	Monthly Premium (RM)	Annual Premium (RM)
16 – 19	39.21	447.11	36.03	410.86	33.91	386.69
20 – 24	40.27	459.19	38.15	435.02	34.97	398.77
25 – 29	40.27	459.19	38.15	435.02	34.97	398.77
30 – 34	42.39	483.36	40.27	459.19	37.09	422.94
35 – 39	42.39	483.36	40.27	459.19	37.09	422.94
40 - 44*	51.93	592.12	48.75	555.86	45.57	519.61
45 - 49*	85.85	978.80	81.61	930.47	75.25	857.96
50 - 54*	120.83	1,377.58	114.47	1,305.07	105.99	1,208.40
55 - 59*	223.65	2,549.72	210.93	2,404.72	196.09	2,235.54
60 - 64*	321.17	3,661.45	303.15	3,456.02	281.95	3,214.34
65 - 79*	482.29	5,498.22	454.73	5,184.04	422.93	4,821.52

* The premium rates for age 40 - 79 are for renewal only.

Notes:

1. The above rates are inclusive of the Goods and Services Tax (GST).
2. The premium payable will increase according to Your age.
3. Premiums are not guaranteed. We reserve the right to revise the premiums at policy anniversary by giving you 90 days notice if the overall claim experience of this class of business is worse than expected.
4. The premiums paid for this plan may qualify you for income tax relief subject to the provisions of the Income Tax Act and Inland Revenue Board.
5. Annualised premium = Monthly premium multiplied by 12

Important Notes

AXA AFFIN Life Insurance Berhad believes it is important that you fully appreciate and understand all the benefits and charges under this plan.

1. This insurance plan is underwritten by AXA AFFIN Life Insurance Berhad (723739-W), a company licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia.
2. AXA eMedic is a non-participating standalone medical plan.
3. AXA eMedic does not participate in the distribution of surplus.
4. You should satisfy yourself that this plan will best serve your needs and that the premium payable under the policy is an amount you can afford.
5. You are given grace period of 31 days after the due date to make your premium payment. If you do not pay your premium at the end of the grace period, your policy will lapse.
6. If after purchasing this policy, you realise that it does not best serve your needs, you may cancel your policy within 15 days from the date of the Policy is transmitted to you. The premiums that you have paid will be refunded to you without interest.
7. No commission will be paid under this Policy, as there is no intermediary involved.
8. Exclusions
 - i. Pre-existing Illness
 - ii. Specified Illnesses occurring during the first one hundred and twenty (120) days of continuous cover
 - iii. Any medical or physical conditions arising within the first thirty (30) days following the Supplement Effective Date or date reinstatement whichever is later except for accidental injuries.
 - iv. Plastic/Cosmetic surgery, circumcision, eye examination, glasses and refraction or surgical correction of near sightedness (Radial Keratotomy or Lasik) or all corrective glasses, contact lenses and intraocular lens (except monofocal intraocular lenses in cataract surgery) or robotics surgery that aid a surgical procedure and the use or acquisition of external prosthetic appliances or devices such as artificial limbs, hearing aids, implanted pacemakers and prescriptions thereof.
 - v. Dental conditions including Dental Treatment or oral surgery except as necessitated by Accidental Injuries to sound natural teeth occurring wholly during the period of insurance.

Important Notes

- vi. Private nursing, rest cures or sanitarium care, illegal drugs, intoxication, sterilisation, venereal disease and its sequelae, AIDS (Acquired Immune Deficiency Syndrome) or ARC (AIDS Related Complex) and HIV related diseases, and any communicable diseases requiring quarantine by law.
 - vii. Any Treatment or surgical operation for congenital abnormalities or deformities including hereditary conditions.
 - viii. Pregnancy, pregnancy related conditions or its complications, child birth (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.
 - ix. 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.
 - x. Suicide, attempted suicide or intentionally self-inflicted Injury while sane or insane.
 - xi. War or any act of war, declared or undeclared, criminal or terrorist activities, active duty in any armed forces, direct participation in strikes, riots and civil commotion or insurrection.
 - xii. Ionising radiation or contamination by radioactivity from any nuclear fuel or nuclear waste from process of nuclear fission or from any nuclear weapons material.
 - xiii. Expenses incurred for donation of any body organ by an Insured and costs of acquisition of the organ including all costs incurred by the donor during organ transplant and its complications.
 - xiv. Investigation and Treatment of sleep and snoring disorders, hormone replacement therapy and alternative therapy such as Treatment, medical service or supplies, including but not limited to chiropractic services, acupuncture, acupressure, reflexology, bonesetting, herbalist Treatment, massage or aroma therapy or other alternative Treatment.
 - xv. Psychotic, mental or nervous disorders, (including any neuroses and their physiological or psychosomatic manifestations) and any other conditions classified under the "Diagnostic and Statistical Manual of Mental Disorders (DSM-IV Codes)" as published by American Psychiatric Association.
 - xvi. Costs/expenses of services of a non-medical nature, such as television, telephones, telex services, radios or similar facilities, admission kit/pack and other ineligible non-medical items.
 - xvii. Sickness or Injury arising from racing of any kind (except foot racing), hazardous sports such as but not limited to skydiving, water skiing, underwater activities requiring breathing apparatus, winter sports, professional sports and illegal activities.
 - xviii. Expenses incurred for sex changes.
 - xix. Cosmetic (aesthetic) surgery or treatment, or any treatment which relates to or is needed because of previous cosmetic treatment. However we will pay for reconstructive surgery if:
 - (a) It is carried out to restore function or appearance after an accident or following surgery for a medical condition, provided that the Insured has been continuously covered under the Policy since before the accident or surgery happened; and
 - (b) It is done at a medically appropriate stage after the accident or surgery; and
 - (c) We agree, in writing, to the cost of the treatment before it is done.
 - xx. Biological or chemical contamination.
- Note: This list is non-exhaustive. Please refer to the Policy Contract for the terms and conditions under this plan.
9. This fact sheet contains only general information about the product and does not in any way represent a policy. For a detailed description of the terms and conditions and exclusions of the product please refer to the official policy issued by AXA AFFIN Life Insurance Berhad.

Customer Care Centre
1 300 88 1616

www.axa.com.my

AXA AFFIN Life Insurance Berhad (723739-W)

8th Floor, Chulan Tower, No.3 Jalan Conlay, 50450 Kuala Lumpur.

General Line: 03-2117 6688 WhatsApp: 017-641 8867

Fax: 03-2117 3698 Email: customer.care@axa-life.com.my

Member of PIDM

AXA AFFIN Life Insurance Berhad is a member of Perbadanan Insurans Deposit Malaysia (PIDM). As a member of PIDM, some of the benefits insured under the insurance policies offered by AXA AFFIN Life Insurance Berhad are protected against loss of part or all of insurance benefits by PIDM, in the unlikely event of an insurer member failure. For further details of the protection limits and the scope of coverage, please obtain a PIDM information brochure from AXA AFFIN Life Insurance Berhad or visit PIDM website (www.pidm.gov.my) or call PIDM toll free line (1-800-88-1266).

