MSIG Insurance (Malaysia) Bhd
Registration No. 197901002705 (46983-W)
Head Office: Customer Service Centre, Level 15,
Menara Hap Seng 2, Plaza Hap Seng, No. 1, Jalan P.Ramlee, 50250 Kuala Lumpur
Tel +603 2050 8228, Fax +603 2026 8086, Customer Service Hotline 1-800-88-MSIG (6744)
www.msig.com.my

SME Group Health Insurance - FAQ

1. What plans are available under SME Group Health Insurance?

Group Hospitalisation and Surgical (GHS)	:	5 plans available on both cashless facility and reimbursement basis
Outpatient Clinical (OPC)	:	2 plans available on a cashless facility basis

2. Are there any premium saving options under SME Group Health Insurance?

Yes, premium saving options are applicable to Group Hospitalisation and Surgical (GHS) plan as below:

Reimbursement option	:	25% premium discount
Co-insurance option	:	5% premium discount, where the insured bears 10% of the covered eligible medical expenses incurred for each hospitalisation, subject to a maximum of RM500 per hospitalization.

3. What is the eligible employee group size for SME Group Health Insurance?

SME Group Health Insurance is available to companies with 200 employees or below.

4. What is the age eligibility for coverage?

The eligible age requirement is as follow:

Employee	:	Full-time employees who are actively at work, aged 18 to 65 years at entry. Coverage is renewable up to 70 years old subject to satisfactory health declaration.
Spouse	:	Legal spouse aged 18 to 65 years at entry. Coverage is renewable up to 70 years old subject to satisfactory health declaration.
Children	:	Aged 15 days to 18 years, or up to 23 years old if they are studying full-time at a recognized institution of higher learning.

5. Can an employer purchase Group Hospitalisation and Surgical (GHS) on a reimbursement basis and purchase Outpatient Clinical (OPC) on a cashless facility basis?

No, Outpatient Clinical (OPC) is only available if the employer purchases Group Hospitalisation and Surgical (GHS) on a cashless facility basis.

6. Can an employer purchase Outpatient Clinical (OPC) as a standalone plan?

No, Outpatient Clinical (OPC) cannot be purchased as a standalone plan. It is only available when employer purchases Group Hospitalisation and Surgical (GHS) on a cashless facility basis.

7. Can an employer purchase Outpatient Clinical (OPC) for selective employees?

No, Outpatient Clinical (OPC) coverage should be provided on a non-selective basis in accordance with the eligibility criteria established by the employer.

8. Does co-insurance apply to Outpatient Clinical (OPC)?

No, co-insurance does not apply to Outpatient Clinical (OPC).

9. Is medical examination required for enrolment?

No medical examination is required.

10. How to enrol for SME Group Health Insurance?

Just complete and submit the following documents:

i. SME Group Health Insurance Proposal Form
ii. Listing of employees or dependants to be insured
iii. Personal Health Declaration form (required for person to be insured who is above 65 years of age)

11. Can changes be made to employees' plan or coverage category?

Yes, an employee's plan or coverage category may be changed during the policy period due to a promotion or demotion, provided we are notified within 30 days of the change. Any additional premium payable or premium refund will be calculated on a pro-rated basis.

12. Are the premiums guaranteed?

No. Premiums are not guaranteed and may be revised in the future based on our overall underwriting experience for this class of business.

Any change in premium will apply to all policyholders of this product and will take effect from the next policy renewal date. We will provide at least 30 days' prior written notice of any such change.

13. Are pre-existing medical conditions covered?

For Group Hospitalisation and Surgical (GHS), pre-existing conditions are not covered during the first 12 months from the commencement date of continuous coverage or the reinstatement date, whichever is later. After this 12-month period, pre-existing conditions will be covered, subject to the terms and conditions of the policy.

The pre-existing condition exclusion does not apply to Outpatient Clinical (OPC).

14. Are there any waiting periods?

Yes. The following waiting periods apply to Group Hospitalisation and Surgical (GHS):

30-day waiting period	:	Any disability due to illness (other than injury) and any signs or symptoms of such illness that first appear within 30 days from the commencement date of continuous coverage or the reinstatement date, whichever is later, are not covered.
120-day waiting period for Specified Illnesses	:	The following disabilities or any related complications that occur within the first 120 days of continuous coverage or from the reinstatement date, whichever is later, are not covered: (a) Hypertension, diabetes mellitus and cardiovascular disease; (b) Growth of any kind including tumours, cancers, cysts, nodules, polyps; (c) Stones of the urinary system and biliary system; (d) Any disease of the ear, nose (including sinuses) or throat; (e) Hernias, haemorrhoids, fistulae, hydrocele or varicocele; (f) Any disease of the reproductive system including endometriosis; (g) Any disorders of the spine (including a slipped disc) or any knee conditions; or (h) Any disease of the autoimmune system.

The 30-day waiting period and 120-day waiting period for Specified Illnesses do not apply to Outpatient Clinical (OPC).

15. Does SME Group Health Insurance provide overseas coverage?

Group Hospitalisation and Surgical (GHS) provides overseas coverage under the following circumstances:

- the Insured Person requires emergency hospitalisation while travelling overseas for a purpose other than seeking medical treatment; or
- a Specialist recommends treatment outside Malaysia because the required treatment, expertise or facilities are not available in Malaysia.

Benefits are subject to the terms, conditions, exclusions and limits of the Policy. Transportation costs to the place of treatment are not covered.

No benefits will be payable for any medical treatment received outside Malaysia if the insured person resides or travels outside Malaysia for more than ninety (90) consecutive days.

Outpatient Clinical (OPC) provides coverage is within Malaysia only.

16. Does Outpatient Clinical (OPC) cover long term medications?

Yes, 1 month supply of medication is allowed for each visit subject to the benefit limit for the following chronic conditions: Arthritis, Asthma, High Blood Pressure, Hypertension, Coronary Artery Disease, Cerebrovascular Disease, Cerebrovascular Accident, Diabetes Mellitus, Epilepsy, Gout, Hyperlipidemia, Parkinson's disease, Peptic Ulcer, Psoriasis and Thyroid disorders

17. For Outpatient Clinical (OPC), can treatment be sought at a non-panel clinic?

No, treatment received at a non-Panel clinic is not covered, except in the event of an emergency.

An emergency refers to condition where:

- treatment is required between 10pm and 8am, or
- immediate medical attention is required within 12 hours for an Injury, Illness or symptoms which are sudden and severe, where failure to receive treatment may result in life-threatening condition or significant deterioration of health.

18. How are the benefits paid?

Benefits are paid based on the selected option:

Cashless facility option	:	Insureds may receive treatment at panel hospitals and panel clinics without making upfront payment, subject to the benefits, limits and terms of the policy.
Reimbursement option or treatment at non panel hospitals and non-panel clinics	:	Insureds are required to settle the medical bills first and submit the required claim documents for reimbursement of eligible expenses, subject to the benefits, limits and terms of the policy.

19. How do I submit a reimbursement claim under the SME Group Health Insurance Policy?

You can submit the claim by using the following methods:

- By post: Mail the completed claim form(s) with all supporting document(s) to the mailing address listed on the Pre-Authorisation Form.
- Through Insurance Adviser: Submit the completed Pre-Authorisation Form with all supporting document(s) to your Insurance Adviser.
- E-submission via email at myMSIG@my.msig-asia.com: Provide scanned copies of the originals claims documents.

20. What supporting documents are required when submitting reimbursement claim?
For reimbursement claim, please submit the following documents within 30 days from the date of discharge from the hospital:

a) Duly completed Pre-Authorisation Form Part II by the attending doctor
b) Original itemised invoices, bills & official receipts
c) Copy of Laboratory Test Result, X-Ray, MRI/CT scan, Ultrasound, Histopathology report & etc
d) Referral letter, if applicable

For claims involving outpatient treatment, similar documentation is required, including receipts and medical reports relevant to the treatment.

21. How do I track the status of my claim?

Once a claim has been made, you'll receive an email acknowledgement. For any enquiries, you may send via email at myMSIG@my.msig-asia.com

22. Can a sole proprietorship be covered under the SME Group Health Insurance as a group policyholder?

No. A group policy must be issued to a legal entity as the policyholder. As a sole proprietorship is not a separate legal entity from its owner, it does not qualify as a group policyholder under the SME Group Health Insurance.