

Addressing Your Concerns

Frequently Asked Questions

Understanding the Product

What is i-Am Care?

This is a pure protection medical and health takaful plan that caters for your medical needs. It pays your medical, hospitalisation and surgical expenses.

What are the plan options available under i-Am Care?

There is only 1 plan available under i-Am Care, which is based on RM200 Room & Board.

What are the benefits that I will be receive from i-Am Care?

You may refer to the [Schedule of Benefits](#) for all the benefit payable under this plan.

What are the applicable Shariah concepts?

- i. *Wakalah*
This plan applies wakalah concept, where all certificate holders appoint AmMetLife Takaful Berhad (AmMetLife Takaful) to act on behalf of them to invest and manage the Participants Risk Fund (PRF). AmMetLife Takaful is entitled to a wakalah fee for managing the takaful plan.
- ii. *Tabarru'*
This plan applies tabarru' concept, where all certificate holders agree to donate a specified portion from the contribution paid into the PRF for the purpose of mutual aid and assistance to all participants in times of misfortune.
- iii. *Qard*
An interest-free loan from AmMetLife Takaful in the event that the PRF is in deficit. The loan will be paid from the future surplus arising from the PRF.

What is the fund involved in i-Am Care?

PRF is made up of the tabarru' which is a portion of your contributions, to assist you and the fellow participants in need, through the benefits they are entitled to i.e. we will pay your eligible benefits from this fund.

Am I entitled to net surplus arising from the PRF?

Should there is any surplus arising from the PRF, it will be allocated back into the PRF.

Participation and Coverage

Who can participate in i-Am Care?

Individual who aged 18 to 50 years old may participate in the plan. Age is defined as age next birthday.

Do I need to undergo a medical examination?

You only need to answer our health questionnaires without undergo any medical examination.

How long will I be covered?

You will be covered up to 55 years old. This plan is guaranteed yearly renewal so long you pay the annual contribution within grace period.

When can I start enjoying the benefits under this plan?

Your coverage will take effect upon the successful application and payment of the first contribution. There is no waiting period for any claims related to accidents. For medical conditions not relating to accidents, an initial 30 days waiting period from the effective date of the plan coverage will apply. For specific illnesses, such as Hypertension, Cancers etc., the waiting period is 120 days.

Is there any co-payment imposed under this plan?

This plan imposes RM500 deductible per certificate year. You just need to pay the first RM500 per certificate year upon admission, while we will take care the balance of the eligible expenses.

However, the deductible are not applicable for Emergency Treatment* including Accident and any medical treatment in the Malaysia Government Hospital.

**Emergency treatment refers to an event whereby immediate medical attention within twenty-four (24) hours for preservation of life or limb is required for disability which are sudden and severe failing which will be life threatening or lead to serious deterioration of health.*

Is there any co-takaful imposed under this plan?

This plan does not charge any co-takaful if you stay at your eligible room and board. However, if you stay at a higher room and board than your entitlement, you will need to bear the excess of room and board rate plus 20% or the other eligible benefits or expenses.

Is there a waiting period under this plan?

This plan will only start 30 days from the commencement date for illness other than specified illnesses. For specified illnesses, the waiting period is 120 days. This waiting period is not applicable for accidental causes.

What are the specific illnesses?

Specific Illnesses means the following disabilities and its related complications, occurring within the first 120 days from the cover date:

- a. Hypertension, diabetes mellitus and cardiovascular disease;
- b. All tumors, cancers cysts, nodules, polyps, stones of the urinary system and biliary system;
- c. All ear, nose (including sinuses) and throat conditions;
- d. All benefits will be exclude the cost of transportation to the place of treatment;
- e. Hernias, haemorrhoids, fistulae, hydrocele, varicocele;
- f. Endometriosis including disease of the female reproduction system;
- g. Vertebro-spinal disorders (including disc) and knee conditions.

This shall not be applicable after the first year of cover.

Is there any cash value or maturity benefit under this plan?

No, there is no cash value or maturity benefit provided under this plan.

Contributions and Fees

How much do I need to contribute?

Your annual contribution will depend on your attained age (next birthday), gender and occupation class. The annual contribution will increase according to your attained age (next birthday) at certificate anniversary. Please refer to [Schedule of Contribution](#) for the amount of contributions that you have to pay.

What is occupation class?

Occupational class refers to your nature of work. Certain occupations have a higher risk of death, disablement, illness or injuries. Therefore, it is an important risk factor to be considered when assessing your application. Your occupational class may affect the contribution that you need to pay for this product.

How do I pay for my contribution?

You may pay your contributions by Online Banking or JomPay. Payment of annual contribution shall be made after we have received your application. We will call you to inform whether your application is accepted or rejected.

For how long do I have to pay the contribution?

You are required to pay the annual contribution throughout the certificate term.

What are the charges or fees imposed under i-Am Care?

The details of the charges or fees are as follows:

- Wakalah Fee: RM5 fixed wakalah plus 25% of contribution after nett of fixed wakalah.
- Tabarru': Tabarru' amount is the contribution amount less Wakalah Fee. The tabarru' amount will be allocated into Participants' Risk Fund (PRF).

Accessing Care & Claims

Who should I contact in the event of hospital admission?

You should contact our service provider, CompuMed at 03-2089 3818 or email to cmpd_callcentre@compumed.com.my who will assist you for the issuance of guarantee letter for cashless hospital admission at our panel hospital provided that the illness/accident is covered under this plan.

Where can I refer to the list of panel hospitals?

You can refer to the [list of panel hospitals/clinics](#) administered under CompuMed.

Can I be admitted to a non-panel hospital? How do I claim if so?

You may be admitted into a non-panel hospital. Payment will be on reimbursement basis and you are required to submit the completed claim form together with the relevant supporting documents to us. The [Hospital and Surgical Claim Form](#) can be obtained from our corporate website.

What are reasonable and customary charges?

Reasonable and customary charges means medically necessary charges for medical care which is considered reasonable. We will adjust any hospital charges which in opinion of our medical officer is considered excessive. Such charges should not exceed the general level of charges being made by the hospital of similar standing in the same locality where the charges are incurred, taking into consideration similar or comparable age for a similar illness, sickness, disease or Injury and in accordance with accepted medical standards and practice which could not have been omitted without adversely affecting your medical condition.

What if I seek treatment overseas?

If you seek treatment outside Malaysia, benefits shall be covered subject to the exclusions limitations and conditions specified in the certificate and all benefits will be payable based on the official exchange rate ruling on the claims approval date and shall exclude the cost of transport to the place or treatment provided that;

1. You are traveling abroad for a reason other than for medical treatment, needs to be confined to a hospital outside of Malaysia as a consequence of a medical emergency; or
2. You, upon recommendation of a physician and has to be transferred to a Hospital outside of Malaysia due to the specialized nature of the treatment, aid, information or decision required can neither be rendered nor furnished nor taken in Malaysia.

Overseas treatment of a sickness, disease or injury which is diagnosed in Malaysia and non-emergency or chronic conditions where treatment can reasonably be postponed until return to Malaysia are excluded.

Am I covered outside Malaysia?

Yes, you will be covered under this plan if you travel or reside outside Malaysia for not more than 90 consecutive days.

What are the exclusions under this plan?

Please refer to Takaful Certificate which is available to be downloaded in the website for information on the exclusions applicable to the benefit under this plan.

Where can I refer to for the claims guide of this plan?

Please click [here](#) for the claims guide.

Additional Support

Where can I get further information?

If you have any queries, please contact us at:

AmMetLife Takaful Berhad

Level 23, Menara 1 Sentrum,
No.201, Jalan Tun Sambanthan,
50470 Kuala Lumpur.

Tel. No: 1 300 22 9777

Website: ammetylifetakaful.com

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The information, statement and/or descriptions contained herein are strictly meant to be general information for quick reference and illustration purposes only and are not intended to be the complete description of all terms and conditions applicable to any products mentioned herein. Please refer to the Product Disclosure Sheet (PDS) for more information.

For further clarification and information, you may contact our Customer Care Centre at 1 300 22 9777.

The benefit(s) payable under eligible certificate is protected by PIDM up to limits. Please refer to PIDM's Takaful and Insurance Benefit Protection System (TIPS) Brochure or contract AmMetLife Takaful Berhad or PIDM (visit www.pidm.gov.my).