



HEALTHIER, LONGER,
BETTER LIVES



AIA ACCIDENTCARE

**Protect Your Most-Valued Business Asset
With An All-Inclusive Accident Solution**

Employees are a company's most valuable, tangible asset - individuals who need to be safeguarded beyond just their physical safety. Because unfortunate events can and do occur during and outside working hours, it is essential that each company talent receives day-to-day financial protection to ensure the most comprehensive care for their overall health and peace of mind. This is where **AIA AccidentCare** comes in. It guarantees all employees are protected by their employer via an all-inclusive solution.






WHY CHOOSE AIA ACCIDENTCARE?

AIA AccidentCare is not essential ONLY if we can predict what's going to happen

AIA AccidentCare is a rider that enables employees to access protection coverage beyond traditional health benefits. Our goal is to provide a safety net that protects your employees and their families from financial hardship during difficult times. This is why you, as an employer, should consider AIA AccidentCare not as just an optional solution, but an ESSENTIAL one.

Benefits at-a-glance:

 ACCIDENTAL DEATH	 ACCIDENTAL DISABILITY	 ACCIDENTAL MEDICAL EXPENSE
<p>A lump sum of 100% Sum Assured will be paid if the Insured Member(s) passes away due to accidental causes</p>	<p>Up to 26 accidental disabilities or conditions caused by Partial Disability or Total Disability covered</p>	<ul style="list-style-type: none">• Covers selected medical treatments, hospital charges and licensed nursing services resulting from accidents• Covers remaining medical treatment costs after reimbursement from Social Welfare, other fringe benefits or insurance



EXAMPLE

Company ABC has learned and considered **AIA AccidentCare** as the essential solution, which is attached on top of **AIA ComCare**, for their employees. They decide to purchase this most comprehensive care for their 100 employees believing that this all-inclusive solution will protect their overall health and peace of mind, especially when any unfortunate events occur.

Purchased Benefits Package of AIA AccidentCare

Benefits	Senior Executive	Middle Management	General Staff
I. Accidental Death (death from all accidental causes)	US\$ 50,000	US\$ 30,000	US\$ 25,000
II. Accidental Disability (partial and total disability)	US\$ 50,000	US\$ 30,000	US\$ 25,000
III. Accidental Medical Expense (selected accidental medical treatment cost and remaining medical treatment from Social Welfare, other fringe benefits or insurance)	US\$ 5,000	US\$ 3,000	US\$ 2,500

What benefits will employees be covered by AIA AccidentCare

Scenario	Employee Benefits
Mrs. Sothara is 29 years old , a general staff. She got injured due to an accident during her way to work.	After being sent to hospital, Sothara's treatments costs US\$300 , AIA Cambodia reimburses Sothara US\$300 under Accidental Medical Expenses Benefit. With an all-inclusive solution from AIA Cambodia , she doesn't encounter financial distress during her treatment in hospital.
Mr. Vichetra is 35 years old , a Middle Management. He gets injured by elevator at work which caused him loss of four fingers and thumb of one hand.	Mr. Vichetra receives a total expenses of US\$15,000 or equivalent to 50% of total benefit of Accidental Disability (Loss of four fingers and thumb of one hand due to accidental causes). With the sum of financial support, Mr. Vichetra is able to ease his financial drain.
Mr. Thareth is 48 years old , a Senior Executive, having a provincial business trip. He passes away after a car accident.	After the decease of Mr. Thareth, his family receives a lump sum of US\$50,000 or equivalent to 100% of total benefit of Accidental Death from AIA Cambodia as a financial support to his family.



CLAIM PROCEDURE

QUALIFICATIONS OF THE CLAIMANT

The Claimant can be the Policy Owner or Beneficiary(ies) assigned by the Policy Owner. The Claimant shall be at least **18 years old**.

NOTICE OF CLAIM

Notice of a claim must be provided to the Company within **90 (ninety) days** of the occurrence of any event which may give rise to a claim under this Policy to the **AIA Cambodia** Office or by contacting Client Services at **(855) 86 999 242**.

REQUIRED DOCUMENTS OR PROOF OF EVIDENCE

- **ACCIDENTAL DEATH AND DISABILITY PROOF**

Upon receipt of such notice, the appropriate forms will be given to the Claimant to file proof of Accidental Death or Disability within 24 (twenty-four) hours.

- **PROOF OF ACCIDENTAL MEDICAL EXPENSE BENEFITS**

Proof of evidence is mandatory. This includes but is not limited to submitting original copies of required documents such as receipts, medical certificates, medical discharge letters and any medical documents with claim forms to the Company. All medical documents must be obtained from a medical facility which is legally licensed to supply medical treatment in the country.



CLAIM TURNAROUND TIME

Claim made within **15 (fifteen) working days** upon receipt of the complete required documents.



CLAIM REIMBURSEMENT METHOD

Claim amount will be deposited into the bank account provided by the Claimant to the Company.

OBTAIN YOUR INSURANCE PROPOSAL TODAY



 Contact an AIA Life Planner or AIA Client Care

 086 999 242

 AIA.COM.KH

 AIA CAMBODIA

 AIA Cambodia Telegram Channel



ACCIDENTAL DISABILITY BENEFITS

Type of Coverage	% Of Rider Sum Assured
Accidental Death Benefit	100%
Accidental Disability	
Loss of two limbs	
Loss of Sight, Hearing and Speech	
Loss of both hands, or of all fingers and both thumbs	100%
Total loss of sight of both eyes	
Total paralysis	
Injuries resulting in being permaently bedridden	
Loss of one arm at shoulder	
Loss of one arm at shoulder	
Loss of one arm between shoulder and elbow	
Loss of one arm at elbow	
Loss of one arm between elbow and wrist	
Loss of one hand at wrist	
Loss of one leg at hip	
Loss of one leg between knee and hip	
Loss of one leg below knee	
Loss of whole eye in one eye	
Loss of sight of one eye, except perception of light	
Loss of lens of one eye	
Loss of four fingers and thumb of one hand	
Loss of four fingers of both hands	40%
Loss of thumb of one hand	
<ul style="list-style-type: none"> • both phalanges 	25%
<ul style="list-style-type: none"> • one phalanges 	10%
Loss of index finger of one hand	
<ul style="list-style-type: none"> • three phalanges 	10%
<ul style="list-style-type: none"> • both phalanges 	8%
<ul style="list-style-type: none"> • one phalanx 	4%
Loss of middle finger/ring finger/little finger of one hand	
<ul style="list-style-type: none"> • three phalanges 	6%
<ul style="list-style-type: none"> • both phalanges 	4%
<ul style="list-style-type: none"> • one phalanx 	2%
Loss of metacarpals	
<ul style="list-style-type: none"> • first or second 	3%
<ul style="list-style-type: none"> • third, fourth or fifth 	2%
Loss of toes of one foot	
<ul style="list-style-type: none"> • all 	15%
<ul style="list-style-type: none"> • great, both phalanges 	5%
<ul style="list-style-type: none"> • great, one phalanx 	2%
<ul style="list-style-type: none"> • other than great, if more than one toe lost each 	1%
Loss of hearing	
<ul style="list-style-type: none"> • both ears 	75%
<ul style="list-style-type: none"> • one ear 	15%
Loss of speech	50%
Accidental Medical Expense	Up to the limit stated in the Certificate of Insurance



EXCLUSIONS

1. EXCLUSIONS FOR ACCIDENTAL DEATH BENEFIT AND ACCIDENTAL DISABILITY BENEFIT

This Rider shall not cover Accidental Death or Accidental Disability caused directly or indirectly, wholly or partly, by any one of the following occurrences:

1. Suicide or attempted suicide, or any self-inflicted injuries while sane or insane; or
2. A criminal offence committed or attempted to commit by You, or the Insured Member, or the Beneficiary; or
3. Miscarriage, pregnancy, birth-giving or pregnancy complications except that such event has been induced by Accident; or
4. Accident occurring while or because the Insured Member is under the influence of alcohol, any non prescribed drug abuse or illegal drug; or
5. Any form of mental or psychiatric disorder; or
6. Hernia, ptomaines or bacterial infection (except pyogenic infection which shall occur with and through an accidental cut or wound); or
7. Injuries are caused by insect bites including but not limited to mosquito bites and bee stings; or
8. participating in professional sports or activities of a hazardous nature such as skydiving, parachuting, bungee jumping, mountain climbing, racing, scuba diving, racing of any form; or
9. Engaging in air travel, except when the Insured Member is a fare-paying passenger in a properly licensed commercial aircraft that is on a regular scheduled route operated; or while the life Insured Member works as a pilot or a crew in any aircraft; or
10. Strike, riot and civil commotion, rebellion or insurrection, or terrorist activity; or
11. War, declared or undeclared, or revolution; or
12. Service in the armed forces in time of declared or undeclared war or while under orders for warlike operations or restoration of public order; or
13. Nuclear weapons, radiation or radioactivity from any nuclear fuel or nuclear refuse arising from the combustion of nuclear fuel and any process of self sustaining nuclear fission/fusion; or
14. Death or disability due to any illness or disease; or
15. An Accidental Disability resulting from a physical or mental condition which existed before the Effective Date, which was not disclosed in the application or health statement



EXCLUSIONS

2. EXCLUSIONS FOR ACCIDENTAL MEDICAL EXPENSE BENEFIT

This Rider shall not cover medical expenses for Injury caused directly or indirectly, wholly or partly, by any one of the following occurrences:

1. Suicide or attempted suicide, or any self-inflicted injuries while sane or insane; or
2. A criminal offence committed or attempted to commit by You, or the Insured Member, or the Beneficiary; or
3. Miscarriage, pregnancy, birth-giving or pregnancy complications; or
4. Accident occurring while or because the Insured Member is under the influence of alcohol, any non-prescribed drug abuse or illegal; or
5. Any form of mental or psychiatric disorder; or
6. Hernia, ptomaines or bacterial infection (except pyogenic infection while shall occur with and through an accidental cut or wound); or
7. Injuries are caused by insect bites including but not limited to mosquito bites and bee stings; or
8. Participating in professional sports or activities of a hazardous nature such as skydiving, parachuting, bungee jumping, mountain climbing, racing, scuba diving, racing of any form; or
9. Strike, riot and civil commotion, rebellion or insurrection, or terrorist activity; or
10. War, declared or undeclared, or revolution; or
11. Service in the armed forces in time of declared or undeclared war or while under orders for warlike operations or restoration of public order; or
12. Nuclear weapons, radiation or radioactivity from any nuclear fuel or nuclear refuse arising from the combustion of nuclear fuel and any process of self-sustaining nuclear fission/fusion; or
13. Treatments due to any illness or disease; or
14. Treatment prior to the Effective Date or Treatment as a result of an Accident prior to the Effective Date; or
15. Treatment that is not Medical Necessary



HEAD OFFICE

GIA TOWER, 31ST FLOOR, SOPHEAK MONGKUL STREET, PHUM 14,
SANGKAT TONLE BASSAC, KHAN CHAMKAR MORN, PHNOM PENH,
THE KINGDOM OF CAMBODIA

SIEM REAP BRANCH

#29 & 30, CHARLES DE GAULLE ROAD SALA KANSENG,
SANGKAT SVAY DONGKOM, SIEM REAP

BATTAMBANG BRANCH

HOUSE NO. 2-6, STREET 3, PHUM KAMMEAKAR, SANGKAT
SVAY POR, KRONG BATTAMBANG, BATTAMBANG

KAMPONG CHAM BRANCH

VILLAGE 15, SANGKAT KAMPONG CHAM, KRONG KAMPONG
CHAM, KAMPONG CHAM

KAMPOT BRANCH

STREET 700, VILLAGE 1 OSSAPHEA, SANGKAT KAMPONG
KANDAL, KRONG KAMPOT, KAMPOT