

# AIA MedCare Rider

**Extensive healthcare solution**


**for your valuable workforce**





As an employer, you want your employees to feel supported and cared for. You need a flexible, all-in-one solution to meet their medical needs.


AIA MedCare Rider is a group medical rider that supports organizations to offer comprehensive medical coverage for their employees with a variety of healthcare benefits such as expense reimbursement on hospitalization and surgeries, illness and accident events, emergency events, as well as out-patient care, hospital companion, prevention care, dental care, maternity delivery and so on. You have the option to choose a co-pay or non-co pay plan, depending on budgets. This rider insures the body (health).

How can AIA MedCare Rider help safeguard your employees' health and well-being?

- 

**COMPREHENSIVE MEDICAL PROTECTION**  
Providing the right medical package to help motivate, attract, and retain employees by ensuring that their health and welfare are well taken care of
- 

**CASHLESS PAYMENT**  
Enjoy easy access to a wide network of healthcare provider with seamless, cashless payment options at our partner hospitals in Cambodia & overseas.
- 

**CUSTOMISABLE SOLUTION**  
Offer options to choose comprehensive plans with different budget levels to meet your organization's need.
- 

**INTERNATIONAL COVERAGE**  
Have access to planned treatment in any countries listed in your chosen zone.
  - Zone1: Cambodia, Thailand, Vietnam, Myanmar, Laos and Malaysia
  - Zone2: Asia
  - Zone3: Worldwide excluding USAWorldwide emergency assistant service

Benefits Summary- Core Benefits

Core Benefits	Amount
Overall Annual Limit	Minimum starts at USD 5,000
Illness Annual Limit	Minimum starts at USD 5,000
1. Daily Hospital Room & Board Benefit - per day (Accommodation, including meals and basic medical care)	Minimum starts at USD 25/day
2. In-patient Treatment Benefit - per year - Surgeon, anesthetist fees and operating theatre room charge	As stated in the certificate of insurance



<ul style="list-style-type: none"> <li>- Intensive care unit</li> <li>- Drugs, Dressings, and other consumables charges</li> <li>- Physician and Specialists visit fees</li> <li>- Implants and internal prosthetics</li> <li>- Diagnostic, investigation charges and scans including MRI, CT Scan, PET Scan</li> <li>- Spinal supports, knee braces, or air cast in case of surgery</li> <li>- Physiotherapy sessions given by a licensed specialist</li> <li>- Dialysis</li> <li>- Cancer treatment</li> <li>- Treatment provided to relieving symptoms of terminal illness</li> <li>- Up to 7 days take home medications prescribed.</li> </ul>	As stated in the certificate of insurance
<b>3. Out-patient Cancer Treatment Benefit - per year</b> ( Covers chemotherapy, and radiotherapy)	As stated in the certificate of insurance
<b>4. Out-patient Dialysis Benefit - per year</b> ( Covers dialysis and consultation)	As stated in the certificate of insurance
<b>5. Out-patient Surgical Procedure Benefit - per year</b> ( Covers pre- and post-surgery consultation charges and procedure charges)	As stated in the certificate of insurance
<b>6. Pre and Post Hospitalisation Benefit</b> (per hospitalization) <ul style="list-style-type: none"> <li>- Consultation charges</li> <li>- Diagnostic tests and investigations</li> <li>- Prescribed medications and treatment ( inclusive of Physiotherapy, Osteopathy, and Chiropractic)</li> </ul>	Minimum starts at USD 50
<b>7. Emergency Ground Ambulance Benefit - per hospitalization</b>	Minimum starts at USD 250
<b>8. Accidental Emergency Care Benefit - per hospitalization</b>	Minimum starts at USD 100
<b>9. Secondary Claim Benefit – per day</b> (Cash payment if daily Hospital Room & Board, or Out-patient Cancer Treatment is covered by another insurance scheme. Payable up to 15 days per year)	Up to USD 100
<b>In-network Co-payment Cap</b>	Up to USD 1,200

- The benefit amount for each item listed above may vary depending on the selected plan . You have the flexibility to request a tailor-made plan based on workforce needs and budget. To be eligible for tailor-made plan, you should have a minimum group size of 20 employees.

## Benefit Summary- Optional Benefits

Optional Benefits	Amount
1. Optional Hospital Companion Benefit -per year	Minimum starts at USD 5,000
2. Optional Durable Medical Equipment Benefit -per year	Minimum starts at USD 250
3. Optional Preventive Care Benefit -per year (Consultations, investigations, and vaccinations for preventive purpose)	Minimum starts at USD 30
4. Optional Out-patient Care Benefit - per year/ per visit (Consultations, prescribed drugs, dressings and investigations as an out-patient)	Minimum starts at USD 100/per year USD 30/per visit
5. Optional Dental Care Benefit* -per year	Minimum starts at USD 150
6. Optional Vision Care Benefit* -per year	Minimum starts at USD 50
7. Optional Hospice Care Benefit -per year	Up to USD 10,000
8. Optional Mental Care Benefit - per year	Up USD 5,000
9. Optional Maternity Delivery Benefit -per year	Minimum starts at USD 120

*\*This benefit is only available if the Out-patient Care Benefit is chosen*

## Co-payment

The following co-payment options are available:

Option	In-network	Out-of-network
1	10%	20%
2	No co-pay	20%
3	No co-pay	No co-pay

## Eligibility

- **Initial Entry Age:** 30 days – 69 years old (Applicants above 64 years old are only eligible if they are part of take-over group and renewal members)
- **Coverage Term:** 1 (one) year, subject to renewal

## Premium Payment

- **Payment Term:** 1 year; yearly renewable
- **Payment Mode:** Annually



- **Payment Method:** The Policy Owner can pay their Premium via method specified by the Company. The validated deposit slip or premium deduction shown in your account statement shall be considered as proof of payment. Other Premium payment provisions shall follow Basic Policy.
- **Grace Period:** Follow AIA Comcare

## Illustration Example



Company ABC chose AIA ComCare’s comprehensive life insurance solution for their staff to protect their finance and wellbeing. To further support the wellbeing of its workforce, Company ABC has added the MedCare to provide extra medical protection for their employees.

Member	Job Title
Neary	CEO
Chenda	Senior Manager
Rithy	Manager



Rithy



Chenda



Neary



## Core Benefits at a Glance

	Zone 2 (CEO)	Zone 1 (Sr. Manager/ Manager)
Overall Annual Limit	USD 120,000	USD 20,000
Daily Hospital Room & Board Benefit (per day)	USD 320	USD 90
In-patient Treatment Benefit	USD 120,000	USD 20,000
Out-patient Cancer Treatment Benefit	USD 120,000	USD 20,000
Out-patient Dialysis Benefit	USD 120,000	USD 20,000
Out-patient Surgical Procedure Benefit	USD 120,000	USD 20,000
Secondary Claim Benefit	USD 100	USD 25
Pre and Post Hospitalisation Out-patient Treatment Benefit (per hospitalisation)	USD 1,200	USD 400
Emergency Road Ambulance Benefit (per hospitalisation)	USD 800	USD 400
Accidental Emergency Care Benefit (per hospitalisation)	USD 1,000	USD 400



## Optional Benefits at a Glance



	Zone 2 (CEO/CFO)	Zone 1 (Sr. Manager/ Manager)
Hospital Companion Benefit	USD 120,000	Not Included
Dental/ Vision	Included	Not Included
Optional Out-patient Care Benefit (per year/per visit)	USD 2,400/ USD 160	USD 750/ USD 60
Optional Preventive Care Benefit ( per year)	USD 240	USD 75
Maternity Delivery	USD 3,800	USD 1,250

## Claim Procedure

If the claimant wishes to make a claim, he/she must send **AIA** the appropriate form and evidence within 90 calendar days from the occurrence of the covered event. To make claim, login to AIA+ or contact Client Care at +855 86 999 242, our Telegram AIACambodia bot, or seek support from AIA Insurance Agent (Life Planner).

Proof of evidence is mandatory document to be submitted together with the claim form to **AIA**, for example: original receipt, medical certificate, medical discharge letter, and any medical document. All medical documents are obtained from medical facility which is legally licensed to supply medical treatment in the country.

The claimant could apply for the claim if the claim event and medical treatment happen during the policy effective period.

## Obtain your insurance proposal today

Contact **AIA Insurance Agent (Life Planners)** or **AIA Client Care**:

- Telephone : 086 999 242
- Email : [KH.Care@aia.com](mailto:KH.Care@aia.com)
- Website : [aia.com.kh](http://aia.com.kh)
- Telegram : AIACambodia bot

## Exclusions

This Rider shall not cover:

1. Cosmetic surgery or Treatment, or Treatment of their complications, Treatment to remove hair or grow hair, change skin or eye color with the exception of reconstructive surgery after an accident or an Eligible Treatment; or
2. Treatment needed as a result of nuclear contamination, biological contamination or chemical contamination, whilst engaging in or taking part in any conflict, war, act of foreign enemy, invasion, civil war, riot, rebellion, insurrection, revolution, overthrow of a legally constituted government, explosions of war weapons, or any event similar to one of those listed. This includes any Treatment needed as a result of the Insured Member exposing himself to needless peril, such as going to a place of civil unrest as an active onlooker or a spectator.



- For clarity, there is cover for Treatment required as a result of a terrorist act providing that terrorist act does not result in nuclear, biological or chemical contamination; or
3. Treatment resulting from engaging in military activity or professional sport activities; or
  4. The use of a drug which has not been established as being effective or which is experimental. This means they must be licensed by the European Medicines Agency if the Insured Member is receiving Treatment in Europe, or the US Food and Drug Administration (FDA) if the Insured Member is receiving Treatment anywhere else in the world, and be used within the terms of that license; or
  5. Treatment which has not been established as being effective or which is experimental. For established Treatment, this means procedures and practices that have undergone appropriate clinical trial and assessment, sufficiently evidenced in published medical journals for specific purposes to be considered proven safe and effective therapies; or
  6. Fertility Treatment, sterility and contraception Treatment, sex change, impotence; or
  7. Treatment provided by a non-medical or non-licensed medical professional; or
  8. Foetal surgery; or
  9. Medical expenses that arise from, or are in any way related to, Human Immunodeficiency Virus (HIV) and/or HIV related Illnesses, including Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) and/or any mutant derivative or variations thereof, within the first year from the Policy Effective Date; or
  10. Expenses that are not for medical Treatment such as telephone, TV rent, newspaper, moisturizer, creams, toiletries, dietary supplements and vitamins, toothpaste or soap; or
  11. Costs that are not usual, Reasonable and Customary in the area where Treatment is received; or
  12. Treatment against obesity such as, but not limited to, gastric banding or surgery, removal of surplus tissue and fat; or
  13. Treatment that is not Medical Necessary; or
  14. Treatment that is customarily done as an out-patient including drugs and dressings, consultations and investigations, including pre- and post-natal visits except those out-patient Treatments allowed as stated in the Benefits Schedule; however, the Company will pay for out-patient Treatment up to the limit shown under Optional Out-patient Care Benefit, including medications, dressings, consultations and investigations if the Optional Out-patient Care Benefit has been purchased; or
  15. Preventative health screening, health check-up, vaccination, diagnostic procedures and investigations for the early detection of non-symptomatic disease; however, the Company will pay for preventive health screening up to the limit shown in the Benefits Schedule if the Optional Preventative Care Benefit has been purchased; or
  16. Vaccination other than initial vaccination for new-borns covered under the maternity delivery benefit if Optional Maternity Care Benefit has been purchased; or
  17. Mental illness even if it requires Hospital admission; however, the Company will pay for mental illness expenses up to the limit shown in the Benefits Schedule if the Optional Mental Care Benefit has been purchased; or
  18. Dental and gingival (or equivalent) care; however, the Company will pay for dental care up to the limit shown in the Benefits Schedule if the Optional Dental Care Benefit has been purchased; or
  19. Vision correction: however, the Company will pay for vision care up to the limit shown in the Benefits Schedule if the Optional Vision Care Benefit has been purchased; or
  20. Medical expenses incurred during the Waiting Period except for medical expenses arising following an accident occurred within the Waiting Period and subject to other exclusions; or
  21. External prosthetics and durable medical appliances and support appliances other than those that are part of the surgical procedure and integral to the Treatment; however, the Company will pay for durable medical equipment up to the limit shown in the Benefits Schedule if the Optional

Durable Medical Equipment Benefit has been purchased; or

22. The cost of collecting donor organs or issue or for any related administration costs (such as, but not limited to, the cost of a donor search); or

23. Additional charges for obtaining medical reports or filling in claim forms or other administrative charges; or

24. Treatment for addictions (such as alcohol addiction or drug addiction) or substance abuse (such as alcohol abuse or solvent abuse), or Treatment of any Illness or injury needed directly or indirectly as a result of any such abuse or addiction.





**HEAD OFFICE – PHNOM PENH**

GIA TOWER, 31<sup>ST</sup> FLOOR, SOPHEAK MONGKUL STREET, PHUM 14, SANGKAT TONLE  
BASSAC,  
KHAN CHAMKAR MORN, PHNOM PENH

**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

 086 999 242 |  AIA.COM.KH |  AIA CAMBODIA