

About Allianz Group

Allianz Group is a leading world-wide insurance and asset management company with more than 126 million individual and corporate customers in more than 70 countries. Allianz customers benefit from various individual and group insurance services, from property, life, and health insurance to credit insurance and business insurance on a global scale. Allianz is one of the largest investors worldwide, managing more than 809 billion euros of insurance customer funds. Our asset managers, PIMCO and Allianz Global Investors, manage third-party additional assets of 1.9 trillion euros. Due to the systematic integration of ecological and social criteria in its business processes and investment decisions, Allianz achieved the top position of insurance companies in the Dow Jones Sustainability Index. In 2021, the Allianz Group had 155,000 employees and earned the total revenue of 149 billion euros and operational profit of 13.4 billion euros.

About Allianz in Asia

Asia is one of the core growth areas for Allianz, characterized by the diverse cultures, language, and customs. Allianz has been present in Asia since 1910, providing fire and marine insurance in the coastal cities of China. Currently, Allianz is active in 16 markets in the region, offering a wide range of insurance products with loss insurance, life insurance, health protections and solutions, and asset management as its core business. With more than 36,000 staff, Allianz serves the needs of more than 21 million customers in the region through various distribution channels and digital platforms.

About Allianz Indonesia

Allianz started its business in Indonesia in 1981 by opening its first representative office. Allianz established PT Asuransi Allianz Utama Indonesia, a general insurance company, in 1989. Later, Allianz stepped into the field of life and health insurance, as well as pension fund business by establishing PT Asuransi Allianz Life Indonesia in 1996. In 2006, Allianz Utama and Allianz Life started sharia insurance business. Now, Allianz Indonesia is supported by more than 1,000 employees, more than 40,000 marketing personnels, and banking partner networks and other distribution partners. To date, Allianz is one of the most reputable insurance companies in Indonesia, trusted to provide protection for more than 10 million insureds.

PT Asuransi Allianz Life Indonesia is licensed and supervised by the Financial Services Authority (Otoritas Jasa Keuangan), and its marketing personnels hold the license from the Indonesian Life Insurance Association (Asosiasi Asuransi Jiwa Indonesia)

Important Notes

- SmartHealth Blue Sapphire is a group health insurance product issued by PT Asuransi Allianz Life Indonesia.
- The premium includes insurance fee, administration fee, stamp duty fee (if any), and commission fee for the marketers.
- This Brochure is not a part of SmartHealth Blue Sapphire Policy and does not constitute an insurance agreement between PT Asuransi Allianz Life Indonesia and Customers. Customers are completely bound to any provisions under the SmartHealth Blue Sapphire Policy.
- Please refer to the General Product and Service Information Summary (RIPLAY Umum) and the SmartHealth Blue Sapphire Policy for more information about the terms and conditions, including details of the fees and exceptions.
- This Brochure is made in **Indonesia Language and English Language**; in the event of different interpretation between the text of Indonesia Language and English Language, the text of **Indonesia Language shall prevail**.

If you have any question and complaint regarding our products and/or services, please submit it through our Customer Center:

PT Asuransi Allianz Life Indonesia

Customer Lounge

World Trade Centre 6, Ground Floor
Jl. Jenderal Sudirman Kav. 29-31
Jakarta Selatan 12920, Indonesia

Corporate Number : +6221 2926 8888
AllianzCare : 1500 136
E-mail : ContactUs@allianz.co.id
Website : www.allianz.co.id

No.378/AZLI-BRAND/RE/A/III/2021

Allianz 



PT ASURANSI ALLIANZ LIFE INDONESIA

SmartHealth Blue Sapphire

A Comprehensive Health protection for your company's most valuable assets

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Employees are one of the key assets for every company in successfully achieving its goals. As a company's valuable asset, they are also vulnerable to many health risks that may affect company's financial condition.

Day by day, medical and health expenses are constantly increasing. PT Asuransi Allianz Life Indonesia understands the significance of this issue. Therefore, we present **SmartHealth Blue Sapphire**, a comprehensive health protection for your company's most valuable assets.

Group Health Insurance Benefits for Your Company



Providing the peace of mind to your employees and their families.



Adding more value to your company.



Increasing loyalty and work productivity of your employees.



Keeping the stability of your company's cash flow.

Advantages of SmartHealth Blue Sapphire



Simple requirements, with at least 10 members (consisting of the employees and their family members)



Competitive Premium, with minimum premium requirement of Rp2,500,000.



Comprehensive protection, from inpatient care, outpatient care, dental care, spectacles, to maternity: all **tailor-made**.



24/7 Medical Hotline is available.



Claim Service Guarantee within 7 working days *



Online claim submission is available via **Allianz eAZy Connect**.



Allianz eAZy Med, Online Physician Consultation and Medicine Buying features with auto-deduction from your Outpatient Care benefit.



Dedicated Servicing Team selama masa perlindungan berlangsung.

*) Complete claim documents shall be submitted on the first submission and the claim has been approved by Allianz.

Benefit Table

Inpatient Care

In Rupiah

Inpatient Care	Maximum Limit	IIP 500 Plan	IIP 1000 Plan
Benefit for each class			
Room	Per Day	500.000	1.000.000
ICU Room		700.000	1.200.000
Treating Physician Visit		150.000	275.000
Specialist Visit		200.000	325.000
Surgical Charges			
• Complex Surgery	Per Inpatient Care Period	55.000.000	105.000.000
• Major Surgery		35.750.000	68.250.000
• Intermediate Surgery		24.750.000	47.250.000
• Minor Surgery		13.750.000	26.250.000
Other Inpatient Care Charges		8.500.000	16.000.000
Pre-Inpatient Care	Per Inpatient Care Period 30 Days Prior to Inpatient Care	1.000.000	2.000.000
Post-Inpatient Care	Per Inpatient Care Period 30 Days Following Inpatient Care	1.000.000	2.000.000
Home Nursing	Per Day	250.000	500.000
Ambulance	Per Inpatient Care Period	350.000	600.000
Emergency Outpatient Care due to an Accident	Per Accident for 14 Days	2.700.000	5.200.000
Emergency Dental Care due to an Accident		2.700.000	5.200.000
Death Benefit		6.000.000	11.000.000
Maximum Benefit in a year		Unlimited	Unlimited

Notes:

- Other plans are available to suit your company's needs.
- The Benefit Tables only serve as an illustration.

Benefit Table

Maternity

In Rupiah

Maternity	Maximum Limit	IM 500 Plan	IM 1000 Plan
Benefit for each class			
Normal/Abnormal Delivery	Per Pregnancy	9.000.000	16.500.000
Addition for Abnormal Delivery		1.800.000	3.300.000
Surgical Delivery		16.200.000	29.700.000
Legal Miscarriage		4.500.000	8.250.000
Pre- and Post-Natal Care	Per Year	3.150.000	5.780.000
Pregnancy Complication	Per Pregnancy	4.500.000	8.250.000

Outpatient Care

In Rupiah

Outpatient Care	Maximum Limit	IOP 500 Plan	IOP 1000 Plan
Benefit for each class			
Physician Consultation	Per Visit 30 Visits Per Year	50.000	75.000
Specialist Consultation	Per Visit 10 Visits Per Year	150.000	213.000
Medicines	Per Year	2.050.000	2.925.000
Diagnostic Examination		1.100.000	1.600.000
Physiotherapy	Per Visit 10 Visits Per Year	88.000	119.000

Notes:

- Other plans are available to suit your company's needs.
- The Benefit Tables only serve as an illustration.

Benefit Table

Dental Care

In Rupiah

Dental Care	Maximum Limit	ID 500 Plan	ID 1000 Plan
Benefit for each class			
Preventive Care	Per Visit 2 Visits Per Year	150.000	250.000
Basic Dental Care	Per Year	1.250.000	2.250.000
Complex Dental Care		1.500.000	2.500.000
Dentures		1.750.000	3.000.000

Spectacles

In Rupiah

Spectacles	Maximum Limit	IS 500 Plan	IS 1000 Plan
Benefit for each class			
Eye Examination	Per Visit 1 Visits Per Year	125.000	250.000
Frame		750.000	1.500.000
Lenses/Contact Lenses		750.000	1.500.000

Notes:

- Other plans are available to suit your company's needs.
- The Benefit Tables only serve as an illustration.

Terms & Conditions

Product Type

Group Health Insurance.

Member Entry Age (latest birthday)

Inpatient Care, Outpatient Care, Dental Care, and Spectacles

- Employee: Max 65 years old
- Spouse: Max 65 years old
- Child: 15 days – 18 years old and may be extended up to 25 years old (while still in formal education and not working)

Maternity

- Female (employee/spouse): 16 – 45 years old

Coverage Age (latest birthday)

Until the Member attains the age of 70 years old.

Currency

Rupiah.

Premium Payment Period

As long as the Coverage is renewed.

Waiting Period

- Inpatient Care with the same diagnosis or surgery: 30 days
- Maternity: 280 days
- Pre-existing Diseases: 12 months

Underwriting

- Minimum Member: 10 Members.
- Minimum Premium: Rp2,500,000

Claim Process

Cashless dan Reimbursement.

Insurance Period

Annually.

Co-Insurance

0%, 5%, 10%, 15%, 20%

Premium

Please contact Allianz marketing personnel for more information about the total payable Premium according to your selected Plan and benefit.

Benefit Illustration

Company

PT Kebahagiaan Abadi

Member

50 People

Annual Premium*

Rp147,000,000

Benefit

IIP 500 Plan Inpatient Care

For 1 inpatient care, Members are entitled to all applicable benefits stated in the tables (such as inpatient room charge, physician consultation charge, and other inpatient charges).

*Premium will be calculated based on age and selected benefits.

Claim Procedure

Health Insurance Claim Documents (Reimbursement)

1. Allianz health insurance claim form that has been completed and signed by the Member with the Medical Resume section filled in by the treating Physician and includes the Physician's full name, stamp, and Medical Practice Permit Number.
2. Original receipt with the Hospital's stamp (with address and telephone number).
3. List of expenses along with a copy of the prescription(s).
4. Supporting medical documents.
5. A copy of the member's Member Card.
6. A copy of the physician's referral to receive treatment and medication from a Specialist (except for Obstetrician, Pediatrician, and Ophthalmologist), diagnostic-supporting examination, and physiotherapy.
7. An Outpatient or Dental Care Claim due to an Accident or Emergency must be submitted by attaching a police report and the chronology of the traffic accident.
8. The first claim of Additional Spectacles Insurance shall be submitted by enclosing a copy of the Ophthalmologist's prescription.

Notes:

A Health Insurance Claim shall be submitted no later than 30 calendar days after the end of the treatment. Any claim submitted after such period will not be paid.

7 Days
Work*

Claim shall be paid after **the documents are all completed, proven to be accurate, and approved by Allianz**. In the event of a delay upon fulfillment of such requirements, the Customer is entitled to **a voucher worth Rp100,000,- per Customer**.

*For the terms and conditions, please visit: <https://www.allianz.co.id/layanan/klaim/klaim-asuransi-kesehatan/jaminan-penggantian-klaim>

Claim Procedure

Death Benefit Claim Documents

1. Allianz health insurance claim form that has been completed and signed by the Member with the Medical Resume section filled in by the treating Physician and includes the Physician's full name, stamp, and Medical Practice Permit Number.
2. Death certificate issued by a village official, both the original and its certified copy.
3. A copy of the Member's identity card/proof of identity and a certificate from the company.
4. A copy of the Beneficiary's identity card/proof of identity.
5. A copy of the member's Family Card.
6. Official report issued by the Police in the event of unnatural death or death due to a traffic accident, both the original and its certified copy.
7. Certificate issued by the local Indonesian Representative Office in the event of death overseas, both the original and its certified copy.

Notes:

- The Policyholder must notify Allianz of a Member's death no later than 30 calendar days after the Member passes away.
- Submission of the documents related to Death Benefit claim must be provided to Allianz in writing no later than 60 calendar days after the Member passes away.
- We will pay the Death Benefit no later than 14 calendar days after we receive the complete documents and approve the claim in accordance with the Policy.

Cashless Claim Documents

1. The Member shall bring their Allianz Member Card and ID Card/other official identity to Allianz's Network Hospital.
2. Allianz's Network Hospital shall verify the membership and benefit of the Member by swiping the Group Health Insurance Member Card.
3. The Member or their family shall sign the Medical Service Form and a Statement Letter from the Allianz's Network Hospital.
4.
 - a. If any claim excess incurred, the Member shall pay it to the Hospital. The Member is allowed to be discharged after completing the payment.
 - b. If the whole expense is in accordance with the insurance benefit the Member is entitled to, the Member is allowed to be discharged without making any payment.

For **Cashless Facility**, the Member only needs to bring their Group Health Insurance member card to **Allianz's Network Hospital**.

Claim Document Submission



Jakarta

Allianz Document Management Center (ADMC)
Setiabudi Atrium, Lt. 3 Suite 308 A-309
Jl. H.R. Rasuna Said Kav. 62 Kuningan,
Karet Kuningan Kec. Setiabudi
Jakarta Selatan 12920

Note:

For **claim document submission address** in **Bandung, Medan, Surabaya, Bali**, please visit our website at **www.allianz.co.id**.

Document submission available on Monday – Friday
at 08:00 – 17:00 local time (excluding holidays)

To send all claim documents to Allianz, you may use the free of charge delivery service of PT Pos Indonesia



Claims may also be submitted digitally via Allianz eAZy Connect

Exclusions

Inpatient and Outpatient Care

Allianz will not pay the Insurance Benefit in the event of treatments and/or medications related to:

1. Pre-existing diseases, unless the Policy has been in effect for 12 consecutive months.
2. Organ transplantation, including any treatment and/or medication related to organ transplantation.
3. All supporting equipment or artificial aids or synthetic materials outside or attached to the body, including but not limited to wheelchairs, crutches, prostheses, hearing aids, sight aids, except for those implanted inside the body during surgery in the operating room such as a pacemaker, stents, pens, plates, screws, K-wire, intraocular lenses, and so on.
4. Dialysis, including any treatment and/or medication related to it.
5. Experimental, traditional, and/or alternative treatments and medications outside of western medical science including but not limited to acupuncture (unless provided by a Physician), traditional Chinese medicine practitioner, traditional bone fracture healers, shamans, chiropractors, naturopathy, holistic practitioners, and the likes.
6. Psychiatric or neurological disorders, including psychosis, neurosis, stress, depression, psychogeriatric disorders and their physiological or psychosomatic manifestations, drug abuse rehabilitation, and addiction to drugs and/or alcohol.
7. All treatments and/or medications related to:
 - a. Infertility, including artificial insemination, IVF, and fertility restoration.
 - b. Impotence.
 - c. Any hormonal therapy related to the perimenopausal syndrome.
8. Any medication and/or treatment for losing or gaining weight.

Exclusions

9. Any medication and/or treatment related to cosmetics, including plastic surgery except for functional reconstruction due to an accident performed no later than 30 calendar days after the accident.
10. Periodic physical examinations, Medical Check Ups, or supporting examinations that are not related to the treatment or diagnosis of the covered Disease/injury.
11. Any medication and/or treatment related to:
 - a. Hernia in a child under 10 (ten) years old.
 - b. Congenital abnormalities and/or abnormal/delayed growth and development.
12. Eye refractive disorders, including any treatment and/or medication related to eye refractive disorders.
13. Circumcisions unrelated to a Disease or Accident.
14. Any treatment and/or medication related to:
 - a. HIV/AIDS, including any diseases or conditions related to HIV/AIDS.
 - b. Sexually Transmitted Diseases.
15. Circumcisions unrelated to a Disease or Accident.
16. Vitamins without a Physician's recommendation and without any medical indications.
17. Food Supplement.
18. Immunization, including any treatment and/or medication related to its complications.
19. Birth Control, including any treatment and/or medication related to its complications.

Exclusions

20. Any treatment and/or medication due to:
 - a. Active involvement in war, riot, fight, or crime,
 - b. Intentional injuries and suicide attempts.
21. Any treatment and/or medication due to participation in dangerous activities or sports, including:
 - a. Mountain climbing, rock climbing, urban climbing, bungee jumping, rafting
 - b. Equestrian sports
 - c. Boxing or any physical contact sports
 - d. All aerial activities (parachuting, gliding, sky diving, Ultralite, and other aerial activities)
 - e. Any diving activities using breathing apparatus (diving and other diving activities).
 - f. Any activities that involve racing with motor vehicles (motorbike, car, boat, and other kinds of race)
22. Any treatment and/or medication received by the Member due to flying with a chartered aircraft, military/police aircraft, or helicopter.
23. Non-Accident-Related Outpatient Treatment, unless the Policy comes with Additional Outpatient Insurance, the terms of which shall be set out in separately.
24. Non-Accident-Related Dental Treatment and denture implanting for any reason, unless the Policy comes with Additional Dental Care Insurance, the terms of which shall be set out separately.
25. Pregnancy, Childbirth, or Miscarriage Treatment, unless the Policy comes with Additional Maternity Insurance, the terms of which shall be set out separately.
26. Any treatments and/or medications which have been reimbursed by the Government, Health Insurance, and/or other parties.

Exclusions

Maternity

1. Any female Member under the age of 16 or above 45.
2. Any Member who is pregnant prior to the effective date of the Maternity Insurance Rider for the Member.
3. Treatments related to illegal abortions, sterilization, as well as fertility tests and treatments.

Dental Care

1. Orthodontic care and/or treatment (fixed or removable).
2. Any oral surgery except for odontectomy and operculectomy.
3. Any treatment and/or medication for temporomandibular joint disorders.
4. Any dental care and/or treatment under general anesthetic.

Death Benefit

1. Suicide either under a sober state or not.
2. Death sentence.
3. Premeditated crime committed by those who have interests in the insurance.