

# LIFE UNDERWRITING GUIDELINES FOR BUSINESS PARTNERS

Allianz Life Insurance Malaysia  
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## ROLES OF AN AGENTS AS FIELD UNDERWRITERS

Risk selection begins with agents, who select target markets, identify prospects, work with clients to determine their financial needs and seeks ways to meet those needs. Agents see applicants in person and can make observations that underwriters in head office cannot. When an agent understand the important role of field underwriting and risk selection, usually they will bring in quality business that underwriters can respond and process rapidly. These quality customers will also provide the agents with long term business stability and growth.



The purpose of field underwriting is to :

- ❖ To provide better customer experience. Managing the expectations of the customers right from the start of their insurance coverage journey with us.
- ❖ To conduct prudent risks selection with the purpose of ensuring that Allianz is able to maintain a sustainable and profitable business, providing long term service to customers, fulfilling our responsibilities in paying legitimate claims promptly.

***Each customer has a different profile. In the underwriting risk selection process, we will look at the following area to determine the overall risks of the customer when they purchase an insurance from us. :***

- **Medical Underwriting** – looking at the health/ medical condition of the life assured and decide on the long term prognosis of the condition. Different type of product will cover different risks.
- **Financial Underwriting** – to establish the suitable amount of coverage and premium paid to avoid over-insured that may lead to fraudulent claim, money laundering or early lapsation. Coverage for personal and family protection is very different from business protection or credit protection. Please refer to various sections for deeper understanding on the calculation of the different coverage and needs.
- **Occupation or avocation/ hobbies** – There are some occupation or hobbies (avocations) that are more dangerous, hazardous or prone to accident than usual. Occupation classification is given according to the exact duties. Extra loading or exclusion might be imposed for occupation or activities that has higher risk exposure
- **Residential / travelling** – Foreigners or Malaysian that stay in or often travel to countries that are politically unrest, or prone to war and riots, areas with poor sanitation or health facilities will be exposed to higher risk of death, TPD, hospitalization, or fraud. Therefore, higher loading might be imposed or application will be declined depending on countries/ areas, length of stay or frequency of travelling to that place.
- **Regulatory requirements** – please refer to the Enhanced Due Diligence (EDD) section for further understanding.



## Underwriting Department Service Charter

*Our Underwriting Philosophy is to focus on approving and issuing coverage that is equitable to the insured, deliverable to our business partners, profitable to the company.*

<b>Type of Process</b>	<b>Target Turn Around Time (on best effort basis)</b>	<b>Remark</b>
New submission from Imagine (MDRT)	T+1 working day	T being submission date
New submission from Imagine (all agents)	T+3 working days	T being submission date
New submission with physical Application Form (MDRT and all agents)	T+6 working days	<b>T being payment receive date</b>
Deferments return (MDRT)	T+3 working days	T being full document received date. (If case refer to external party, need extra 2 days)
Deferments return (all agents)	T+4 working days	T being full document received date. (If case refer to external party, need extra 2 days)



### Important Note :

Please note that we will try our best to meet the targeted turn around time (TAT) as stipulated above. However, we seek for your understanding and patience, as there might be times which we will not be able to meet the TAT due to surge in volume or due to certain unforeseen circumstances that might cause delay in processing the cases. Therefore, we encourage our business partners not to submit cases on last minute and to submit application using Imagine system.

# MEDICAL UNDERWRITING



## Introduction

Medical underwriting is necessary to ensure that each insured person pays an appropriate amount for the risk he/she represents, To determine the risk that each person represents, the underwriter need to know the medical condition of that person.

Agents that familiar themselves with the tools (medical reports and tests) used by underwriters and understands how different medical condition will affect the insurance premium and coverage, will be able to set the appropriate expectation with the clients right form the start of the sales process. They do not deliver 'surprises' to their clients either during application or during claims. These agents will be seen as professional agents by their clients.

### Areas of Medical Underwriting :

- Medical history of the life assured
- Current medical condition
- Examinations and tests done (investigative or regular screening)
- Congenital conditions whether covered or not covered by contract
- Signs and symptoms (as yet to see doctor)
- Family history
- Medical reports submitted due to Non Medical Limit Requirements





## **A. Medical History**

- Medical history is an important component of medical underwriting as a medical history will affect the customer's current health and future prognosis of their longevity, early diagnosis of critical illness or early claim for hospitalization or TPD cover.
- Some very serious conditions should be declared irrespective of how long ago the medical history was, even though currently already fully recovered. Example, history of cancer, heart disease, stroke, head or spine injury, etc.
- If unsure, best is to declare faithfully in the application form. Provide the year/ time it was diagnosed, type of treatment given and current condition.
- We will need an Attending Physician Statement (APS) from his/ her treating doctor for serious medical conditions.
- If investigation has been done, we will need a copy of the investigation report, example, cancer we need a copy of the Histopathology report (HPE), for Angiogram done for the heart, we need the Angiography report. X-ray or MRI done for spine problem etc.
- For the investigation report, we need the interpretation of the report by the radiologist or doctor to be included.



## **B. Current Medical Condition**

- Current medical conditions are conditions that customer is currently seeking treatment, on medication, on observation/ follow up, planned surgery/ procedures or pending further investigation, etc.
- To provide a fair decision on the customer's health condition, we need to understand in detail the medical condition, therefore, will usually require the Attending Physician Statement from their current treating doctor. For common condition like Diabetes Mellitus or Hypertension, the treating doctor can give us their record in our Questionnaires. (Please refer to section on Requirements for Common Diseases).
- If investigation has been done, we will need a copy of the investigative report as mentioned above.



### C. Examinations and Tests done

(investigation or regular screening)

- Please give us a clear photocopy of the investigation report with the complete interpretations from the doctor/radiologist.
- Regular screening or blood tests done by the client himself/herself can be used to replace a similar report request by underwriter. The validity of the report is 6 months. Underwriter may need to call for the latest tests/ report if the validity is already more than 6 months.

### D. Congenital conditions not covered by contract

- It is important that customer should disclose to the underwriter all medical condition including congenital conditions that are falls under general exclusion clause in certain product contract. As this may affect other products or link to other health condition.



What genes tell us about inheriting diabetes.

### E. Signs and symptoms (and yet to see doctor)

- Client need to declare any prolonged health signs and symptoms that he/ she is experiencing even though he/she has not consulted a doctor for the prolonged health condition.

### F. Family history

- Scientifically, it is proven that a person with strong family history of certain health condition will have higher chances of getting the diseases compare with a person without a family history.
- We require the customer to inform us the family history from the 1<sup>st</sup> degree relatives (parents and siblings) diagnosed before the age of 60.
- Family history that need to declare :
  - Multiple Sclerosis, Alzheimer's, Parkinson's, Huntington's disease, motor neuron disease, polycystic kidney disease, heart disease, stroke, hypertension, diabetes mellitus, cancer including carcinoma-in-situ or any other inherited or genetic diseases.

**MEDICAL REQUIREMENTS TABLE A**  
(for normal products except High Net Worth Product)

Accumulated Sum Insured Per Life (RM) for Past 1 Year	Age																	
	≤ 6	7-15	16-30	31-40	41-45	46-50	51-55	56-60	>60									
≤ 50,000	N-Med																	
50,001 – 200,000																		
200,001 – 300,000																		
300,001 – 400,000																		
400,001 – 500,000																		
500,001 – 700,000	ME/APS (Paed)					ME	ME			ME+RECG								
700,001 – 1,000,000		ME+FBT				ME+RECG+FBT			ME+TMX+FBT									
1,000,001 – 2,000,000	ME+APS (Paed)	ME+FBT	ME+RECG +FBT				ME+TMX+FBT		ME+TMX+FBT									
> 2,000,000		ME+TMX+FBT+APS																

**Reference:**

Non Med	No medical requirement
B	Medical Examination
C	Resting ECG (12 leads) with report
D	Treadmill ECG with report
E	Chest X-Ray with report
F	ALLIANZ LIFE Large Amount Profile <ul style="list-style-type: none"> <li>• Full <u>Haemogram</u></li> <li>• Fasting Blood Glucose</li> <li>• <u>Creatinine, Urea, Uric Acid</u></li> <li>• Total Cholesterol, HDL, LDL, Triglycerides, TC/HDL ratio</li> <li>• GGT, SGOT, SGPT, Total Bilirubin, Total Protein, Albumin, Globulin, Alkaline Phosphatase, HBs Antigen, AFP + <u>Hbe Antigen</u> (if HBs Antigen is "positive"), Thyroid Function Test &amp; Urine FEME</li> <li>• HIV Test</li> </ul>
APS	Attending Physician Statement to be completed by the Life Assured's own regular Doctor

**Important Note:**

High Net Worth Product is including Allianz EverLink series, Allianz Premierlink Series, Allianz PrimeCover, Allianz Prime Legacy and Allianz Legacy Plus.

**MEDICAL REQUIREMENTS TABLE B**  
(for Allianz Everlink Plus / Allianz Everlink Signature)

Accumulated Insured Amount per Life (RM) for past 1 year	Age						
	< 16	16-50	51 - 60	61 - 70			
Up to 500,000	Non-Med						
500,001 – 1,000,000					ME + APS		ME + RECG + FBT
1,000,001 – 2,000,000					N/A		ME + TMX + FBT
2,000,001 – 3,000,000							
3,000,001 – 4,000,000							ME + TMX + FBT + APS
> 4,000,000							

**Legends:**

1. **Non-Med:** No medical requirement
2. **ME:** Medical Examination
3. **RECG:** Resting ECG (12 leads) with report
4. **TMX:** Treadmill ECG with report
5. **CXR:** Chest X-ray with report
6. **FBT:** ALLIANZ LIFE Large Amount Profile
7. **APS:** Attending Physician Statement to be completed by the Life Assured's own regular Doctor

**ALLIANZ LIFE Large Amount Profile:**

- Full Haemogram,
- Fasting Blood Glucose
- Creatinine, Urea, Uric Acid
- Total Cholesterol, HDL, LDL, Triglycerides, TC/HDL ratio
- GGT, SGOT, SGPT, Total Bilirubin, Total Protein, Albumin, Globulin, Alkaline Phosphatase, HBs Antigen, AFP + Hbe Antigen (if HBs Antigen is "positive"), Thyroid Function Test & Urine FEME
- HIV Test

**Important note:**

The aggregation of Insured Amount is among Allianz PremierLink series, Allianz EverLink Plus, Allianz PrimeCover, Allianz EverLink Signature, Allianz PrimeLegacy, Allianz Legacy Plus and Level Term.

## MEDICAL REQUIREMENTS TABLE C (for PremierHealth Cover)

Accumulated Insured Amount per Life (RM) (Past 1 year)	< 16	16-60	61-70
10,000 – 50,000	Non – Med	Non – Med	ME
50,001 – 333,333			ME + RECG + FBT
333,334 – 400,000			ME + TMX + FBT
400,001 – 500,000			
500,001 – 1,333,333	N/A	ME + TECG + FBT + APS	
1,333,334 – 2,000,000			
> 2,000,000			

### Legends:

- Non-Med:** No medical requirement
- ME:** Medical Examination
- RECG:** Resting ECG (12 leads) with report
- FBT:** ALLIANZ LIFE Large Amount Profile\*
- TMX:** Treadmill ECG with report
- APS:** Attending Physician Statement to be completed by the Life Assured's own regular Doctor

### \*ALLIANZ LIFE Large Amount Profile

- Full Haemogram,
- Fasting Blood Glucose
- Creatinine, Urea, Uric Acid
- Total Cholesterol, HDL, LDL, Triglycerides, TC/HDL ratio
- GGT, SGOT, SGPT, Total Bilirubin, Total Protein, Albumin, Globulin, Alkaline Phosphatase, HBs Antigen, AFP + Hbe Antigen (if HBs Antigen is "positive"), Thyroid Function Test & Urine FEME
- HIV Test

### Important note:

Please note that there is a new requirement for juvenile (age below 16) that apply all types of Critical Illness. Aggregation of Critical Illness will be on per life basis (irrespective of coverage years). Any aggregation of Critical Illness, (i.e., HealthCover, HealthCover Plus, Prime Care+, BabyCover, Premier HealthCover) above RM500,000 will need to perform medical exams or submit APS from attending paediatrician.



## Type of Medical Reports and Tests :

### **Medical Examination Report (MER)**

- Medical examinations must be performed by Allianz's panel doctor or Allianz's own clinic doctor. The medical examiner must not have any financial interest in the applicant and must not be related to the applicant.
- If a client has done his/ her own regular health screening, the report can replace the MER provided the content of the health screening is as detailed as the MER.
- The validity of a medical examination is 6 months for a client with medical condition and, 12 months for standard healthy life.
- Nevertheless, underwriters reserve the rights to call for the latest report when deem necessary.



### **Blood Tests**

- Fasting Blood Sugar and Lipid Profile need to be done after the client has fasted for more than 8 hours (usually overnight and next morning abstain from any food and drink, except plain water) before performing the blood test.

### **Urine Tests**

- Client should not do any strenuous exercise before a urine test is done.
- Female client should not perform the urine test 7 days before or after her menstrual period.
- When a urine test submitted has abnormal results, underwriters will call for repeat of two (2) urine tests. These 2 samples should be done on 2 separate occasions, either on two separate days OR morning and afternoon sample of the same day.

### **Important Note :**

- If an ECG, Treadmill ECG, Chest X-ray, blood tests etc, has been done by the client himself/ herself (within 12 months for standard lives and 6 months for substandard lives), a copy of the report can be submitted to underwriters for consideration\* to replace a similar requirement. ( \*Subject to underwriting approval)

Attending Physician Statement (APS) are reports that we need from the client's own doctor that attend to his/ her medical conditions.

### **Free Format APS**

- Free format APS is a statement prepared by the attending/ treating doctor. It should consist of the doctor's complete knowledge on the particular health condition of the client.
- The information should include : the diagnosis of the medical condition, date of onset, type of treatment given, any further referral to other doctors or specialist, current condition, recovery and any residual.
- If any investigation tests (scans, scopes, X-ray, ultrasounds, biopsy, Histopathology, blood tests, etc) are done, the doctor should provide a copy of the test with the interpretation.

### **Formatted APS**

- If the attending/ treating doctors refuse to provide free format APS, you can write to us to request for formatted APS. The underwriter may add specific questions into the formatted APS to guide the treating doctors to provide us with the information we need for making prudent decisions.



### **Important note :**

- If the client has seen several doctors for a same condition, agent should ask for the APS from the latest doctor.
- If the client has seen both General Practitioner (GP) and Specialist, we will need the APS from a Specialist.
- If the client has not had any follow up with any doctor for more than 2 years, we will usually need the latest assessment from the last attending doctor. This is especially important for serious medical condition (heart problem, brain, spine, stroke, mental condition, cancer etc) or chronic condition (Diabetes Mellitus, Hypertension, autoimmune disease, genetic disease etc)



### **Random selection for Medical Examination or Blood Tests**

As Allianz is advocating zero tolerance to fraud at every area of our process, we have enhanced our new business process to include a random selection of client for medical examination or blood test by our panel doctor. The selection is only applicable for policy that apply for medical riders or weekly indemnity riders. This random selection is not a new practice in the insurance industry as many companies do practice such control. Please note that this requirement cannot be waived.

### **Declaration of Continued Good Health Form (DCGH)**

Declaration of Continued Good Health Form can be used for the following circumstances. This Form is different from PMI Declaration Good Health Form and do not allow agent to replace this form with PMI Declaration Good Health Form.

- For reopen of cancel cases, the client is required to complete the DCGH form for further processing unless the underwriter has received a latest Medical Examination report from the client.
- Application form dated more than 30 days from the submission date, DCGH form is required to confirm current health status. If the Application form is out-dated more than 3 months from the submission date, a fresh Application form will be required.

# Type of Underwriting decisions



## ***Extra mortality loading (%)***

- Extra mortality (%em) will be charged when the condition is substandard, i.e. chances of claim is higher/ earlier than a normal person and the condition might worsen through age.

## ***Occupation/ Avocation/ Residential Extra (per mille)***

- Occupational and avocation extra will be charged for occupation and hobbies that have higher risks of accidents, injuries, contracting disease or exposure to toxins.
- Residential extra will be charged for client that stays more than 30 days in a geographical area that has higher risks.

## ***Temporary Extra (per mille)***

- Temporary Extra is usually charged for condition that will improve according to time. Example, a person with history of cancer condition, the prognosis will improve the longer a person survive the cancer. This extra premium will stop charging after the years/term being charged expired.

## ***Exclusions***

- When the possibility of claim is much higher/ sooner and cannot be compensated by charging an extra premium. This is usually practice for TPD, Critical Illness, and medical plans.
- For certain condition that has high chances of recurrence, exclusion will be imposed even after treatment or surgical removal done.

## ***Postpone***

- When the condition is uncertain or not fully investigated, we will postpone until full diagnosis is established.
- When the medical condition is under poor control, not stable or when current condition is too high risk with possible high recurrence. The application will be postponed until the condition is fully treated and stabilized. Minimal waiting time is 6 months before application to be reviewed again.

## ***Decline***

- We will decline when the condition is very poor with possibility of claim soon or condition have high chance of getting worst or multiple poor combination risks.



# Common Diseases and Requirements



Medical Condition	Requirements
<b>Asthma</b>	<ul style="list-style-type: none"> <li>• Answer Asthma questions in EUS*.</li> <li>• For Paper application, submit Asthma Questionnaire.</li> <li>• For more serious condition, we need Asthma Questionnaire from doctor.</li> </ul>
<ul style="list-style-type: none"> <li>• Childhood asthma is common. If mild to moderate is usually insurable.</li> <li>• Adult Asthma can be severe, especially if the customer is a smoker and also having Chronic Obstructive Pulmonary Disease (COPD).</li> <li>• <i>Underwriting decision can range from standard (for mild condition) to decline (for severe or combination of co-morbidity condition)</i></li> </ul>	
<b>Anemia</b>	<ul style="list-style-type: none"> <li>• Answer Anemia questions in EUS*.</li> <li>• Blood test is needed (full blood count - FBC)</li> </ul>
<ul style="list-style-type: none"> <li>• There are several reasons a person is anemic. If the anemia is due to iron deficiency and the level of the red blood cells is mild to moderately low, loading will be imposed. We will postpone or decline severe anemia for further investigation and treatment.</li> <li>• If the anemia is not due to iron deficiency, we will need an APS from the treating doctor.</li> <li>• <i>Underwriting decision can range from loading (for mild anemia) to decline (for severe anemia)</i></li> </ul>	
<b>Appendicitis</b>	<ul style="list-style-type: none"> <li>• Answer Appendicitis questions in EUS*.</li> </ul>
<ul style="list-style-type: none"> <li>• If successful surgical removal, there is no more no risks. If there is complication, we will need APS from treating doctor.</li> <li>• Underwriting decision – if no complication, fully recovered, standard risk.</li> </ul>	

Note : EUS\* mean Expert Underwriting System in Imagine system. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.

Medical Condition	Requirements
<b>Autism</b> (Global Developmental Delay, Asperger etc)	<ul style="list-style-type: none"> <li>• APS from attending doctor.</li> <li>• Proof the person is socially active or able to independently take care of self. E.g. employment letter, letter from school etc, will be helpful.</li> </ul>
<ul style="list-style-type: none"> <li>• Autism is often referred to as a spectrum disorder with a wide variety of symptoms and characteristics, which range in severity and impact from mild to severe.</li> <li>• <i>Underwriting decision, depending on severity of autism, from loading to decline.</i></li> <li>• <i>Children below age 18 will not be offered any coverage.</i></li> </ul>	
<b>BMI</b> (overweight/underweight)	<ul style="list-style-type: none"> <li>• MER (for severe overweight or underweight)</li> <li>• Additional requirement will subject to underwriting (e.g. Fasting Blood Sugar, Lipid profile, HBA1C)</li> </ul>
<ul style="list-style-type: none"> <li>• For individual who is overweight, he/she will have higher risk of heart disease, stroke, diabetes, hypertension, cancer and disability.</li> <li>• Severe underweight can be due to malnutrition or illness.</li> <li>• <i>Underwriting decision ranging from loading to decline depending on severity and combination of other risks.</i></li> </ul>	
<b>Breast Disorders</b> (Breast cysts, fibroadenoma, lumpy breast, fibrocystic breast disorder)	<ul style="list-style-type: none"> <li>• APS from treating Dr</li> <li>• A copy of ultrasound / Mammogram report</li> <li>• A copy of Histopathology report (HPE) if done</li> </ul>
<ul style="list-style-type: none"> <li>• Need to postpone for 6 months if :                             <ul style="list-style-type: none"> <li>➢ Newly diagnosed/ newly discovered.</li> <li>➢ If cysts/ lumps has increased in size or increased in number.</li> <li>➢ Unclear diagnosis, advise by Dr for follow up investigation after 3 to 6 months</li> </ul> </li> <li>• <i>Underwriting decision ranging from loading to exclude breast.</i></li> </ul>	

Medical Condition	Requirements
<b>Back Problem (PID, back pain, sciatica, spondylitis)</b>	<ul style="list-style-type: none"> <li>• APS from attending doctor/Medical Examination</li> <li>• A copy of investigative report (Spine X-ray, MRI) done by the attending / treating doctor.</li> </ul>
	<ul style="list-style-type: none"> <li>• <i>Prolapse Intervertebral Disc (PID), if no complication, usually TPD and medical plan will exclude spine.</i></li> <li>• <i>Spinal degenerative disease, depending on the extend of the disease, TPD cover and medical plan will range from exclusion to decline.</i></li> </ul>
<b>Blood Sugar Raised (Impaired Glucose Tolerance –IGT, Pre-DM)</b>	<ul style="list-style-type: none"> <li>• Fasting Blood Sugar (FBS) and HbA1C</li> <li>• MER</li> <li>• APS from Dr (if any)</li> </ul>
	<ul style="list-style-type: none"> <li>• People who are Impaired Glucose Tolerance (IGT), pre-diabetic or raise blood sugar has higher risk of becoming a Diabetic patient later in life.</li> <li>• Pregnant mother with Gestational Diabetes Mellitus (GDM) will also have high risk of becoming a Diabetes later. For GDM, we need APS from the treating doctor.</li> <li>• <i>Underwriting decision ranging from loading to postpone (if reading too high).</i></li> </ul>
<b>Cholesterol Raised (Hyperlipidemia)</b>	<ul style="list-style-type: none"> <li>• Answer raised cholesterol questions in EUS*.</li> <li>• Lipid profile (preferable fasting for 8-10 hours)</li> </ul>
	<ul style="list-style-type: none"> <li>• High lipids are associated with an increased risk of coronary artery disease, cerebrovascular disease, peripheral vascular disease and all cause mortality.</li> <li>• Lipid profile is a set of blood test including cholesterol, HDL, LDL and triglycerides.</li> <li>• <i>Underwriting decision, loading will be imposed.</i></li> </ul>

Note : EUS\* mean Expert Underwriting System in Imagine system. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.

Medical Condition	Requirements
<b>Cataract</b>	<ul style="list-style-type: none"> <li>• Answer cataract questions in EUS*.</li> <li>• ME</li> </ul>
	<ul style="list-style-type: none"> <li>• Recurrent or complication can happen, therefore, we may still exclude after surgery.</li> </ul>
<b>Cancer</b>	<ul style="list-style-type: none"> <li>• APS from attending doctor</li> <li>• A copy of Histopathology report (HPE)</li> </ul>
	<ul style="list-style-type: none"> <li>• The prognosis of cancer depends on type of cancer, treatment given, stage and grade of the disease.</li> <li>• <i>Underwriting decision, possible life cover only with high loading for early stage cancer (stage I or II with no lymph node involvement) if the client has completed treatment, fully recovered. Normally a waiting period of 3 to 5 years after completed treatment will need to be observed depending on the type of cancer. Please check with underwriters if unsure.</i></li> <li>• <i>Coverage for CI and H&amp;S plan declined.</i></li> </ul>
<b>Cysts (in Kidney, Liver, Ovarian, etc)</b>	<ul style="list-style-type: none"> <li>• APS from treating Dr</li> <li>• If no treating Dr, to submit a copy of ultrasound report or any investigation report done.</li> <li>• Additional requirement (e.g. blood test, Urine test etc) will subject to underwriting.</li> </ul>
	<ul style="list-style-type: none"> <li>• We need to know type of cysts, size and any treatment needed.</li> <li>• <i>Underwriting decision :</i> <ul style="list-style-type: none"> <li>➤ <i>If size is too big or increase in size or number, we will postpone/ decline.</i></li> <li>➤ <i>There is concern for multiple kidney cysts. If confirm polycystic kidney disease – will be declined.</i></li> </ul> </li> </ul>

Note : EUS\* mean Expert Underwriting System in Imagine system. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.



Medical Condition	Requirements
<b>Dengue Fever</b>	<ul style="list-style-type: none"> <li>• Answer Dengue Fever questions in EUS*.</li> <li>• We will only offer cover after completion of treatment and full recovery.</li> </ul>
<b>Diabetes Mellitus (DM)</b>	<ul style="list-style-type: none"> <li>• DM Questionnaire from attending doctor.</li> <li>• MER</li> <li>• Fasting blood tests (FBS and HbA1C)</li> </ul>
	<ul style="list-style-type: none"> <li>• <i>Underwriting decision :</i> <ul style="list-style-type: none"> <li>➢ <i>For DM with good control, usually is insurable.</i></li> <li>➢ <i>H&amp;S plan and Early CI are declined.</i></li> <li>➢ <i>However, DM with co-morbidities (overweight, hypertension, high cholesterol etc) will make the loading very high and possible decline.</i></li> <li>➢ <i>DM with end organ damage (eyes problem, kidney problem, legs gangrene, history of heart attack, stroke) are decline risks.</i></li> </ul> </li> </ul>
<b>Fibroids (uterine fibroids)</b>	<ul style="list-style-type: none"> <li>• Answer Fibroids questions in EUS*.</li> <li>• APS from treating doctor</li> <li>• A copy of Ultrasound or investigation report if any.</li> </ul>
	<ul style="list-style-type: none"> <li>• Small fibroids or fibroids that do not cause problem do not usually require any treatment other than observation to monitor growth.</li> <li>• If newly diagnosed (within 6 months) or if pending surgery, we need to postpone cover for 6 months until confirmed diagnosis or after surgery.</li> <li>• <i>Underwriting decision, ranging from loading to exclusion.</i></li> </ul>
<b>Gallstone (Cholelithiasis)</b>	<ul style="list-style-type: none"> <li>• Answer Gallstone questions in EUS*.</li> <li>• APS if any complication.</li> </ul>
	<ul style="list-style-type: none"> <li>• If there is repeated colic/ pain or pending surgery, we will need to postpone until after treatment or surgery.</li> </ul>

Note : EUS\* mean Expert Underwriting System in Imagine system. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.

Medical Condition	Requirements
<b>Gastric problem (Gastritis/ Peptic Ulcers/)</b>	<ul style="list-style-type: none"> <li>• Answer Gastric questions in EUS*.</li> <li>• Manual app, answer 'Gastric questionnaire'</li> <li>• APS - if severe gastric pain/ Peptic ulcers</li> <li>• A copy of investigation report (refer below).</li> </ul>
<ul style="list-style-type: none"> <li>• If no more recurrent pain for &gt; 2 years, standard for all covers.</li> <li>• If investigation has been done, e.g. endoscope, upper GI series, H Pylori test etc, we need a copy of the investigation report with interpretation.</li> <li>• <i>Underwriting decision :</i> <ul style="list-style-type: none"> <li>➢ <i>Of no more recurrent pain for &gt; 2 years, standard fro all types of covers.</i></li> <li>➢ <i>If H Pylori is not cleared, we will impose exclusion on H&amp;S plan.</i></li> </ul> </li> </ul>	
<b>Gastro-esophageal Reflux (GERD) / Esophagitis</b>	<ul style="list-style-type: none"> <li>• Answer GERD questions in EUS*.</li> <li>• Manual app- answer 'Gastric Questionnaire'</li> </ul>
<ul style="list-style-type: none"> <li>• Typical symptoms include heartburn, dyspepsia, regurgitation and non-cardiac chest pain. High level reflux may cause respiratory symptoms including hoarseness (laryngitis), pharyngitis, chronic cough, asthma or pneumonia. Severe reflux may result in progressive dysphagia, weight loss and hematemesis (vomiting blood).</li> <li>• <i>Underwriting decision, for H&amp;S plan, ranging from standard to loading or postpone depending on severity.</i></li> </ul>	
<b>Hemorrhoids/ Piles</b>	<ul style="list-style-type: none"> <li>• Answer Hemorrhoids questions in EUS*.</li> </ul>
<ul style="list-style-type: none"> <li>• Hemorrhoids are inflamed, swollen veins in the lower portion of the rectum or anus resulting from increased venous pressure.</li> <li>• <i>Underwriting decision, exclusion or loading for H&amp;S plan.</i></li> </ul>	

Note : EUS mean Expert Underwriting System. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.

Medical Condition	Requirements
<b>Hepatitis (A, B, C)</b>	<ul style="list-style-type: none"> <li>• Answer Hepatitis questions in EUS*.</li> </ul> <p>Hepatitis B :</p> <ul style="list-style-type: none"> <li>• Blood test – liver function test (LFT) including HbsAg, HbeAg, Alpha fetoprotein (AFP)</li> </ul> <p>Hepatitis C :</p> <ul style="list-style-type: none"> <li>• APS from treating doctor</li> <li>• Blood test –anti HCV &amp; RIBA/ HCV-PCR</li> <li>• Ultrasound of liver</li> </ul>
<ul style="list-style-type: none"> <li>• Hepatitis B and C is an inflammation of the liver caused by infection with the hepatitis B virus (HBV) or C virus (HCV).</li> <li>• Chronic hepatitis B or C can cause cirrhosis, liver failure and liver cancer.</li> <li>• <i>Underwriting decision ranging from loading to decline.</i></li> </ul>	
<b>Hypertension (High Blood Pressure)</b>	<ul style="list-style-type: none"> <li>• Answer Hypertension questions in EUS*.</li> <li>• Hypertension Questionnaire by doctor</li> <li>• MER</li> </ul>
<ul style="list-style-type: none"> <li>• Control and co-morbidities are important factors in a person with hypertension.</li> <li>• Co-morbidities like overweight, high cholesterol, smoking and Diabetes Mellitus will add up to very high loading premium and even decline.</li> <li>• Uncontrolled hypertension (above 150/100) will be postponed for 6 months until fully treated and controlled.</li> <li>• Please refer to the special 3High product for client with high blood pressure reading (above 150/100).</li> </ul>	

Note : EUS mean Expert Underwriting System. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.

Medical Condition	Requirements
<b>Kidney Stone</b> (Urinary stone, Renal stone)	<ul style="list-style-type: none"> <li>• Answer Kidney Stone questions in EUS*.</li> <li>• With Complications – APS from doctor.</li> <li>• Micro-urinalysis</li> </ul>
<ul style="list-style-type: none"> <li>• Possible complications include recurrence of stones, urinary tract infection, obstruction of the ureter, acute obstructive uropathy, kidney damage, scarring and decrease or loss of function of the affected kidney.</li> <li>• <i>Underwriting decision ranging from standard to loading/ exclusion for H&amp;S.</i></li> </ul>	
<b>Thalassemia</b>	<ul style="list-style-type: none"> <li>• Answer Thalassemia questions in EUS*.</li> <li>• Full Blood Count (FBC)</li> <li>• APS if on treatment/ follow up by doctor.</li> </ul>
<ul style="list-style-type: none"> <li>• People with Thalassemia have an inherited blood disorder that causes mild to severe anemia.</li> <li>• People who are carriers (Thalassemia trait) usually have no symptoms and need no treatment.</li> <li>• Those with moderate forms of thalassemia (thalassemia intermedia) may need blood transfusions occasionally.</li> <li>• Those with severe thalassemia have a serious and life-threatening illness. Untreated Thalassemia major leads to heart failure as well as liver dysfunction and susceptibility to infection.</li> <li>• Thalassemia Major, Haemoglobin H disease and Hydrops Fetalis are decline risk for all type of covers.</li> <li>• <i>Underwriting decision, usually standard to loading for Thalassemia minor/ trait. Usually decline cover for other than minor/ trait.</i></li> </ul>	

Note : EUS mean Expert Underwriting System. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.

Medical Condition	Requirements
<b>Thyroid Disease</b> (Hyperthyroidism/ Hypothyroidism/ Goiters)	<ul style="list-style-type: none"> <li>• Answer Thyroid Question in *EUS</li> <li>• MER</li> <li>• Thyroid Questionnaire by attending Dr</li> <li>• Blood test - Thyroid Function Test</li> </ul>
	<ul style="list-style-type: none"> <li>• Hyperthyroidism or hypothyroidism results from an abnormality of the thyroid gland in which thyroid hormone levels are increased or decreased resulting in a hypermetabolic or hypometabolic state.</li> <li>• Condition is usually treated with medications, radioactive iodine or surgery to remove a portion of the thyroid. If the thyroid must be removed with radiation or surgery, replacement thyroid hormones must be taken for the rest of the individual's life.</li> <li>• Both conditions are generally treatable and rarely fatal.</li> <li>• Thyroid crisis or "storm" is an acute worsening of the symptoms of hyperthyroidism that may occur with infection or stress.</li> <li>• <i>Underwriting decision, ranging from loading to postpone/ decline depending on control and any complication.</i></li> <li>• <i>Any uncontrolled symptoms (uncontrolled thyroid function test, palpitation or on going weight loss) will be postponed.</i></li> <li>• <i>Any symptoms of cardiac involvement (tachycardia, angina, congestive heart failure, atrial fibrillation) or slowness in mental or physical activities (for hypothyroidism) will be declined.</i></li> <li>• <i>Hypothyroidism – in a child with growth and mental retardation will be declined.</i></li> </ul>
<b>Sinusitis</b>	<ul style="list-style-type: none"> <li>• Answer sinusitis questions in EUS*.</li> </ul>
	<ul style="list-style-type: none"> <li>• Sinusitis refers to inflammation of the mucous membranes that line the bony sinuses which drain into the nasal passages.</li> <li>• Treatment is usually medication. However, Surgery to open and drain the sinuses may be necessary, especially in individuals with recurrent episodes of inflammation despite medical treatment.</li> <li>• <i>Underwriting decision range from standard to exclusion.</i></li> </ul>

Note : EUS mean Expert Underwriting System. If questions are answered in EUS, agent do not need to submit a separate questionnaire anymore.



# Common Diseases and Requirements



Medical Condition	Requirements
<b>Stroke</b> (Cerebrovascular accident/ TIA/ Lacunar stroke)	<ul style="list-style-type: none"> <li>• APS from treating doctor</li> <li>• MER</li> </ul>
<ul style="list-style-type: none"> <li>• <i>Underwriting decision :</i> <ul style="list-style-type: none"> <li>➤ Coverage will be postpone if stroke recovery is less than 1 year ago.</li> <li>➤ Thereafter, usually high loading with no riders cover.</li> <li>➤ Depending on the severity of the condition usually decline if there is neurological deficits or other residual condition (impaired motor and sensory function, gait and reflexes, seizures etc).</li> </ul> </li> </ul>	
<b>Heart Attack</b> (fully recovered after bypass/ angioplasty)	<ul style="list-style-type: none"> <li>• APS from treating doctor with latest investigation report</li> <li>• MER</li> <li>• If defaulted follow-up, we need the latest cardiac assessment from cardiologist.</li> </ul>
<ul style="list-style-type: none"> <li>• We need from the treating doctor the exact diagnosis ( how many vessel blocked), type of treatment given and results of cardiac function after treatment).</li> <li>• <i>Underwriting decision, postpone cover for 1 year after recovery. Thereafter, usually high loading with no riders cover.</i></li> </ul>	
<b>Abnormal EGC/ Treadmill ECG</b>	<ul style="list-style-type: none"> <li>• APS with latest investigation report</li> </ul>
<ul style="list-style-type: none"> <li>• If recently discovered abnormal ECG/ treadmill ECG – postpone</li> <li>• If history, we will need treating doctor’s report on diagnosis, treatment, follow up and current health condition.</li> </ul>	

Underwriting Requirements	List of conditions where preborn application will not be granted
<ul style="list-style-type: none"> <li>❖ Gestation age between 13 weeks to 36 weeks</li> <li>❖ Proposal form and Prenatal Questionnaire to be completed on or after 13 weeks of gestation age. Early submission is not acceptable</li> <li>❖ Obstetrics and Gynaecology Questionnaire is required if applying for medical coverage or mother's age is 35 years old and above</li> <li>❖ The Obstetrics and Gynaecology Questionnaire is only valid for 4 weeks from date of last ultrasound scan done and last follow up date. Note: If exceeding 4 weeks, fresh Obstetrics and Gynaecology Questionnaire will be required.</li> </ul>	<ul style="list-style-type: none"> <li>❖ Mother with gestation diabetes/diabetes/impaired glucose tolerance/impaired fasting glucose</li> <li>❖ Mother with hypertension</li> <li>❖ Mother with pregnancy complications (eg. eclampsia, placenta previa or abruption, vaginal bleeding, premature uterine contraction, etc..)</li> <li>❖ Mother with excessive weight gain during pregnancy</li> <li>❖ Mother who has given birth for 5 times or more</li> <li>❖ Mother with epilepsy</li> <li>❖ History of premature birth</li> <li>❖ Twins pregnancies or more via assisted reproduction techniques</li> <li>❖ Intrauterine growth retardation</li> <li>❖ Abnormal Nuchal Translucency/ Chromosomal/ Genetic test</li> <li>❖ Fetal or structural abnormalities on ultrasound scan</li> </ul>

**\*\* For Twins pregnancy, such cases will be underwritten on case to case basis subjected to specific criteria. Triplets and above is strictly declined.**

**\*\* Preborn applications will be assessed on case to case basis and underwriters reserved the right to accept or reject based on the overall risk assessment**

# COVID-19 GUIDELINE

Scenario	Details	Underwriting Requirements/Outcome
Fully vaccinated for COVID-19	<ul style="list-style-type: none"> <li>❖ Need to complete full doses as recommended by Ministry of Health (please refer to Covid-19 vaccination status in MySejahtera)</li> </ul>	<ul style="list-style-type: none"> <li>❖ Normal underwriting applies.</li> <li>❖ Covid-19 Digital Vaccination Certificate and Covid-19 vaccination status in MySejahtera if requested.</li> </ul>
Not Vaccinated/Partially Vaccinated	<ul style="list-style-type: none"> <li>❖ Did not complete full doses as recommended by Ministry of Health (please refer to Covid-19 vaccination status in MySejahtera)</li> </ul>	<ul style="list-style-type: none"> <li>❖ Postpone all highly substandard lives with comorbid above 150% extra mortality until COVID-19 situation improves.</li> </ul>

***\*The guideline will change from time to time according to the severity and trend of the COVID-19 variant at the time of underwriting. How the variant will affect incident rate for hospitalization, death and the effect of long COVID.***

***\*Our underwriting guide will follow the optimum vaccination dose recommended by Ministry of Health (MOH). For those who do not have the full vaccination dose including with booster as recommended by MOH, we will underwrite on case-to-case basis.***

***\*Underwriting reserved the right to call for the vaccination status to assist in the assessment of the applications.***

# COVID-19 GUIDELINE

Scenario	Details	Underwriting Requirements/Outcome
Close contact with COVID-19 positive	<ul style="list-style-type: none"> <li>❖ Based on the Ministry of Health guidelines</li> </ul>	<ul style="list-style-type: none"> <li>❖ Normal underwriting applies.</li> </ul>
Tested positive for COVID-19 (Asymptomatic/mild symptoms)	<ul style="list-style-type: none"> <li>❖ Asymptomatic/mild symptoms (eg. fever and cough)</li> <li>❖ No treatment required/in patient treatment</li> <li>❖ Completed quarantine</li> <li>❖ No other underlying co-morbidities</li> </ul>	<ul style="list-style-type: none"> <li>❖ Complete recovery and resolution of symptoms</li> <li>❖ Questionnaire on Recovery of COVID-19</li> <li>❖ Normal underwriting applies</li> </ul>
Tested positive for COVID-19 (Symptomatic with in patient treatment)	<ul style="list-style-type: none"> <li>❖ With underlying co-morbidities</li> </ul>	<ul style="list-style-type: none"> <li>❖ Postpone from 6 weeks to 1 year depending on the severity</li> <li>❖ Attending Physician Statement, Questionnaire on Recovery of COVID-19, Medical Examination, Blood Test, etc... are required for assessment</li> <li>❖ Terms offerable depending on severity of condition and any existing co-morbidities</li> </ul>

**\*The guideline will change from time to time according to the severity and trend of the COVID-19 variant at the time of underwriting. How the variant will affect incident rate for hospitalization, death and the effect of long COVID. The underwriter will make a final assessment based on the overall case profile.**

# FINANCIAL UNDERWRITING HOW TO DETERMINE TYPE AND AMOUNT OF COVERAGE





## ***Introduction :***

Insurance agent is a very important person in helping the underwriters making decision regarding the financial situation and worth of a client. A professional agent will be able to accurately determine the coverage needs of the client and provide the necessary information and documents to support the recommendation. This will reduce frustrations and going back and forth for financial information and documents.

## ***Basic principles in financial underwriting***

### ***1. Coverage/ protection need of the client***

Insurance is to *provide financial protection against untimely death or unfortunate event (TPD/ CI/ H&S)*. If the client purchase a coverage that cause him to be *worth more when dead than alive*, there is a high chances of anti-selection, early claim, fraud or even cause his life to be in danger. Same concept goes for hospital income benefits or weekly indemnity plans. If the client *gets more money by staying in the hospital or taking medical leave than working*, this will encourage abuses, non disclosure and even fraud. Therefore, the amount applied for insurance coverage needs to commensurate with the life assured's income.

### ***2. Affordability of the Payor***

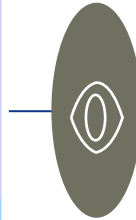
If the life assured *purchase an insurance with premium more than he can afford*, there will be a high chance of policy lapse, or life assured being wrongly informed on the benefits, or even possible attempt of money laundering.



# FINANCIAL UNDERWRITING – STEP BY STEP GUIDE

## Step 01

Determine Type of  
Coverage/  
Protection needed



Refer to Section 1,  
determine type of  
coverage the client  
need.

## Step 02

Calculate the sum  
assured



Determine the sum  
assured by referring  
to the sum assured  
calculation section or  
max sum assured  
allowed

## Step 03

Check the required  
financial proof/  
documents



Refer section 2 for  
the Financial  
Requirements Table

## Step 04

Refer to the EDD  
Requirements



Finally, refer section  
3 on how to perform  
customer enhanced  
due diligence (EDD)  
on documents  
required.

## Section 1 : Determine Type of Cover and Sum Assured

### A. Personal and Family Protection



Type of Coverage	Rule of Thumb Calculation	Purpose												
<b>Personal / Family Protection Death Benefit [Life]</b>	<p>Sum assured for life cover is multiple of a person's annual earned income, example :</p> <table border="1"> <thead> <tr> <th>Age</th> <th>Annual Income Factor</th> </tr> </thead> <tbody> <tr> <td>Up to 40</td> <td>20X</td> </tr> <tr> <td>41 to 50</td> <td>15X</td> </tr> <tr> <td>51 to 55</td> <td>10X</td> </tr> <tr> <td>56 to 60</td> <td>5X</td> </tr> <tr> <td>Above 60</td> <td>IC</td> </tr> </tbody> </table> <p><i>Note : Underwriters reserve the discretion to increase or reduce the multiple income factor, depending on how strong is the financial proof of the case.</i></p>	Age	Annual Income Factor	Up to 40	20X	41 to 50	15X	51 to 55	10X	56 to 60	5X	Above 60	IC	<p>~ Upon death of the life assured, claims proceed will help the family or beneficiary from financial loss and difficulty. Sum assured applied should not cause the person to be worth more dead than alive.</p> <p>~ Earned income means active income, where the income will stop when a person dies. Multiple of income factor used is an estimation on the number of years in loss income experience by the family.</p> <p><i>Note : Max TPD cover allowed is 8 million per life.</i></p>
Age	Annual Income Factor													
Up to 40	20X													
41 to 50	15X													
51 to 55	10X													
56 to 60	5X													
Above 60	IC													
<b>Personal/ Family Protection Living Benefit [E.g. Health Cover, PrimeCare and all Critical Illness/ Dread Disease plans]</b>	<p>Sum assured for Critical Illness cover is also multiple of a person's annual earned income. However, the multiple is lesser, example :</p> <table border="1"> <thead> <tr> <th>Age</th> <th>Annual Income Factor</th> </tr> </thead> <tbody> <tr> <td>Up to 40</td> <td>12X</td> </tr> <tr> <td>41 to 50</td> <td>7X</td> </tr> <tr> <td>51 to 56</td> <td>5X</td> </tr> <tr> <td>56 to 60</td> <td>2X</td> </tr> <tr> <td>Above 60</td> <td>IC</td> </tr> </tbody> </table> <p><i>Note : Underwriters reserve the discretion to increase or reduce the multiple factor, depending on how strong is the financial proof of the case.</i></p>	Age	Annual Income Factor	Up to 40	12X	41 to 50	7X	51 to 56	5X	56 to 60	2X	Above 60	IC	<p>~ Critical Illness cover is a living benefit cover whereby the proceed of the claims is to benefit the life assured while he is still living.</p> <p>~ When a critical illness event happen, the claims benefit is to help the life assured to cover his financial needs during his recovery from the illness. Therefore, the multiple income factor used (number of years loss in earned income) will be lesser compare with death cover.</p> <p><i>Note : Max CI benefit allowed is 4 million per life.</i></p>
Age	Annual Income Factor													
Up to 40	12X													
41 to 50	7X													
51 to 56	5X													
56 to 60	2X													
Above 60	IC													
<b>Hospital Income Benefit</b>	<p>The hospital income benefit should not be more than 75% of life assured's daily income.</p> <p>Example : Hospital Income benefit applied less than <math>\leq</math> Annual income/365 days X 75%</p>	<p>~Same insurance principle applies, that hospital income benefit should not be higher than 75% of the life assured's daily income.</p> <p>~The total amount of Hospital Income Benefit allowed is aggregated over the whole industry, i.e. all the similar products bought with other insurance companies.</p>												
<b>Weekly Indemnity Benefit [UWI]</b>	<p>Weekly indemnity benefit should not be more than 75% of the life assured's weekly income. Example : Weekly Indemnity applied less than <math>\leq</math> Annual income X 75%/ 52 weeks</p>	<p>~Same insurance principle applies, that weekly indemnity benefit not be higher than 75% of the life assured's weekly income.</p> <p>~The total amount of weekly indemnity benefit allowed is aggregated over the whole industry, i.e. all the similar products bought with other insurance companies.</p>												



### Important Note :

- Client must be employed or self-employed at the point of request to attach the Weekly Indemnity Rider.
- This rider's renewability is not guaranteed. The company reserve the right to terminate the rider by giving 3 months written notice to the policyholder. Please refer to contract for further information.

## Section 1 : Determine Type of Cover and Sum Assured

### B. Business Protection



Type of Coverage	Rule of Thumb Calculation	Purpose
Keyman Insurance (company as the policy owner)	<p>Sum assured for life or CI cover is multiple of the company's gross or net profit. For example :</p> <p>Gross profit X 2 times OR Nett profit X 4 times</p>	<p>A Keyman Policy is to cover a company against possible financial loss arising from loss of sales, business contacts, productivity, good will, costs of recruitment and training, as a result of the death of a key person. Therefore, it is very important to ensure the life assured is an important or key person in the company before we can offer a keyman coverage.</p> <p><b>COMPULSORY :</b></p> <ul style="list-style-type: none"> <li>• Applicant is the Company</li> <li>• Signature of one of the director except the Life Assured or authorized officer and official rubber stamp of the Company must be on the application form</li> <li>• Keyman Questionnaire to determine the importance of the life assured to the company</li> <li>• Audited Profit and Loss Account of the company (last 3 years)</li> </ul> <p>If the Life Insured is a Director of the Company, to submit these as well :</p> <ul style="list-style-type: none"> <li>• Copy of Form 49</li> <li>• Copy of Form 24 (if own any share)</li> </ul>
Credit Insurance (company as the policy owner)	<p>Sum assured for life or CI cover is usually 50% of the business loan/ credit facilities amount Overdraft will not be considered as loan.</p>	<p>Upon death or critical illness of the life assured, the claims proceed will be paid to the company to repay the bank loan/ credit facilities.</p> <p><b>IMPORTANT :</b></p> <p>The life assured must be one of the named guarantor for the loan. If there are several guarantors for the loan, to determine the sum assured of the insurance policy, we will divide the loan according to the shares (%) of loan by the life assured.</p> <p>Example :</p> <p>Loan amount = 1 mil, 3 guarantors with equal shares We will take 1 mil divide by 3, then multiply by 50%.</p> <p>Final amount of sum assured allowed = 160k</p>

**Section 1 : Determine Type of Cover and Sum Assured**  
**C. Employee Benefits**



The right approach to employee benefit is to purchase Group Employee Benefit insurance. However, we will only allow company that wish to purchase individual life insurance policy for all their employees for the purpose of giving them a retirement benefit insurance.

Nevertheless, we still have concerns that we need to mitigate before we should allow such coverage. The concerns are :

**Types of group/ business.** If the employees are working in a hazardous industry, we are getting a big group of people with higher exposure to risk, but at the same time because it's not a group renewable policy whereby we can manage the claims experience, we might face a large amount of uncontrollable risks. Please refer table C for list of decline industry. The list is not exhaustive, the underwriter reserve the rights to accept or decline a company.

**Company as applicant.** This means that if the employee dies or injured, the death benefit or living benefit will go to the applicant which is the company instead of the next of keen. This can be subject to abuses as well as cause moral hazard to the employee. Please refer to the requirements below for mitigation of risks.

	<b>Requirements</b>
<b>1</b>	Company registration, Form 24 and 49
<b>2</b>	Company letter from Human Resource (HR) or authorized personnel to confirm the following : a) that the proceed of the insurance will be paid to the life assured for living benefits and paid to the life assured's next of kin for death benefit. b) the job position and salary/ income of the life insured. c) the total number of staff that will be covered under the individual life insurance product. If not all staff are covered, please provide reasons.
<b>3</b>	The usual medical requirements as per non medical limit table or medical condition of the life assured.
<b>4</b>	The guidelines for enhanced due diligence (AMLA) requirements remain unchanged

**Form 24 is currently known as Form/Section 78 (Allotment of Shares)**  
**Form 49 is currently known as Form/Section 58 (Particulars of Directors)**



Coverage allowed under Employee Benefit applying Individual Life Insurance :

Type of Coverage	Maximum sum assured per life under the company as applicant (except for keyman policy)
Basic Life cover with TPD	RM 300,000
Critical Illness and Early CI	RM 300,000
Medical (H&S) riders	300 R&B
PA riders & Weekly Indemnity rider	0
Hospital Income Benefit rider	0
Payor Benefits riders	0
Other riders	Case to case basis

**Decline Risks :**

**Type of Industry or Group**

1. Oil and Gas industry
2. Construction and building workers
3. Farm and plantations workers
4. Timber and logging
5. Restaurant workers
6. Shipping industry
7. Automobile industry including mechanics and foreman
8. Manufacturer of heavy industry, including furniture and wood work
9. Uniformed personnel including security guards, armed forces.
10. Hospital personnel
11. Religious or charitable organization
12. Professional sportsmen/ women
13. Co-operatives societies, clan/ guild associations, club member
14. Multi level marketing schemes

***Section 1 : Determine Type of Cover and Sum Assured***  
***D. Personal Loan/ Credit Insurance***

This is a policy to cover the outstanding loan amount in the event the borrower (the life assured) died or total and permanently disabled or diagnosed with critical illness.

The claims proceed will be paid to the financial institution like banks, credit company, hire purchase companies etc, to settle the loan.

The recommended type of insurance used for this purpose is Mortgage Reducing Term Assurance (MRTA). This is because the sum assured will reduce according to the amount of outstanding loan and is a one time premium (single premium) to make the product more affordable. A regular premium insurance is normally not so suitable for this purpose.

***Section 1 : Determine Type of Cover and Sum Assured***  
***E. Coverage for a Person who is a Bankrupt***

When a person becomes bankrupt, his/her assets (including life insurance policies) will vest with the Director General of Insolvency (DGI).

A bankrupt cannot own a policy. During claims, the benefits amount cannot be paid to a bankrupt unless approval from the DGI has been obtained. Therefore insurance applications should be proposed under someone who has insurable interest (eg. spouse) on the life of the Bankrupt as the policy will be owned by the spouse and not the bankrupt.

Sum assured applied is restricted to RM100,000 per life for Life/TPD and Critical Illness, RM200 room and board for medical plan. Request for higher sum assured to be considered on case to case basis and subject to written approval from the DGI. .

**Section 2 :**  
**Financial Underwriting Requirements**

Accumulated Sum Assured Per Life (RM)	Requirements (Individual Insurance)
0 - 2,000,000	NIL
2,000,001 - 3,000,000	1. Large Amount Questionnaire Part 1 2. Large Amount Questionnaire Part 2
3,000,001 - 5,000,000	1. Large Amount Questionnaire Part 1 2. Large Amount Questionnaire Part 2 3. Proof of Income
> 5,000,000	1. Large Amount Questionnaire Part 1 2. Large Amount Questionnaire Part 2 3. Proof of Income* 4. Other financial requirement if needed**  <i>Note: Large Amount Questionnaire Part 3 is required for TSA Life 10 million and above</i>

\* **Proof of Income** = Form B/BE (last 2 years), Company Audited Profit & Loss Account (last 2 years)

\*\* **Other financial requirements:** Bank current/saving account statements, bank loan documents, bank statements on assets and liabilities, property/ business evaluation, assets (shares/ investments/ properties etc)

\*\*\* **The underwriters shall reserve the right to call for financial evidence whenever deemed necessary**

## Explanation Notes on Proof of Income (POI)

1. LAQ 1 = Large Amount Questionnaire ( to be completed by agent)
2. LAQ 2 = Large Amount Questionnaire ( to be completed and signed by policy owner)
3. LAQ 3 = Large Amount Questionnaire ( to be completed by agent)
4. POI = Proof of Income (mandatory)
  - Form B/ BE (last 3 years) with copy of ITR (Income Tax Receipts), or / and
  - Company **Audited** Profit and Loss Account (last 3 years)
5. Other Financial Documents (these are only supplementary) to further support proof of worth or affordability :
  - Properties or assets (Sales and Purchase Agreement or Title Deeds to Land) with utility bills to show current ownership
  - Income from rentals receipts
  - Bank Fixed Deposits certificate
  - Bank loan agreement / bank statements of account
  - Share investments or unit trust certs
  - Commission statements

To determine the financial requirements, all existing in force policies are taken into account irrespective of number of years the cases have been in force with ALIM and other insurance companies.

*25% of net assets can be used to determine the sum assured. Net assets = total assets minus total liability. These assets must be verified with proof of documents as stated above.*



### Important Note :

The underwriter reserves the right to request for further financial evidence should the documents received is deemed insufficient to support the premiums payable and/or sum assured applied.

### Section 3 : Customer Due Diligence Requirements



Knowing your customer (KYC) is an important part of our sales process. Agents should ensure that he/she knows who we are selling the insurance coverage to, understand their background and insurance needs. Agent **must sight the original copy of NRIC or passport** of the client before submitting a copy (either taking a photo in Imagine system or a photocopy) to the company.

**PO Box address is not allowed as this is not a valid residential address.** Hence, we no longer accept this and customers are required to provide a valid residential address.

Allianz has a 'zero fraud tolerance' philosophy, therefore, as our business partners, agents play a very significant roles in performing the customer due diligence right from the start of the sales process.

Annualized Premium		Required Document for CDD	
		Individual Customer	Beneficial Owner of Corporate Company / Entity Customer
With Effective 1 Jan 2021, Life Assured, Policy Holder and Payor are required to submit Proof of Identity.		NRIC/Passport	NRIC/Passport for Beneficial owner and documents as per item **
		NRIC/Passport	NRIC/Passport for Beneficial owner and documents as per item **
Regular Premium or Single Accumulated Premium (all years)	≥ RM200,000	Proof of income (please refer explanation on POI)	Proof of income (company audited Profit and Loss Account) and all Beneficial Owners documents **



#### Important Notes :

\*\*Verification of the beneficial owners are through identifying the following information :

- NRIC/Passport of the authorised representative of the company.
- Authorization Letter/Director's Resolution
- Latest Form 24 and 49 and
- Memorandum and Articles of Association / Articles of Association / Certificate of Incorporation (If applicable)



# COVERAGE FOR HAZARDOUS OCCUPATIONS AND AVOCATIONS/ HOBBIES



## *Introduction*

Occupation plays an important role in a person's life, it determines the risk the person is being exposed to on a daily basis and many times it influences a person's health and lifestyle as well.

In a risk assessment context, we will usually look at three main occupational hazards :

- 1, Accident hazards**
- 2. Moral hazards or illegal hazards**
- 3. Health hazards**

A rating for occupation will be imposed for occupation that will impose higher risk of death, Total and Permanent Disability (TPD), Hospitalization or Indemnity for inability to work.

The occupational rating can be reduced or removed once the client's occupation has changed from hazardous to less or non hazardous. Similarly, when the occupation of the client has changed to more hazardous, he/she must inform the company, as the company has the right to impose the loading for Personal Accident plans and Hospitalization and Surgical riders (please refer to the supplementary contract for details)



## 1. Accident hazards

- We will look at occupations that are prone to accident hazards, example working in high rise buildings, or manual work that handle heavy or dangerous objects.
- Occupations that require to travel to remote areas like desert, mountainous area, oil rigs or high seas may need to be imposed with loadings.
- Occupation like off shore fishermen are exposed to several risks, for instance storms, pirates and even lifestyle. Therefore, apart from imposing loadings, underwriters may call for HIV tests
- Occupations that handle dangerous weapons like explosive or fire arms will subject to underwriting consideration.

## 2. Moral hazards or illegal hazards

- Occupations that have high tendency to be expose to illegal trade, black market or money laundering will be declined.

## 3. Health hazards

- Health hazards are common among workers that handle chemicals.
- Miners or workers that work in silicon, asbestos factory are expose to both accident and health hazards.

### Important Note :



Each occupation can differ slightly depending on various factors. If the occupation is hazardous, it is very important that agents provide us with :

- i. Details of exact duties
- ii. Industry, nature of business
- iii. Name of company and address
- iv. If required travelling, countries or area travel to and frequency of travelling.

If insufficient information are given, the decisions might either be too conservative or we may require to ask for more information, which will delay the underwriting process.

Underwriter reserve the right to call for HIV test for certain occupation.

## Non Income Earner :



Occupation	Maximum Sum Assured (Life)	Maximum Sum Assured (CI) *	Riders
House Wife	600,000	500,000	UWI not allowed Hospital Income Benefit not allowed
Baby Sitter	600,000	500,000	UWI – maximum 200 Hospital Income Benefit – Maximum 100 (under HS plan 200)
Non-Working Children / Student	600,000	500,000	UWI not allowed Hospital Income Benefit not allowed

**\*Note: Including staged critical illness (Prime Care & Prime Care +)**

For applications with a sum insured above the maximum limit is subject to the financial capacity of the payor (spouse/parents)

Financial requirements include:

- Proof of the payor income
- Confirmation of total insurance coverage on the life of the payor (provide copy of policy schedule)
- Confirmation of total insurance coverage on the life of other children, if any (provide copy of policy schedule)

### Retirees/Pensioners:

The maximum sum insured allowed per life without any financial proofs is RM 600,000 for Life and RM 500,000 for CI.

Same as non-income earner, UWI and Hospital Income Benefit are not allowed.

For applications with sum insured above the allowable limit, further financial requirements are needed. Please refer to the Proof of Income Section.

### Unemployed :

Unemployed is a poor risk, therefore, we will not accept an insurance application from an unemployed person.

## ***Introduction***

A person's choice of leisure activities, hobbies or avocation influences the risk he/ she is being exposed to.

The underwriters usually distinguish the risks of the activities between one off event, regular past time like hobbies or an activities by a professional.



Underwriting will not impose exclusion or loading for one-time-event done during holiday or travelling, example bungee jumping, mountain climbing, snorkeling etc.



However, activities that are done habitually or regularly as an interest or required some training will be considered as hobbies or avocation. Examples are scuba diving, automobile racing, boxing, sky diving etc. We will require the life assured to complete a questionnaire to give us more information on the activities. Loading/Exclusion might be impose, certain dangerous activities will even be declined cover.



Certain activities are done by professionals as part of their job, Example, rescue scuba diver. We will assess according to their professional qualifications, frequencies, areas and type of involvement. We will need more information through the questionnaire.



# COVERAGE FOR FOREIGNERS AND TRAVELLING OVERSEAS





## CRITERIA FOR ELIGIBILITY

1. Application must be signed in Malaysia with residence address in Malaysia.
2. Foreigner who are not reside in Malaysia / intend to stay short term will be rejected.
3. The medical examination must be done locally.
4. Underwriter may impose residential loading / exclusion if the foreigner is from high risk countries.
5. Underwriter may require additional financial proof if the foreigner is from high risk countries and applying high sum assured
6. Foreigners must have a valid interest in Malaysia defined as per any of the following Criteria:

### All Application must submit with the following :

1. Copy of valid Passport with at least 6 months validity
2. Copy of Valid Visa
3. Residential Questionnaire ( if not submit through Imagine System)

VALID INTEREST	ADDITIONAL DOCUMENTS	REMARKS
Malaysian PR	NIL	
Married to Malaysian (non-working)	Marriage certificate	Maximum limit same as non-income earner
Working in Malaysia	Valid work permit	Accept Professional Class 1 & 2 only
Businessman	Company Registration, Form 24 and 49	
Student	Valid student visa	Maximum limit same as non-income earner
MM2H	MM2H Visa / MM2H Approval Letter	
Dependent (children/ non-working spouse)	Dependent pass	Maximum limit same as non-income earner



Note : Singaporean and Bruneian are treated same risk as Malaysian.

## List of Economic Sanction Countries (as of March 2023)

Region	Country
Asia	Afghanistan
	Myanmar
	Cambodia
	China (inc. Hong Kong)
	North Korea
Africa	Burundi
	Central African Republic
	Democratic Republic of the Congo ('DRC')
	Ethiopia
	Guinea, Republic of
	Guinea-Bissau
	Libya
	Mali
	Somalia
	Sudan (North)
	Sudan (South)
	Tunisia
	Zimbabwe
Europe	Belarus
	Moldova
	Ukraine (only Crimea & Sevastopol)
	Russia
	Turkey
	Former Yugoslavia
Middle East	Iran
	Iraq
	Lebanon
	Syria
	Yemen
Americas	Cuba
	Haiti
	Nicaragua
	Venezuela

### Important Note :

*\*North Korea is strictly decline.*

*\*\*Please refer to underwriting department for Sanction List countries as the list may change from time to time.*

*\*\*\*The acceptance of foreigners from Economic Sanction Countries will be subjected to Compliance clearance*

## GUIDELINES FOR MALAYSIAN RESIDING OVERSEAS

Underwriting is usually concern with extended stay abroad in countries that has strong political unrest, military activities, widespread deadly disease or poor sanitation with poor health care facility available.



No restrictions or loading impose for traveling oversea for holidays or work for less than 1 month in a year.



If stay more than 1 month in a year, underwriting may impose loading or decline depending on :

- Area of stay – countries, area (remote) or cities
- Length of stay
- Type of job activities involved (e.g. flying using helicopter, boat to remote area etc)

**Underwriting Requirements :  
Travel / Residential Questionnaire**

# GUIDELINES FOR MALAYSIAN RESIDING OVERSEAS



Countries	Residential Risk
First World Countries (eg. Australia, Canada, Hong Kong, Japan, New Zealand, Taiwan, South Korea, United Kingdom, Singapore, USA)	Usually standard
Brunei, Vietnam, China	Usually standard
Myanmar, Cambodia, Laos, Sri Lanka, Bangladesh	Life with rating, no riders including TPD
Indonesia, Philippines, Thailand	Can consider standard if travels to major cities, otherwise to be considered with loading or declined
Middle East - Bahrain, Kuwait, Qatar, Oman, United Arab Emirates (UAE)	Usually standard
Middle East - Azerbaijan, Saudi Arabia	Life with rating, no riders including TPD
Afghanistan, Central African Republic, Iran, Iraq, Ivory Coast, Guinea, Liberia, Nigeria, Sierra Leone, Somalia, Sudan, Syria, Uganda, Yemen	Usually decline

**\* The above is not exhaustive and only serves as a guide, any changes to the global travel risk will be taken into consideration for assessment. Please also refer to COVID-19 guidelines for travel risk.**

## MEDICAL PLAN UPGRADE

### Special Underwriting Consideration for upgrade of existing medical plan

For clients who have existing medical plan with Allianz and would like to upgrade medical plan for better benefits, they will be given special underwriting consideration.

Criteria to consider waiver of exclusion or replace with loadings:

- Medical conditions:
  - Single episode
  - Treatment completed
  - No residuals or complication
  - No recurrence
- Existing medical coverage is standard risk and must be inforced status
- Total existing claim's amount less than RM10,000.00
- Upgrade to equal or 1 level higher ( $\leq 100$ ) Room & Board Benefit
- For Medical Plan UMCR & EUMCR onwards



The special considerations for medical conditions with exclusion are as below:



**A) Total waiver of exclusion**

Example:

Gall stones, gastritis, hemorrhoids/piles



**B) Replacement of exclusion with loadings**

Example:

Presence of urinary stones without renal impairment, NB may impose exclusion on medical plan, however if upgrade of existing medical plan the decision maybe impose loading\* subject to underwriting.



**C) Maintain exclusion for severe condition**

Example:

Spine disease/disorder, Knee/Hip Disorder, Vision &Hearing Impairment

**There are some disclaimers need to be noted:**

- 1) *Case to case basis subject to underwriting*
- 2) *Non-disclosure case will be underwritten as new business*
- 3) *\*If loading is not desired, client may opt for exclusion*





## Underwriting Department Contacts

<b>Underwriting Contacts</b>	<b>Time</b>	<b>Access by</b>	<b>Remarks</b>
MDRT Helpdesk : 03-2264 4842	<b>9.00 am to 5.00 pm</b> (Monday to Friday) Lunch- 12pm to 2pm	MDRT agents	<b>Allow enquiries on all underwriting matters except below:</b> - Chase case pick up (unless out of TAT) -Status of the case or whether we received documents. - Email documents for scanning - Enquire on payment and refund. - Enquire on claims, reinstatement, other dept matters, etc
Allianz Hotline Customer Service	<b>9.00 am to 6.00 pm</b> (Monday to Friday) Closed on Saturdays, Sundays & Public Holidays	All agents	<b>Allow enquiries on all underwriting matters</b>
Virtual Underwriting Consultation	<b>2.00 pm to 5.00 pm</b> Every 1 <sup>st</sup> , 2 <sup>nd</sup> , and 3 <sup>rd</sup> Wednesday of every month <a href="http://LifeUnderwriting_Virtual_Consultation_office365.com">LifeUnderwriting_Virtual Consultation (office365.com)</a>	All agents	<b>Allow enquiries on all underwriting matters except below:</b> - Chase case pick up (unless out of TAT) -Status of the case or whether we received documents. - Email documents for scanning - Enquire on payment and refund. - Enquire on claims, reinstatement, other dept matters, etc -Pre-Underwriting cases