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 Enterprise Group Health Insurance ("SmartHealth Enterprise") is a group health insurance product issued by PT Asuransi Allianz Life Indonesia.
- The paid premium includes insurance and commission fees for the marketers.
- The first Premium payment will include Policy administration and stamp duty fees in accordance with the applicable provisions.
- This Brochure is not a part of SmartHealth Enterprise 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
 Enterprise Policy.
- Please refer to the General Product and Service Information Summary (RIPLAY Umum) and Personal Product and Service Information Summary (RIPLAY Personal), as well as the SmartHealth Enterprise Policy for more information about the terms and conditions, including details of the fees and exclusions.
- PT Asuransi Allianz Life Indonesia reserves the right to reject your product request if you fail to meet the applicable requirements and regulations.
- 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 questions or complaints 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

Call Center Halodoc : +6221 3950 6663

Allianz (I)

PT Asuransi Allianz Life Indonesia

Group Health Insurance

SmartHealth Enterprise

Bringing peace of mind to your employees at work

SmartHealth Enterprise Group Health Insurance

Employees are one of the most **valuable assets** of a company. Giving them **peace of mind** at work would increase their productivity and efficiency. One of the things we can bring to them is health protection for the employees and their families.

Choosing the right health protection is necessary to ensure effective and optimal protection. Therefore, Allianz presents **SmartHealth Enterprise Group Health Insurance** ("SmartHealth Enterprise"), a group health insurance protection that is capable of bringing the peace of mind for employees and their families.



Advantages of SmartHealth Enterprise



Efficient, with a minimum of 5 Members.

With at least 5 Members (including 1 employee), you will be able to receive this group Health Insurance protection.



Flexible room options for Inpatient Care.

Based on the number of beds or room charge limit (whichever is greater).



Comprehensive, with various plan options and additional benefits.

Additional benefits in the form of Outpatient Care, Dental Care, Spectacles, and Maternity, with a wide range of plans to choose as needed.



Capable of maximizing protections with other benefits (add-ons).

The additional benefit in Inpatient Care is an annual benefit limit booster, while Outpatient Care offers immunization, family planning/birth control, and medical check-up.



Convenient, with digital services available.

Outpatient Care is available through eAZyMed for smartphone, which automatically deducts from your insurance benefit and digital claims through eAZy Connect.



Diverse healthcare network options.

You can choose any health service network of partner Hospitals according to your budget.

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SmartHealth Enterprise Benefit Table

D (1)	Maximum Limit per	Plan					
Benefit	Member	Α	В	С	D	E	
		>4 🖺	3/4⊨	2 🖺 1 🖺			
Room & Accommodation	Per day	Whichever is greater between the lowest Room with more than 4 beds and Room Charge Limit Whichever is greater between the lowest Room with 3 or 4 with 3 or 4 beds and Room Charge Limit Whichever is greater between the lowest Room with 2 beds and Room Charge Limit Whichever is greater between the lowest Room with 2 beds and Room Charge Limit Whichever is greater between the lowest Room with 2 beds and Room Charge Limit				e lowest 1 bed plus hroom and	
	Room & Accommodation	200	400	600	1.000	2.000	
Inpatient Care Charges (including ICU, Physician Visit, Specialist Consultation, Other Inpatient Charges, Ambulance, Home Nursing, 30 days of Pre- and 90 days of Post-Inpatient Care)	Per treatment	As charged					
Maksimal manfaat Rawat Inap Non-Pembedahan	Per treatment (7 days of benefit reinstatement for the same disease)	8.000	16.000	24.000	40.000	80.000	
Maximum of Surgical Inpatient Care Benefit	Per treatment, including 30 days before & 90 days after surgery	As charged					
Outpatient Care & Dental Care due to an Emergency or Accident	Per accident	4.000	8.000	12.000	20.000	40.000	
Inpatient Care Daily Cash Benefit*	Per day	200	400	600	1.000	2.000	
Critical Illness Benefit (**)	1 per Membership period	8.000	16.000	24.000	40.000	80.000	
HIV/AIDS Treatment	Per year	2.000	4.000	6.000	10.000	20.000	
Annual Benefit Limit		40.000	80.000	120.000	200.000	400.000	
Death Benefit		4.000	8.000	12.000	20.000	40.00	

^{*} If the invoice has been fully paid by BPJS and there is no excess claim billed to Allianz, claim submission shall be made through reimbursement. For more details on the provisions, please refer to the Policy.

: Number of Bed(s) in the Hospital room.

SmartHealth Enterprise Benefit Table

INPATIENT CARE – OTHER BENEFITS/ADD-ONS (IN '000 IDR)							
Danielle	Maximum Limit per	Plan					
Benefit	Member	Α	В	С	D	E	
Annual Benefit Limit Booster	Per year	20.000	40.000	60.000	100.000	200.000	

Benefit	Maximum Limit	Plan				
Benefit	per Member	A1	B1	C1	D1	E1
General Physician Consultation + Prescriptions	Per kunjungan; tersedia layanan <i>online</i> dengan Halodoc	150	200	300	400	500
Specialist Consultations + Medicines		300	400	600	800	1.000
Diagnostic Examination	Per year	1.000	2.000	3.000	4.000	5.000
Physiotherapy	Per visit	100	150	250	350	450
Annual Benefit Limit		4.000	6.000	9.000	12.000	15.000
Benefit	Maximum Limit per Member	Plan				
Delicit		A2	B2	C2	D2	E2
Physician Consultations + Medicines	Per visit;					
Specialist Consultations + Medicines	online service available on Halodoc	As charged				
Diagnostic Examination	Per year	7				
Physiotherapy	Per visit					
Annual Benefit Limit	•	4.000	6.000	9.000	12.000	15.000

OUTPATIENT CARE – OTHER BENEFITS/ADD-ONS (IN '000 IDR)							
Danafit	Maximum Limit per Member A	Plan					
Benefit		В	С	D	E		
Additional Benefit Immunization (for children < 12 years old)	Per year	600	900	1.350	1.800	2.250	
Additional Benefit Family Planning/Birth Control		600	900	1.350	1.800	2.250	
Additional Benefit Medical Check-Up		600	900	1.350	1.800	2.250	

^{**} If the invoice has been fully paid by BPJS or other insurance providers and there is no claim excess billed to Allianz, claim submission shall be made through reimbursement. Diagnosis of Critical Illness made by the Physician has exceeded 90 (ninety) calendar days after the effective date of membership for each Member. For more details on the provisions, please refer to the Policy.

[•] Co-insurance: 0%, 10%, 20%.

[•] May be provided in the facilities of Hospitals/Clinics under Allianz-Halodoc network.

SmartHealth Enterprise Benefit Table

DENTAL CARE (IN '000 IDR)								
D 00	Maximum Limit per		Plan					
Benefit	Member	A1	B1	C1	D1	E1		
Preventive Care	Per visit, 2 visits per year	300	400	600	800	1.000		
Basic Dental Care		1.200	1.600	2.400	3.200	4.000		
Complex Dental Care	Per year	1.800	2.400	3.600	4.800	6.000		
Dentures		900	1.200	1.800	2.400	3.000		
Annual Benefit Limit		Not Available						
Benefit	Maximum Limit per		Plan					
Deficit	Member	A2	B2	C2	D2	E2		
Preventive Care	Per visit, 2 visits per year							
Basic Dental Care			As Charged					
Complex Dental Care	Per year							
Dentures								
Annual Benefit Limit		3.000	5.000	7.000	9.000	12.000		

Note:

Co-Insurance: 0%, 10%, 20%

• May be provided in the facilities of Hospital/Clinic in Allianz - Halodoc network

MATERNITY (IN '000 IDR)							
Benefit	Maximum Limit per Member	Plan					
bellefit		Α	В	С	D	E	
Normal Delivery (including Forceps & Vaccuum)	Per Pregnancy						
Surgical Delivery (Sectio Caesarian)		5.000	10.000	15.000	20.000	25.000	
Legal Miscarriage							
Pregnancy Complication							
Prenatal and Postpartum Care		2.000	4.000	6.000	8.000	10.000	
Delivery Benefit if all charges are covered by BPJS Kesehatan (*)	Per year	1.000	2.000	3.000	4.000	5.000	

[•] May be provided in the facilities of Hospital/Clinic in Allianz - Halodoc network.

SmartHealth Enterprise Benefit Table

SPECTACLES (IN '000 IDR)								
Donofit	Maximum Limit		Plan					
Benefit	per Member	A	В	С	D	Е		
Eye Examination	Per visit, 1 visit per year	100	200	300	400	500		
Frame	1 frame per year	1.000	1.500	2.000	3.000	4.000		
Lenses/Contact Lenses	Per year	1.000	1.500	2.000	3.000	4.000		

Notes

- Co-insurance: 0%, 10%, 20%.
- Eye Examination may be provided in the facilities of Hospitals/Clinics under Allianz-Halodoc network

Note

- Insurance Coverage Area is Indonesia.
- If healthcare is provided outside of the selected Healthcare Provider Network, except due to an Accident or Emergency, the claim shall be made through Reimbursement and the amount payable by Allianz to the Member is at maximum 50% of the Insurance Benefit to which the Member is entitled (except for Spectacles Booster Benefit, if any).
- May be provided in the facilities of Hospital/Clinic in Allianz Halodoc network
- The plan cluster selected for booster benefit and add-on benefit shall match the Inpatient Care plan
- The selection of plan is subject to the applicable terms and conditions.

^{*} Claim submission shall be made through reimbursement. For more details on the provisions, please refer to the Policy,

Benefit Illustration

Company (Policyholder) PT Maju Sejahtera. Member

5 people including 2 workers

Premium

Rp41.000.000 per year.

The selected Healthcare Provider Network is Gold, and the selected benefits are:



Plan C Inpatient Care (Whichever is higher between the lowest room with 2 beds and Rp600.000).



Outpatient Care Plan C-2 (as per the amount charged in the bills, with the Max. Annual Benefit of Rp9 million) and Co-share of 20%

On 1 January 2022, PT Maju Sejahtera purchased the **Smarthealth Enterprise** product for 10 employees, with the Policy Effective Period of 1 January 2022 – 31 December 2022.

- a. On 1 May 2022, one of the Employees received 5 days of Inpatient Care for typhoid fever in one of the Gold partner Hospitals. The Member was provided a room with 2 beds in accordance with the selected plan. The total bill of treatment was Rp10 million, and Allianz covered 100% of the Inpatient Care bills.
- b. On 10 August 2022, one of the Employees received Outpatient Care for dengue fever with a total treatment charge of Rp1,500,000. Allianz covered 80% of the total billed amount, which was Rp1,200,000 and a Co-Share of 20% of the same amount, which was Rp300,000, was paid by the Member.

Terms & Conditions

Product Type	Group Health Insurance.					
Member Entry Age (lastest birthday)	 Inpatient Care, Outpatient Care, Dental Care, and Spectacles Adult: Max 65 years old. Child: 15 days - 18 years old. 					
	Maternity Female: 16-45 years old.					
Coverage Period (lastest birthday)	Annually, and may be extended for the period of the following year with the maximum age of Member up to 70 years old for an adult and 25 years old for a child (if the child is still in formal education and is not working).					
Coverage Area	Indonesia.					
Currency	Rupiah.					
Premium Payment Method	Annually, semiannually, quarterly.					
Claim Payment Method	Cashless and Reimbursement					
Healthcare Network	Partner Hospital Options: Silver, Gold, Platinum					
Waiting Period	Specific Illnesses : 12 months.Critical Illnesses : 90 days.					
Underwriting	 Minimum Member: 5 Members (at least 1 Employee /Partner). Maximum Member: 300 Members or a premium of Rp1 Billion (whichever is achieved first). Minimum Premium: Rp5,000,000 per payment. Maternity Minimum Member: 10 Members (female) 					
Co-Insurance	Outpatient Care, Dental Care, Spectacles 20%, 10%, or 0%.					
Premium	Please contact Allianz marketers to find out the Premium of the selected Plan.					

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Claim Documents for Health Insurance Reimbursement

- Allianz's 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), or e-Receipt, specifically for Policy that has Outpatient Benefits and if the Physician's consultation is performed online or through a digital application.
- 3. List of expenses along with a copy of the prescription(s).
- 4. Supporting medical records.
- 5. An Outpatient or Dental Care Claim due to an Accident or Emergency must be submitted by enclosing the chronology of the traffic accident.
- 6. An Additional Spectacles Insurance Claim for the first time shall be submitted by enclosing a copy of the Ophthalmologist's prescription.
- 7. Other documents (if required)

Matan

- A Health Insurance claim must be submitted no later than 60 calendar days after the end of the treatment. Any claim submitted after such period will not be paid.
- If Allianz approves the Health Insurance claim, the payment of the Insurance Benefit as approved by Allianz shall be made to the Policy Holder no later than 7 (seven) business days upon receipt of the complete documents by Allianz, and the payment of the claim shall be made in accordance with the agreed provisions.
- Allianz shall reserve the right to obtain any information/medical records from the Hospital and/or other parties with regard to the diagnosis and/or health services provided to the Member.

Claim Documents for Death Benefit Reimbursement

- 1. Allianz health insurance claim form that has been completed and signed by the Member and Medical Resume section that is completed by the treating Physician with Physician's full name, stamp, and Medical Practice Permit Number.
- 2. Death certificate issued by a village official, both the original and a legalized copy.
- 3. A copy of the Member's identity card/proof of identity and death certificate from Policyholder.
- 4. A copy of Beneficiary's identity card/proof of identity.
- 5. A Copy of 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.
- 8. Other documents (if required)

Notes:

- The Policyholder must notify Allianz of a Member's death no later than 60 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.
- Allianz shall pay the Death Benefit no later than 7 (seven) business days after the receipt of the complete documents by Allianz, and the payment of the claim shall be made in accordance with the agreed provisions.
- Allianz shall reserve the right to obtain any information/medical records from the Hospital and/or other parties with regard to the diagnosis and/or health services provided to the Member.

Claim



Claim Document Submission

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

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

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

Claims may also be submitted digitally via Allianz eAZy Connect

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

Use Insurance on Smartphone



Allianz is working together with Halodoc in providing the facilities of online and cashless physician consultation and medicine buying. By using this service, you can:



Use it on the go

Whenever and wherever you go, you can consult a physician and buy your medicine on your mobile phone.



Sit back and relax, as it automatically deducts from your Outpatient benefits

If you choose Outpatient Care additional benefits for SmartHealth Enterprise product, you can enjoy the physician consultation service that automatically deducts from your benefits.



Save your time

You no longer have to travel and queue at the hospital or pharmacy, as now physician consultation and medicine are available online via Halodoc app.

Exclusions

Inpatient Care

Allianz shall not pay Insurance Benefit for Healthcare that is provided as a result of or with regards to:

- 1. Specific diseases:
 - a. Kidney Stones, Bladder/Urinary Tract Stones, Gallstones/Bile Duct Stones;
 - b. Heart, cardiovascular and cerebrovascular diseases (e.g., Heart failure, coronary heart disease, stroke);
 - c. Cataract;
 - d. Any types of benign tumors/lumps/cysts/polyps/cancers;
 - e. Tonsilitis or adenoids and abnormalities in the nasal cavity, intranasal septum, or concha turbinate, including sinusitis that requires surgical intervention;
 - f. Diabetes;
 - g. Tuberculosis and its complications;
 - h. Thyroid gland disorders;
 - i. Hypertension, Hyperlipidemia, (e.g., Hypercholesterolemia, Hypertriglyceridemia);
 - j. Chronic Kidney Failure;
 - k. All types of Hernia;
 - l. Intervertebral disc prolapse;
 - m. All types of hematological disorder;
 - n. Hemorrhoids:
 - All types of male or female reproductive disorders, including but not limited to fibroid/ myoma in the uterus;
 - p. HIV/AIDS.

However, the exception shall not apply if (i) the specific disease is sustained due to an Accident and the Member has been covered by the Insurance for 12 (twelve) consecutive months since the Membership Effective Date of the Member; or (ii) the Insurance Benefit provided in in the form of Critical Illness Benefit.

- 2. Organ transplantation, including all treatments and/or medications related to organ transplantation.
- 3. All supporting equipment or artificial aids or synthetic materials, outside or installed inside the body, including but not limited to wheelchairs, crutches, prostheses, hearing aids, optical aids, except for those installed inside the body during surgery in the operation room such as a pacemaker, stents, pens, plates, screws, K-Wire, intraocular lenses, etc.
- 4. Experimental treatment including unconventional medications, use of medicine, technologies, and/or medical procedures without any proven efficacy by the standard of existing medical practice and which have not approved by legal authorities recognized by the government.
- 5. Mental or neurological disorders, including psychosis, neurosis, stress, depression, psychogeriatric conditions, and their physiological or psychosomatic manifestations, treatment of drug and/or alcohol abuse or addiction.

Exclusions

- 6. All treatments and/or medications related to:
 - a. Infertility, including artificial insemination, IVF, and fertility restoration.
 - b. Impotence.
 - c. All hormonal therapies related to perimenopausal syndrome.
- 7. Treatments and/or medications for weight gain or loss
- 8. Treatments and/or medications related to cosmetics, including plastic surgery, except for functional reconstructive plastic surgery due to accident performed no later than 30 calendar days after the accident.
- Regular physical check-ups, medical check-ups, or supporting examinations that are not related to the treatment or diagnosis of covered Disease/injury, unless the Policy has an Additional Outpatient Care Insurance with a Medical Check-Up benefit option that is regulated separately.
- 10. Treatment and/or medication related to:
 - a. Hernia in a person under 10 years old.
 - b. Congenital abnormalities and/or abnormal/delayed growth and development.
- 11. Eye refractive disorders, including treatments and/or medications related to eye refractive disorders.
- 12. Circumcisions unrelated to a Disease or Accident.
- 13. Treatments and/or medications related to Sexually Transmitted Diseases.
- 14. Non-Medical Charges, excluding administration fees.
- 15. Vitamins without Physician's recommendation and medical indications.
- 16. Food supplement
- 17. Immunization, including treatments and/or medications related to its complications, unless the Policy has Additional Outpatient Care Insurance with an Immunization option that is separately regulated.
- 18. Birth Control, including treatment and/or medication related to its complications, unless the Policy has Additional Outpatient Care Insurance with a Family Planning option that is separately regulated.

Exclusions

- 19. Any treatment and/or medication due to:
 - a. active involvement in war, riot, fight, or crime,
 - b. self-inflicted injury or suicide attempt.
- 20. Involvement and/or active participation of the Member in dangerous activities or sports (regardless of whether the participation is for reward/remuneration), including but not limited to racing, speed competitions (other than walking or swimming), or martial arts, potholing, rock climbing, mountaineering, climbing using ropes or other instruments, diving deeper than 30 meters, diving activities that include the use of breathing apparatus, sky diving, cliff diving, bungee jumping, BASE (Building Antenna Span Earth) jumping, paragliding, hang-gliding, parachuting.
- 21. Treatments and/or medications received by the Member due to flying with a chartered aircraft, military/police aircraft, or helicopter.
- 22. Non-Accident-Related Outpatient Treatment, unless the Policy comes with Additional Outpatient Insurance, the terms of which shall be set out in Riders.
- 23. Dental Care that is provided for conditions that are not caused by an accident and installation of dentures for any reason, unless the Policy has Additional Dental Care Insurance that shall be regulated in Riders.
- 24. Treatments for Pregnancy, Childbirth, or Miscarriage unless the Policy has Additional Maternity Care Insurance that is regulated in Riders.
- 25. Treatments and/or medications that have been reimbursed by the Government, other Health Insurance, and/or other parties.

Exclusions

Outpatient Care

1. Identical with Inpatient Care Benefit Exclusions, except for the Exclusion in point 22, which shall not apply.

Dental Care

The Dental Care Insurance Rider Benefits shall not apply to:

- 1. Orthodontic care and/or treatment (fixed or removable).
- Treatments that are not related to dental and periodontal treatment and are not listed in the Insurance Benefits.

Maternity

The Maternity Insurance Rider Benefits shall not apply to:

- A female Member who is pregnant prior to the effective date of the Maternity Insurance Rider for the Member.
- 2. Treatments related to illegal abortions, sterilization, as well as fertility tests and treatments.

Risks

Credit Risk

Risks related to Allianz's capability in fulfilling its payment obligations to the Policyholder. Allianz always maintains its performance to surpass the minimum capital adequacy in accordance with the applicable provisions.

Operational Risk

Risks related to the operational process of Allianz, including system application and external events that may affect Allianz's operational activities.

Risk of Economic and Political Shifts

Risks involving changes in domestic and foreign economic and political conditions, or changes in law, government policy, and government regulations related to business and that may affect the performance of investments and Allianz.