

Asuransi Mikro Tipus

General Version



This Summary of Product and Service Information will be subject to the terms, conditions and exclusions set out in the Policy Terms.

Name of Insurer : PT Zurich Asuransi Indonesia Tbk
Product Name : Asuransi Mikro Tipus
Currency : Rupiah
Product Type : Health Insurance
Product Description : Asuransi Mikro Tipus is a micro-insurance product from PT Zurich Asuransi Indonesia Tbk ("Zurich") that provides an inpatient benefit due to a diagnosis of typhoid.



Main Features

Age of Insured : 6 bulan – 65 tahun
Sum Insured : Maksimal Rp5.000.000,-
Premium : Rp90.000,-
Coverage Period : Annual
Premium Payment Period : Annual



Product Benefits

Provides an inpatient benefit if you are hospitalized due to a doctor's diagnosis of typhoid and laboratory results show a Widal test of at least 1/640 or the presence of *Salmonella typhi* in feces or Anti-Salmonella typhi IgM 6-10.

Benefit	Limit
Hospital Cash Plan	Rp500,000 per day, with a maximum of Rp5,000,000.

If you are covered by more than one Zurich policy, Zurich's responsibility for the claim is the accumulation of all your policies for the same illness benefit. The maximum daily inpatient benefit is Rp2,000,000 per day, and the maximum lumpsum benefit is Rp20,000,000 for all your policies. This applies to products such as:

- Asuransi Mikro Demam Berdarah
- Asuransi Mikro Demam Berdarah Plus
- Asuransi Mikro Demam Berdarah Plus Combo
- Asuransi Hospital Cash Plan 5 Diseases (HCP5D)
- Asuransi Hospital Cash Plan All Diseases (HCPAD)
- Asuransi Mikro Tipus
- Asuransi Mikro Tipus Plus



Product Risks

1. Zurich is not responsible if there are errors / mistakes in the data that you fill in that cause errors / mistakes in the contents of the Policy which can cause claims to be rejected.
2. Claims are not paid by Zurich if caused by excluded matters.
3. Zurich may reject a claim if the submitted claim application has passed the specified time limit, or the loss occurs during the Policy waiting period.
4. Risk of loss of legal force binding Zurich and You as stipulated in the Policy due to manipulation of legal documents by related parties, either directly or indirectly, resulting in including but not limited to rejection of claims, non-payment of benefits by Zurich to you, and so on.
5. Other risks that cannot be controlled by Zurich due to mistakes made by you that result in non-payment of benefits or termination of coverage.

Rp

Premium

The premium for Asuransi Mikro Tipus is Rp90,000 and is an annual premium.

Rp

Cost

The premium you pay includes acquisition, administration, and tax fees.



Terms & Conditions

General Conditions

1. The coverage is valid throughout the territory of the Republic of Indonesia.
2. The insurance has a 30-calendar day waiting period starting from the policy's effective date, during which the coverage is not yet active.

Terms of Participation

1. The coverage starts from the date you agree to purchase Asuransi Mikro Tipus.
2. The age limit is not less than 6 months and not more than 65 years at the start of the coverage period.
3. You can only have a maximum of 4 policies for Asuransi Mikro Tipus.

Claim Mechanism

1. It is hereby recorded and agreed that in the event you and/or the Insured Participant undergo laboratory tests and/or receive inpatient treatment at a hospital, this insurance coverage will only be valid if the laboratory and hospital are Zurich's network partners. The list of partner laboratories and hospitals is available on Zurich's official website (<https://bit.ly/provider-rekanan>) and is subject to change at any time. This clause forms an integral part of the insurance policy issued by Zurich.
2. Claims must be submitted to Zurich via Zurich Care at 1500 456. The claim report deadline is 14 calendar days from the date of your typhoid diagnosis by a doctor.
3. Claim documents that must be completed:
 - Required claim documents include a completed claim application form,
 - A photocopy of your ID (KTP/SIM/Passport) or family card if you are a minor or the claimant is an heir.
 - You must also provide the original or legalized copy of the laboratory results confirming typhoid infection and the original
 - legalized copy of the inpatient proof from a hospital/clinic/Puskesmas with the doctor's diagnosis.
4. Zurich will contact you if other relevant documents are needed.
5. Claim payment is done via reimbursement; you will pay the claim first and then send the payment documents to Zurich. Zurich will complete the claim payment within 10 working days after a written agreement on the claim amount is reached between you and Zurich.
6. If you pass away due to the risk, the benefit will be given to your heir up to the coverage limit.
7. The insurance benefit can be paid in full even if you have a health insurance policy other than Typhoid Insurance or other guarantees that cover hospitalization due to typhoid.
8. The policy will end once you have received the insurance benefit from this policy.

This coverage is valid according to the coverage period stated on your Policy Certificate.



Coverage Simulation

Mindy, an employee, purchases 1 Asuransi Mikro Tipus policy with the following data:

Insured Name	: Mindy
Date of Birth	: December 1, 1980
Phone Number	: 081312345678
Email Address	: mindy@gmail.com
ID Number*	: 15009899220000201
<small>*KTP for WNI, KITAS/KITAP for WNA</small>	
Coverage Period	: June 23, 2022 – June 23, 2023
Premium	: Rp90,000

This simulation is not binding and does not constitute an insurance contract nor is it part of the policy. Your rights and obligations and the terms regarding this insurance product are stated in the policy. A more detailed explanation of this insurance product, including premiums payable, coverage, and so on, is set out in the policy.



Claim Simulation

Mindy has an Asuransi Mikro Tipus policy. When diagnosed with typhoid and hospitalized for 5 days, Mindy submits a claim for the inpatient costs. She includes laboratory results confirming the typhoid infection, a doctor's statement, and other supporting documents. After verification, the claim is approved, and Zurich provides reimbursement for the inpatient costs. The total benefit is the daily benefit multiplied by the number of days hospitalized.

Calculation: 5 days x Rp500,000 = Rp2,500,000.

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Service and Complaint Settlement Procedures

1. You can submit a complaint or issue directly to Zurich through Zurich Care 1500456.
2. Zurich will respond to or request additional information regarding your questions and/or complaints within 5 (five) working days after receiving the complaint. The initial response may be given verbally or in writing. The purpose of this response is to confirm that your complaint has been received, is under investigation, and to provide an estimated timeframe for its resolution.
3. Zurich will provide a final response to your complaints, either verbally or in writing, within 10 (ten) business days after receiving the complete complaint submission document.

Important Information

- You have read, received explanations, and understood the Mikro Tipus Insurance product according to the Summary of Product and Service Information.
- The insurance product marketed is an insurance product and the risk of the insurance product is the responsibility of Zurich.
- This explanation only contains general information about the Insurance product and does not constitute an insurance contract/agreement. Details of the conditions of coverage and exclusions including the full terms and conditions can be found in the policy.
- This Summary of Product and Service Information does not form part of the insurance application and policy.
- You are required to read, understand and sign the insurance application and policy.
- The information covered in this Product and Service Information Summary is valid from the date of printing of the document until the expiration date of the coverage period.
- You must carefully read this Summary of Product and Service Information before agreeing to purchase the product and have the right to ask the Insurance Company employees for all matters related to this Summary of Product and Service Information.

Document Print Date
DD/MM/YYYY

Zurich Care

 **1500 456**  **0812 111 3456**

zurichcare.general@zurich.co.id

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