

# MediStar (revised)

Medical Health Plan That  
Keeps You In Shape



(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia)

Liberty General Insurance Berhad

A PIDM Member

The benefit(s) payable under this eligible policy is protected by PIDM up to limits. Please refer to PIDM's TIPS Brochure or contact Liberty General Insurance Berhad or PIDM (visit [www.pidm.gov.my](http://www.pidm.gov.my))

Liberty General Insurance Berhad 197801007153 (44191-P)





**Peace of Mind Comes With  
A Comprehensive Health Insurance  
– MediStar**

Total peace of mind is knowing that if a tragedy were to strike, you and your loved ones will be ready with sufficient financial and medical coverage. This reassuring thought will definitely eliminate any stress and anxiety that might arise in these trying times.

Our comprehensive coverage in medical, surgical & hospitalization expenses, ambulance fees and other related medical charges, helps you to breathe easy and prevents you from worrying about things other than your health.

Our appointed Third Party Administrator (TPA) and its 24-hour service network helps facilitating your convenient admission and discharge from any of our panel hospitals. For further information, call Customer Service Hotline at 1-300-888-990.

- **Benefits Highlight**

From As Low As RM1.08 Per Day

You can enjoy financial security and total peace of mind by investing from RM1.08 a day. Your lunch will cost more than that!

24 Hours Cashless Admission

Just present your Medical Card for immediate admission. This card guarantees hassle free admission and discharge for a covered condition. You may only need to settle non-payable charges, if any.

Attractive Discount Features

**No Claim Discount (NCD):**

If you do not make a claim during the period of insurance, the premium charged upon renewal will be discounted.

2 consecutive years preceding renewal	10% discount on renewal premium
3 consecutive years preceding renewal	15% discount on renewal premium
4 consecutive years preceding renewal	20% discount on renewal premium

**Family Discount (FD):**

This is a special discount to be given if your dependants are insured under the same policy:

Insured + Spouse	5% discount on standard premium
Insured + Children	5% discount on standard premium
Insured + Spouse + Children	10% discount on standard premium

## • Hospital Benefits

### Surgical Benefits

- Up to RM40,000 per any one disability including Surgical and Anaesthetist's Fees.
- Organ Transplantation – Cost up to RM50,000 per lifetime (Heart, Kidney, Lung or Liver Transplantation).

### Non- Surgical Benefits

- Up to RM40,000 per any one disability.

### Hospital Confinement Benefits

- Room & Board – From RM100 to RM300 daily and payable up to maximum stay of 150 days per any one disability.
- Intensive Care Unit
- Hospital Supplies & Services including Operating Theatre

### Pre & Post Hospital Treatment

- Up to 31 days before admission or after discharge.

### Outpatient Services / Benefits

- Physiotherapy Treatment
- Outpatient Cancer Treatment
- Outpatient Kidney Dialysis
- Emergency Accidental Treatment
- Home Nursing

### Accidental Death Benefit – Up to RM15,000

- In these circumstances, the policyholders' nearest kin are entitled to receive up to RM15,000.

### Local Ambulance Services

- Ambulance service from government and private hospitals are available.

### Overall Annual Limit Up to RM120,000 Cover Per Person

- MediStar customers will receive up to RM120,000 financial coverage in one single year.

### Overall Lifetime Limit Up to RM360,000 Cover Per Person

- MediStar customers will receive up to RM360,000 financial coverage throughout their life.

### Twenty-Four (24) Hours Worldwide Coverage

- Receive the best treatment from any registered government or private hospitals worldwide at anytime.

### Daily Cash Allowance

- MediStar customers are entitled to receive a fixed amount for everyday expenses upon admission at government hospital only.



- **Policy Features**

THE FOLLOWING ARE THE BASIC AND IMPORTANT FEATURES THAT YOU SHOULD KNOW BEFORE PURCHASING THIS PRODUCT.

### We Provide A Comprehensive Medical Coverage Scheme

#### I - Comprehensive Scheme

Where the eligible medical expenses will be payable on **“AS CHARGED OR FULL REIMBURSEMENT”** basis.

We offer four (4) types of plans for you to choose from.

#### 1. Premiums

This is an annual contract and a yearly renewable policy which until terminated shall be renewed each year on the anniversary of the due date.

##### 1.1 Initial Premium

Your first annual premium you pay is based on **the type of benefits** and **the plan** you purchase and your occupation together with your **age (next birthday)**.

##### 1.2 Renewal Premium

1.2.1 Your annual renewal premium in future will increase by your attained age according to the age-bands, your claims experience, health status, occupation, business, pursuits or sporting activity or other material changes or risks.

1.2.2 The past trends on the increase in premium rates will not necessarily reflect the future trend of your premium.

1.2.3 Renewal premium rates are not guaranteed. We reserve the right to determine the premium applicable specifically to each insured person at the time of renewal. A thirty (30) days written notice will be provided to the policyholders prior to the change.

#### 1.3 Policy Renewal and Lapsed Policy

1.3.1 This policy is renewable at the option of the policyholder subject to the terms, conditions and termination at each of the anniversary of the policy date.

1.3.2 The policy shall automatically terminate or lapse, if you fail to pay the premium when it is due. Any lapsed policy will be treated as a new application.

1.3.3 The renewal of the policy is guaranteed after the completion of two consecutive years of the policy, provided that there is no claim incurred in the previous 2 years.

The above mentioned conditions are not exhaustive and the premium rates may be reviewed or policy renewal declined under other justified circumstances.

#### 2. “Free-Look Period” of 15 Days

You are given a “Free-Look Period”/ “Cooling-Off Period” of up to 15 days from the delivery date of the policy to review the suitability of your policy. If you are not satisfied with the cover, you may return the policy to the company during this period, and we will return the full premiums to you minus the deduction for medical expenses incurred by the company on the issue of the policy.

#### 3. Age Limit

The policy shall cover eligible persons between the ages of 15 days to 60 years, renewable up to 70 years.

#### 4. Dependant

##### 4.1 Eligibility of Dependant

Unmarried children over 15 days old but under 19 years of age or 23 years of age if still on full-time higher education, and who are not gainfully employed.

##### 4.2 Enrollment of Dependent

Children between the ages of 15 days and 18 years must be enrolled together with one of their parents. The plans chosen for spouse and children must be the same as the proposer.

## 5. What Is Not Payable Under The Policy?

### 5.1 Risk Excluded

We shall not reimburse Charges incurred for Hospitalisation resulting directly or indirectly from any of the following risks:

- a) Specified Illnesses within 120 days from the Commencement Date or Reinstatement Date whichever is the later;
- b) Any Disability (except for Injury) and its signs or symptoms that appear within 30 days from the Date of Commencement or Date of Reinstatement whichever is the later;
- c) Self-inflicted injuries or suicide or attempted suicide, while sane or insane;
- d) Injuries or Hospitalisation as a result of drug abuse, addictive disorders from substance misuse or while under the influence of alcohol;
- e) War or any act of war, declared or undeclared, criminal or terrorist activities, active duty in any armed forces, direct participation in strikes, riots and civil commotion or insurrection;
- f) Ionizing radiation or contamination by radioactivity from any nuclear fuel or nuclear waste;
- g) Sickness or injury arising from racing of any kind (except foot racing) hazardous sports such as but not limited to skydiving, water skiing, underwater activities requiring breathing apparatus, winter sports, professional sports and illegal activities; or
- h) Participation in any form of aviation (except as a fare-paying passenger or crew member on a regular route operated by a licensed commercial airline), or aerial sports such as (but not limited to) skydiving, parachuting, bungee jumping, hang gliding or ballooning.

### 5.2 Hospitalisation Excluded

We shall also not reimburse for Charges incurred for Hospitalisation, directly or indirectly resulting from any of the following medical conditions or situations:

- a) Pre-Existing Illness.
- b) Plastic or Cosmetic surgery and related treatments.
- c) Circumcision or any surgery on the foreskin.
- d) Eye examination and surgical correction for visual impairments due to nearsightedness, farsightedness or astigmatism or radial keratotomy or Lasik.
- e) Dental conditions including dental treatment by Dentist or oral surgery except as necessitated by accidental injuries to sound natural teeth occurring wholly during the period of Insurance.
- f) Private nursing care, non-Hospital nursing care, rest cures, sanatoria care, hospice care and care or treatment that do not lead to a recovery, conservation of Your condition or restoration to Your previous state of health.
- g) Venereal Disease and its sequelae.
- h) HIV, AIDS or AIDS related disease.
- i) Communicable diseases requiring quarantine by law.
- j) Congenital disorders/diseases or deformities including hereditary and developmental conditions.
- k) Pregnancy or pregnancy related conditions including childbirth (whether surgical or otherwise), complications arising from pregnancy such as miscarriage, abortion, pre-or post-natal care, contraceptive methods for birth control, infertility treatments and its complications.
- l) Impotence, infertility sterilization, erectile dysfunctions and its complications.
- m) Sleep apnea or snoring disorder.
- n) Hyperhidrosis.
- o) Hormone Replacement Therapy.



p) Mental or nervous disorders (including psychosis, neurosis and their physiological or psychosomatic manifestations).

q) Sex changes.

r) Donations of body parts or organs by the Insured Person/Participant/Covered Person.

s) Primarily for investigative purposes, screening, diagnosis, X- rays, scans, general physical or medical examinations that are done routinely or are not incidental to treatment or diagnosis of a Disability, treatment or investigation of a Disability that are not Medically Necessary to be Hospitalised, preventive treatments and medicine.

t) Stem cell therapy, except hematopoietic blood disorders.

u) Treatments specifically for weight reduction or gain or bariatric surgery.

v) Of an experimental, investigational or research nature.

### **5.3 Treatment and Costs of Equipment, Appliances, Medicine Excluded**

We shall also not reimburse for costs or expenses incurred for the following:

a) Alternative treatments such as chiropractic services, acupuncture, acupressure, reflexology, bone-setting, herbalist treatment, hyperbaric oxygen therapy, massage or aroma therapy or other alternative medicines; or

b) Glasses, multifocal lens or contact lens; or

c) External prosthetic appliances or devices including but not limited to artificial limbs, external fixator, hearing aids, cochlear apparatus; or

d) Pacemakers, implantable cardiac defibrillator (ICD) and cochlear implants; or

e) Items that are not directly related to the medical treatment of the Disability including rental of television, telephones, broadband services, electricity charges, admission/registration/record fee, admission kit/pack; or

f) Body parts or organs, blood or blood products and blood surety.

### **5.4 Residence Overseas**

Any person who resides outside Malaysia for more than three (3) months continuously.

### **5.5 Overseas Treatment**

a) Unless you are traveling abroad for a reason other than for medical treatment and as a consequence of medical emergency.

b) Unless the specialized nature of the treatment, aid, information or decision required could neither be rendered nor furnished nor taken in Malaysia.

### **5.6 Specified Illness**

Specified illnesses shall mean the following disabilities and its related complications, occurring within the first 120 days of commencement date or reinstatement date of the Insured Person, whichever is later:

a) Hypertension, diabetes mellitus or cardiovascular disease;

b) Growths of any kind including tumours, cancers, cysts, nodules, polyps;

c) Stones of the urinary system and biliary system;

d) Any disease of the ear, nose (including sinuses) or throat;

e) Hernias, haemorrhoids, fistulae, hydrocele or varicocele;

f) Any disease of the reproductive system including endometriosis; or

g) Any disorders of the spine (including a slipped disc) or any knee conditions.

### **5.7 Waiting Period**

Any treatment for illness/injury received within 30 days after the effective date of insurance coverage except treatment for bodily injury arising from a covered accident.

## 6. Policy Limitations

We **will not pay you full or up to the limits shown** in the Schedule of Benefits under the following circumstances:

### 6.1 Upgraded Room and Board Co-Payment

If the Insured Person is hospitalized at a published Room & Board rate which is higher than his eligible Hospital Room and Board benefit, the Insured Person shall bear 20% of the other eligible medical expenses described in the Schedule of Benefit.

### 6.2 Contribution

If you have any other insurance in force or are entitled to indemnity from any other source in respect of the same bodily injury, sickness, disease, death or expense, this policy will not provide full compensation other than on a proportionate basis. If you have MORE THAN ONE POLICY UNDER US, we will consider you to be insured under the policy which provides the largest amount of benefits.

### 6.3 Stent/Lens

Medical devices such as stent/lens:

- Maximum payable is RM5,000 per stent.
- Maximum payable is RM700 per lens.

### • Frequently Asked Questions

Q : Why do I need this plan?

Because hospital costs could be substantial and could wipe out your precious savings. The last thing you want to worry about when you have to be admitted is money!

Q : When does my cover begin?

During the first 30 days of membership, the policy excludes medical treatment unless necessitated by an accident. Thereafter, the full cover applies.

Q : Is there a waiting period?

Yes, 30 days from the effective date of policy unless resulting from accident.

Q : If I renew my policy, will the 30-day waiting period apply?

No.

Q : Will Liberty General Insurance Berhad also cover outpatient hospital bills?

Yes, we do have outpatient benefits for Emergency Accidental treatment, Outpatient Cancer and Kidney Dialysis treatment.

Other than that, specialist consultation and diagnostic test performed 31 days prior hospitalization and following discharge from hospital are also covered if the Insured Person is subsequently hospitalized.

Q : Is the coverage worldwide?

Yes, this policy is applicable worldwide for twenty-four (24) hours a day and you are covered up to 90 days from the day you leave Malaysia. The benefits payable will be subjected to the reasonable and customary charges on the basis that the cost for the said treatment would be reasonably charge by a hospital/physician in Malaysia.

Q : Does the plan have geographical scope?

MediStar provides worldwide cover, subject to the treatment provisions stated in the policy. If while you were abroad and due to medical emergency or if treatment is not available in Malaysia, any covered treatment cost will be met up to the customary treatment cost in Malaysia. This does not include transportation cost.

Q : Who can join the plan?

Any person who resides in Malaysia and who is not more than 60 years of age and not less than 15 days at the first enrolment.

**Q : Can I include any dependant (spouse and child) during policy period or on renewal?**

Yes. However, application to enroll dependant(s) must be made at inception or upon renewal of the policy only (other than a newly born child, whose eligibility for insurance cover will commence only after 15 days of birth upon notification from Policyholder).

**Q : How much can I claim?**

You may claim up to the Overall Annual Limit under the chosen plan or up to the Overall Lifetime Limit, whichever is lesser.

**Q : Can I seek treatment at a non-panel hospital?**

Yes. However, the MediStar customer has to pay first and seek reimbursement later, based on customary and reasonable charges.

**Q : Does your company pay for the cost of the medical report?**

Yes. Maximum limit per claim is RM80.00.

**Q : May I upgrade my plan?**

Yes, you may. However, any request to upgrade can only be done during renewal subject to our assessment on your claim experience, health declaration and submission of new application/upgrading request form.

**Q : In the event of hospitalisation, who do I contact?**

Just call Customer Service Hotline at 1-300-888-990

**Q : What is the possible implication of switching policy from one insurer to another?**

One possible implication is that if your current health status is less favourable to the new insurer, new terms may be imposed to exclude such illness. You may also need to go for medical check-up when you switch policy to another insurer.

## Schedule of Benefit

MediStar Benefit Table (Revised)

Plan	Plan 1	Plan 2	Plan 3	Plan 4
1. Hospital Benefits				
Daily Room & Board (Max. 150 days)	RM100	RM 150	RM 250	RM 300
Intensive Care Unit (Max. 75 days)	AS CHARGED			
Hospital Supplies & Services including Operating Theatre				
2. Surgical Benefits				
Pre-Admission Diagnostic Services (within 31 days before admission)	AS CHARGED			
Pre-Surgical Specialist Consultation (within 31 days before admission)				
Surgical Fees & Anaesthetic Fees Post Hospitalisation Treatment (within 31 days after discharge)				
Physiotherapy Treatment (within 31 days after discharge)				
MAXIMUM PER ANY ONE DISABILITY (per claim)	15,000	20,000	30,000	40,000
3. Medical Benefit (Non - Surgical)				
Pre-Hospital Diagnostic Services (within 31 days before admission)	AS CHARGED			
Pre-Hospitalisation Specialist Consultation (within 31 days before admission)				
Daily In-Hospital Physician's Visit (Maximum 2 visits per day)				
Post Hospitalisation Treatment (within 31 days after discharge)				



MAXIMUM PER ANY ONE DISABILITY (per claim)	15,000	20,000	30,000	40,000
Ambulance Fees	AS CHARGED			
5) Outpatient / Extended Benefits				
Emergency Accidental Treatment	AS CHARGED			
Outpatient Cancer Treatment (Annual Limit)	15,000	25,000	35,000	45,000
Outpatient Kidney Dialysis Treatment (Annual Limit)	15,000	25,000	35,000	45,000
Lodger Expenses (Guardian Allowance)	50	60	80	100
Medical Report Fee	80	80	80	80
Home Nursing (Within 31 days after discharge)	100	125	150	175
6. Organ Transplantation (Once per lifetime)	20,000	30,000	40,000	50,000
7. Government Hospital Income Benefits				
Daily Cash Allowance	50	60	80	100
8. Accidental Death Benefit	5,000	7,500	12,500	15,000
9. Overall Annual Limit	40,000	60,000	100,000	120,000
10. Overall Lifetime Limit	120,000	180,000	300,000	360,000

Table 1

Annual Premium Rates (Age Next Birthday)				
Gross Premium (RM) New Business effective from 1/8/2023 Renewal Business effective from 1/10/2023				
Age	Plan 1	Plan 2	Plan 3	Plan 4
15 days - 10 years (children)	458	540	826	944
11 - 18 years	395	464	708	810
19 - 25 years	489	577	883	1,011
26 - 30 years	552	652	1,001	1,145
31 - 35 years	670	794	1,183	1,356
36 - 40 years	773	917	1,369	1,569
41 - 45 years	876	1,041	1,554	1,783
46 - 50 years	1,048	1,245	1,863	2,137

51 - 55 years	1,890	2,250	2,575	2,954
56 - 60 years	2,186	2,602	2,979	3,418
61 - 65 years (Renewal only)	2,975	3,547	4,061	4,660
66 - 70 years (Renewal only)	3,961	4,725	5,411	6,213

Table 2

Annual Premium Rates (Age Next Birthday) Gross Premium (RM) effective from 1/8/2024				
Age	Plan 1	Plan 2	Plan 3	Plan 4
15 days - 10 years (children)	458	540	958	1,096
11 - 18 years	395	464	821	939
19 - 25 years	489	577	1,026	1,174
26 - 30 years	552	652	1,163	1,331
31 - 35 years	765	907	1,388	1,592
36 - 40 years	883	1,049	1,607	1,844
41 - 45 years	1,001	1,190	1,827	2,095
46 - 50 years	1,199	1,424	2,190	2,512
51 - 55 years	2,287	2,724	3,069	3,521
56 - 60 years	2,646	3,151	3,551	4,076
61 - 65 years (Renewal only)	3,604	4,297	4,844	5,559
66 - 70 years (Renewal only)	4,799	5,725	6,457	7,414

Table 3

Annual Premium Rates (Age Next Birthday) Gross Premium (RM) effective from 1/8/2025				
Age	Plan 1	Plan 2	Plan 3	Plan 4
15 days - 10 years (children)	458	540	1,091	1,248
11 - 18 years	395	464	934	1,069
19 - 25 years	489	577	1,168	1,338
26 - 30 years	552	652	1,325	1,517
31 - 35 years	860	1,020	1,594	1,828
36 - 40 years	994	1,180	1,846	2,118
41 - 45 years	1,127	1,339	2,099	2,408
46 - 50 years	1,350	1,604	2,517	2,888
51 - 55 years	2,684	3,197	3,563	4,089
56 - 60 years	3,107	3,699	4,124	4,734
61 - 65 years (Renewal only)	4,232	5,046	5,627	6,459
66 - 70 years (Renewal only)	5,638	6,725	7,502	8,616

Please note :

Premium above increase on staggered approach for a period of three years, effective from 1/8/2023. The staggered increase in premium will end on 1/8/2026, after which the premium will be charged in full as per Table 3 above.

Please refer to the FAQs on Revision of Premium for more information.

### **Special Note:**

THIS BROCHURE IS FOR GENERAL INFORMATION ONLY. IT IS NOT A CONTRACT OF INSURANCE. THE FULL DETAILS OF THIS INSURANCE COVERAGE, EXCLUSIONS, TERMS AND CONDITIONS WILL BE STIPULATED IN THE POLICY.

YOU SHOULD SATISFY YOURSELF THAT THIS POLICY WILL BEST SERVE YOUR NEEDS AND THE PREMIUM PAYABLE IS AN AMOUNT THAT YOU CAN AFFORD.

IN THE EVENT OF ANY DISPUTE OR AMBIGUITY ARISING OUT OF THE TRANSLATION TO BAHASA MALAYSIA LANGUAGE, THE ENGLISH VERSION SHALL PREVAIL.

We will pay you up to the limits shown in the Schedule of Benefits for medical expenses reasonably and necessarily incurred by you during your hospital confinement, as a direct result of you suffering bodily injury, sickness or illness.

Head Office / Ibu Pejabat:  
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For more information, please contact:  
Untuk maklumat lanjut, sila hubungi:

Our Authorized Agent:/ Ejen Sah Kami :



Liberty General Insurance Berhad  
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