

Hospital Alliances Services (HAS) FAQ

1. What is Hospital Alliances Services (HAS)?

HAS is a service facility designed especially for PruBSN certificate holders, who holds a Prudential BSN Takaful Medical Card. HAS facility allows you to enjoy pre-authorisation of admission to hospital at our panel hospitals and medical centres, subject to the terms and conditions of your takaful certificate.

2. What is co-takaful?

Co-takaful is a cost-sharing arrangement between you and the takaful operator whereby you will need to pay a specified percentage or amount of the cost of your eligible benefit.

3. What is deductible?

Deductible is a portion of medical expenses that customers must pay for Any One Disability. For example, if you select a deductible of RM1,000, you must pay the first RM1,000 of the medical expenses for each Any One Disability. We will then cover up the rest of the medical expenses on related claims. Deductible applies to Hospital and Surgical Benefits and Outpatient Treatment Benefits (except Day Surgery Benefit). Deductible does not apply to Hospital Daily Room & Board Benefit, Day Surgery Benefit and Additional Benefits. Deductible is applied on “Any One Disability” within a 90-day period from the date of discharge from the last hospitalisation or from the date of last outpatient treatment. Any subsequent disability of the same diagnosis occurring after the 90-day period will be subjected to a new Deductible.

4. What is “Any One Disability”? How does “Any One Disability” applies?

Any One Disability means a single illness and its complications resulting you being hospitalised one or more times or receiving outpatient treatment. All hospitalisation and/or outpatient treatment shall be considered from the same disability; if you have not completely recovered and are still under treatment for that disability and its complications. Your hospitalisation and/or outpatient treatment shall be diagnosed as a new disability if you have fully recovered and do not require any more treatment for the disability for a period of more than 90 days following the date of discharge from the last hospitalisation or from the date of last outpatient treatment for the same disability.

5. What is HAS facility waiting Period?

HAS facility waiting period is applied within the first 90 days from certificate cover date in which no Guarantee Letter is available except for accident cases. However, claims can still be submitted under reimbursement basis subject to terms and conditions.

6. How long will I have to wait for my GL letter approval?

The time taken depends on the completeness of the documentation received from the Hospital. We will process (TAT) within 60mins.

However, should there be any additional information (investigation report/medical history/medical questionnaire/ referral letter, etc) required by PruBSN, the GL approval could be delayed depending on the response from you/hospital.

7. How will I know if PruBSN has issued requirement for additional information?

You will be notified on status of your claim submission via the following options:

- a. SMS will be sent to you and your agent
- b. Through your agent
- c. Through Hospital (HAS Claim)
- d. Through your e-channel (PruBSN Touch)
- e. Contact our HAS Customer Service line (for agent only)
- f. Contact our Customer Service Centre at 03-2775 7188
- g. Send us an email at customer@prubsn.com.my

8. If my GL declined for the suspicion of pre-existing condition/illness and requires investigation, do I wait for investigation to be completed before I proceed with admission?

Investigation process will take 14 working days or more depending on the complexity of the case, hence you may proceed with admission, advised to pay on your own and submit for reimbursement claim and it is subject to terms and conditions of your certificate.

9. Document required during registration at hospital

- a. NRIC (compulsory)
- b. referral letter & previous medical reports (if any)

10. I have a planned surgery, how do I apply for the pre-authorisation letter?

For pre-plan admission, you may request the hospital to submit complete document prior 3-7 days of admission.

11. Is admission to the hospital necessary to obtain Guarantee letter (GL) coverage?

There are times you may feel a little under the weather and require some medical attention. However, not all medical conditions require hospitalisation for treatment and recovery. In fact, some health conditions can be taken care of at home or with visits to the GP, or maybe with a specialist as an outpatient consultation. You can opt for:

- a. Outpatient treatment – pay and claim, provided there is subsequent admission (pre & post hospitalisation)
- b. Day surgery – GL is available, and it is subjected to terms and conditions of your certificate.

12. What are the covered day surgeries and procedures under medical benefit?

General Surgery

- (a) Excision of Breast Lump
- (b) Anal Fissure Dilatation or Excision
- (c) Haemorrhoidectomy
- (d) Varicose Vein Stripping or Ligation
- (e) Gastroscopy ± Biopsy
- (f) Oesophageal Dilatation
- (g) Change of Tracheostomy
- (h) Proctoscopy, Sigmoidoscopy, Colonoscopy ± Biopsy
- (i) Anal Dilatation
- (j) Manual Evacuation
- (k) Excision of Local Skin Lesions / warts
- (l) Lymph Node Biopsy
- (m) Excision of Sebaceous Cysts
- (n) Lump – excision biopsy (all types)
- (o) Removal of foreign body
- (p) Diagnostic laparoscopic procedure
- (q) I & D of abscess except wide excision
- (r) Removal of ganglion / fibroma

Urology

- (a) Removal of Stents
- (b) ESWL
- (c) Diagnostic cystoscopy

Gynaecology

- (a) Dilatation and Curettage/Hysteroscopy
- (b) Examination under anesthesia
- (c) Colposcopy (+/-) biopsy
- (d) Cone biopsy, punch biopsy
- (e) Diathermy / cauterisation of lesions

Orthopaedics

- (a) Excision of Dupuytren's Contracture
- (b) Carpal Tunnel Decompression
- (c) Excision of Ganglion
- (d) Arthroscopy (all arthroscopic examinations of joints/aspiration/joint toilet)
- (e) Bunion Operations

- (f) Removal of implants
- (g) Manipulations
- (h) Change of Plaster
- (i) Release of Trigger Finger
- (j) Partial or Complete Removal of Toenails
- (k) Tenotomy
- (l) Injection of Trigger finger
- (m) Intra-articular injection of joints
- (n) Suture and other operations on tendon and tendon sheath
- (o) Close Manual Reduction
- (p) Insertion of K-wires

Dental

- (a) Extractions (due to trauma only)
- (b) Excision or Biopsy of Oral Lesions
- (c) Removal of Direct Bone Plates and Wires (due to trauma only)

ENT

- (a) Myringotomy and grommet insertion
- (b) Reduction of Nasal Fracture
- (c) Nasal Polyps
- (d) Suction Clearance including Removal of Foreign Bodies
- (e) Aural Polypectomy
- (f) Endoscopy
- (g) Cautery
- (h) Antral Washouts
- (i) Drainage of Septal Haematoma
- (j) Tonsillectomy (laser)
- (k) Adenoidectomy (laser)

Ophthalmology

- (a) Tear Duct Probing
- (b) Excision of Chalazion and other Benign Lid Lesions
- (c) Extraction of Cataract with/without implant
- (d) Correction of Squint (not related to congenital)
- (e) Excision of pterygium
- (f) Corrective surgery for blepharoptosis (not related to congenital /cosmetic)

Others

- (a) Angiography
- (b) Radiotherapy
- (c) Diagnostic bronchoscopy
- (d) Insertion of Chemoport / Hickman Line
- (e) AV fistula creation

- (f) Haemodialysis
- (g) Chemotherapy

You may undergo any other surgeries or procedures that are not listed above as a day treatment as advised by the doctor. The above list is not exhaustive and is subject to revision by PruBSN Takaful. Any Day Surgery done for investigative and/or diagnostic purpose not related to treatment for any specified disabilities will not be covered.

13. If I have paid my admission on my own expenses, can I submit claim under reimbursement?

Yes, and it is subject to terms and conditions of your certificate.

14. Diagnosed with Cataract? Can I claim for enhanced eye lens?

For Cataract surgery which deemed medically necessary, we will cover for monofocal (intraocular) lens.

We would like to emphasise that medical insurance/takaful coverage specifically excludes treatment of refractory error based on the product design. Hence, as standard practice, we will provide coverage for monofocal lens ONLY. If a customer wishes to use any other lens, we will cover up to the costs of the monofocal lens only together with other ancillary charges related and required for the cataract surgery, as per normal process.

Please note that correction of refraction is NOT a treatment for cataract. Therefore, only mono focal lens will be entitled for medical coverage by PruBSN.

15. What are the claim items that are not covered and considered not as customary under Prudential BSN Takaful medical benefits?

Any hospital charges which in opinion of the Company Medical Officer is considered as excessive charges. Such charges should not exceed the general level of charges being made by the hospital of similar standing in the same locality where the charges are incurred, taking into consideration similar or comparable treatment, services or medical supplies to individual of the same sex and of comparable age for a similar illness, disease or injury and in accordance with accepted medical standards and practice which could not have been omitted without adversely affecting the Covered Person's medical condition.

16. Where can I find the list of panel hospitals and clinics?

For the latest list of panel hospitals and clinics, please download/view at PruBSN Navigator mobile app (available in GooglePlay and iTune)

17. What is Non-Contestability for Family Takaful Contracts?

Non-contestability for family takaful contracts define as: Where a contract of family takaful has been in effect for a period of more than two years during the lifetime of the person whose life is covered, such a contract shall not be avoided by a licensed family takaful operator on the ground that a statement made or omitted to be made in the proposal for takaful or in a report of a doctor referee, or any other person, or in a document leading to the issue of the family takaful certificate, was inaccurate or false or misleading unless the licensed family takaful operator shows that the statement was on a material matter or

suppressed a material fact and that it was fraudulently made or omitted to be made by the takaful participant or the person whose life is covered.