Table of Travel Insurance Benefits Schedule Comparison (information as at 6 September 2019)

	#	Travel Insurance Plan and Company Hospital Benefits	MOE Guideline (Minimum Requirements)	Tune Protect Travel Easy by Tune Insurance (M) Bhd	Student Assist Travel Insurance by AIG Malaysia Insurance Bhd	Allianz Travel Care by Allianz General Insurance Company (M) Bhd	Smart Traveller by AXA Affin General Insurance Bhd	SOMPO Travel Plus by Berjaya Sompo Insurance Bhd	Chubb Travel Insurance by Chubb Insurance Malaysia Bhd	TripCare 360 Takaful by Etiqa General Takaful Bhd	Great Voyager by Great Eastern General Insurance (M) Bhd	Travelnet Insurance by Lonpac Insurance Bhd	Travel Protection Plan by MPI Generali Insurans Bhd	Travelright Plus Insurance by MSIG Insurance (M) Bhd	Travel Partner Insurance by Tokio Marine Insurans (M) Bhd	IKHLAS Kembara Plus Takaful by Takaful Ikhlas General Bhd	Travel Star Insurance Plan by Liberty Insurance Bhd
	,		000.00				I > > 4 P I	I > > 4 P I	I , ,, , ,, ,,	Amount (RM)				I , ,, , , , ,	1 , , , , ,	I ,	
-	2	Room and Board (Daily max up to 120 days) Intensive Care Unit	200.00	a) Medical and Other Expenses – 300,000.00	a) Medical and Other Expenses – Classic 150,000.00	a) Medical and Other Expenses – 350,000.00	a) Medical and Other Expenses – Classic 50,000.00	a) Medical and Other Expenses – Basic 100,000.00	a) Medical and Other Expenses – Executive 400,000.00	a) Medical and Other Expenses – Silver 100,000.00	a) Medical and Other Expenses – Essential 50,000.00	a) Medical and Other Expenses – Silver 200,000.00	a) Medical and Other Expenses – 20,000.00	a) Medical and Other Expenses – Plan 1 300,000.00	a) Medical and Other Expenses – 300,000.00	a) Medical and Other Expenses – 15,000.00	a) Medical and Other Expenses – 300,000.00
;	3	(Daily max up to 30 days) Hospital Miscellaneous Services		b) Follow-up Treatment – 50,000.00 (Max 30	Superior 250,000.00	b) Follow-up Treatment - 50,000.00	VIP 300,000.00	Elite 350,000.00	First Unlimited	Gold 300,000.00	Supreme 200,000.00	Gold 400,000.00	b) Follow-up Treatment - 1,000.00	Plan 2 400,000.00	b) Follow-up Treatment - 30,000.00	b) Follow-up Treatment – 5,000.00	b) Follow-up Treatment - 30,000.00
	4 5 6	Surgeon Fee Anaesthetist Fee Operating Theatre Charges	E.II	days) c) Alternative Medicine –	Premier 500,00.00 b) Follow-up	c) Alternative Medicine – 500.00	b) Follow-up Treatment - Classic	b) Follow-up Treatment - Basic	b) Follow-up Treatment - Executive	Platinum 500,000.00 b) Follow-up	b) Follow-up Treatment - Essential	Platinum 500,000.00 b) Follow-up	c) Alternative Medicine – 500.00	b) Follow-up Treatment - Plan 1	c) Alternative Medicine – 1,000.00	c) Alternative Medicine – 1,000.00	c) Alternative Medicine – 500.00
-	7	Daily In-Hospital Physician's Visit (Max 120 days) Pre-Hospital	Full Reimbursement subject to Maximum Limit Per Disability	1,000.00	Treatment – 10,000.00		10,000.00 VIP 30,000.00	15,000.00 Elite 30,000.00	25,000.00 First 50,000.00	Treatment - Silver 5,000.00	10,000.00 Supreme 30,000.00	Treatment - Silver 20,000.00		30,000.00 Plan 2 75,000.00			
•	9	Diagnostic Tests Pre-Hospitalisation Specialist Consultation	provided the charges are within the recommendati		Medicine - 1,000.00		c) Alternative Medicine – 1,000.00 (VIP only)	c) Alternative Medicine – 1,000,00 (Elite only)	c) Alternative Medicine – Executive 500.00	Gold 10,000.00 Platinum	c) Alternative Medicine – 1,000.00 (Supreme	Gold 40,000.00 Platinum		c) Alternative Medicine – Plan 1 500.00			
	11	Post-Hospitalisation Treatment Emergency Accidental Outpatient Treatment	on of the Malaysian Medical Association Guidelines and Reasonable				(**** 3,)	(Emo orny)	First 1,000.00	30,000.00 c) Alternative Medicine – 1,000.00	only)	c) Alternative Medicine – 200.00		Plan 2 1,000.00			
	13	Accidental Dental Treatment Day care Procedure Ambulance	and Customary Charges							(Platinum only)		(Platinum only)					
	15	Charges (by road) Government Service Tax															
		Government Hospital Daily Cash Allowance (Max)	60.00	350.00	NIL	350.00	350.00 (VIP Only)	250.00	Executive 250.00	Silver 150.00	250.00 (Supreme only)	200.00 (Platinum only)	NIL	Plan 1 250.00	350.00	150.00	250.00
									First 350.00	Gold 250.00 Platinum 350.00				Plan 2 350.00			
		Medical Report Fee	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00
	18	Reimbursement Reimbursement of Tuition Fees – max per semester	10,000.00	NIL	Classic 10,000.00 Superior 20,000.00 Premier	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
					25,000.00												

19	Compassionate Visitation Benefit	5,000.00	5,000.00	Superior 10,000.00 Premier	7,500.00	Classic 5,000.00 VIP	Basic 5,000.00 Elite	10,000.00	5,000.00	7,500.00	Silver 2,500.00 Gold	2,000.00	Plan 1 5,000.00 Plan 2	5,000.00	3,000.00	5,000.00
				12,000.00		7,500.00	7,500.00				5,000.00 Platinum 7,500.00		10,000.00			
20	Outpatient GP Treatment (Annual Limit)	500.00	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
21	Annual Outpatient Cancer Treatment	10,000.00	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
22	Annual Outpatient Kidney Dialysis Treatment	10,000.00	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
23	Emergency Medical Evacuation /	100,000.00	500,000.00	Classic 250,000.00	10,000,000.00	Unlimited	Unlimited	Unlimited	Silver 500,000.00	1,000,000.00	Silver 500,000.00	100,000.00	1,000,000.00	1,000,000.00	10,000.00	10,000.00
	Repatriation			Superior 300,000.00					Gold 1,000,000.00		Gold Unlimited					
				Premier Unlimited					Platinum 1,500,000.00		Platinum Unlimited					
24	Accidental Death and Disablement	20,000.00	300,000.00	Classic 100,000.00	500,000.00	Classic 100,000.00	Basic 100,000.00	Executive 300,000.00	Silver 100,000.00	Essential 100,000.00	Silver 200,000.00	150,000.00	Plan 1 250,000.00	300,000.00	100,000.00	250,000.00
				Superior 200,00.00		VIP 300,000.00	Elite 350,000.00	First 325,000.00	Gold 300,000.00	Supreme 300,000.00	Gold 400,000.00		Plan 2 350,000.00			
				Premier 250,000.00					Platinum 500,000.00		Platinum 500,000.00					
25	Funeral Expenses	2,000.00	500,000.00	Inclusive in Item 23	10,000.00	Classic 5,000.00	Inclusive in Item 23	Inclusive in Item 23	Inclusive in Item 23	Inclusive in Item 23	Silver 1,000.00	3,000.00	Inclusive in Item 23	8,000.00	5,000.00	10,000.00
						VIP Unlimited					Gold 2,000.00					
											Platinum 3,000.00					
Α	MAXIMUM LIMIT	20,000.00	200,000.00	Classic	500,000.00	Classic	Basic	Executive	5,000,000.00	Essential	Silver	150,000.00	Plan 1	300,000.00	100,000.00	3,000,000.00
	PER DISABILITY (ITEMS 1-17)			150,000.00		50,000.00	100,000.00	300,000.00		100,000.00	200,000.00		300,000.00			
				Superior 250,000.00		VIP 300,000.00	Elite 150,000.00	First 350,000.00		Supreme 300,000.00	Gold 400,000.00		Plan 2 400,000.00			
				Premier 400,000.00							Platinum 500,000.00					
В	DEDUCTABLE AMOUNT PER CLAIM (ITEM 20)	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00

Analytical Findings

- 1. For the travel insurance plans, the items 1 to 15 are grouped into one category comprising the following:
- a. Medical and Other Expenses
- b. Follow-up Treatment
- c. Alternative Medicine
- 2. Travel insurance plans are compliant to the guideline by MOE, except for the following items:
- a. Government Hospital Daily Cash Allowance (Max) Only Student Assist Travel Insurance by AIG Malaysia Insurance Bhd and Travel Protection Plan by MPI Generali Insurans Bhd are non-compliant.
- b. Reimbursement of Tuition Fees max per semester Only Student Assist Travel Insurance by AIG Malaysia Insurance Bhd is compliant.
- c. Outpatient GP Treatment (Annual Limit) all are non-compliant.
- d. Annual Outpatient Cancer Treatment all are non-compliant.
- e. Annual Outpatient Kidney Dialysis Treatment all are non-compliant.