

Term and condition

Smart Life

Who is covered?

Smart Life - Policyholder & an insured relative All lives must be 'named' on a policy to receive cover and to subscribe and receive cover, you must be a Smart subscriber.

AGE:

You must be between 18 and 69 years old (both inclusive). For the beneficiary to receive free cover, she/he must be a Smart prepaid subscriber and be between 18 and 69 years old (both inclusive). Benefits for the beneficiary will commence on the same date as for the policyholder and be exactly equal to the benefits of the policyholder.

Deduction and Cover:

- Premium deductions and 100% free cover (for both policyholder and beneficiary above) will begin on the first day of the following registration, and cover will begin after have a successful deduction, e.g., if Lekhena registered on 15th January, her premium deductions and 100% free cover on accidental will begin on 16th January, and her actual cover will begin on 1st March depend on deduction previous month (cover both accidental and illness).
- If the full premium amount is not collected in a single month, partial cover will be provided based on the actual amount deducted.
- Claims must be initiated within 6 months of death of the insured. To be eligible for claims, the insured should be free from pre-existing medical conditions on the date of enrolment.

How to claim:

- Processing of claims will commence after the following documents are submitted
 - a. Proof of enrolment (insurance confirmation SMS or cover SMS).
 - b. Identification document (National ID card, family book, driver's license or passport).
 - c. Evidence of death (death certificate, medical certificate of cause of death, or official letter from an authorized Village or Sangkat representative).

Exclusion:

- Claims will not be paid if death occurs directly or indirectly from any of the following:
 - a. Suicide
 - b. War, insurrection, riot, or civil commotion.
 - c. Committing or provoking a criminal offence including, but not limited to, intake of illegal drugs, narcotics or alcohol other than as prescribed by a medical doctor.
 - d. non-disclosure of pre-existing medical condition on enrolment.

CANCELLATION:

The policy can be cancelled by calling the BIMA hotline 010 242 248. Premium deductions will be stopped within 48 hours. The policyholder can choose to enjoy all unexpired cover or choose to seek a refund at point of cancellation. If the policyholder chooses a premium refund, BIMA shall refund 90% of the premiums corresponding to the duration for which the premium has been paid and cover not yet provided if no claim has been filed. In the event or claim has been filed, no refund is available on cancellation.