

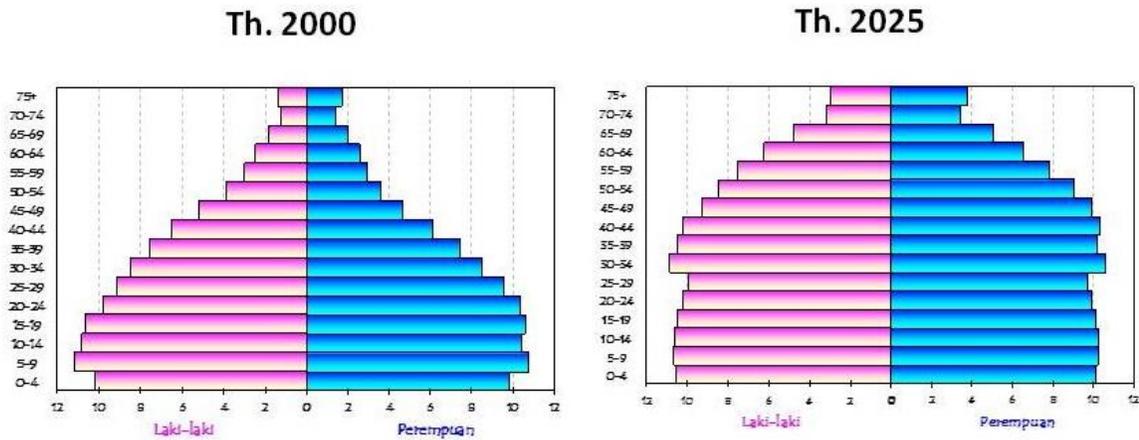
Guardianship situation challenges and opportunities



Dr. Emira E Oepangat CFP, FLMI

FACTS In Indonesia

PIRAMIDA PENDUDUK INDONESIA



Pyramid type: expansive

A Society burden: Children and above above 60 years old
(especially for UNWELL/ Special Needs/ Handicapped/ debilitated individual)

CAREGIVERS ARE NEEDED

Services as assisted living, adult - child day care, long term care, nursing homes (often referred to as residential care), hospice care, and home care.

Care emphasizes the social and personal requirements for “handicapped” children and senior citizens who need some assistance with daily activities and health care.

In Indonesia

Depending to the traditional methods of being cared for by “healthy parents and or younger generations of family member(s).

On Healthcare

the government has started established assistance and facility to assist elderly/ senior citizens. Private sectors also already starting to put attention to this matters

On Financial Support and Legal System?

What's available?

Special Needs/ Handicapped Children
Elderly Care?

Jakarta dan sekitar

The short URL of the present article is: <https://wp.me/PWcR7-1>

JAKARTA UTARA

Autism Recovery Network Singapore (ibu Nini Wan Mei)
 Jl. Pluit Karang Manis Raya Muara Karang E6 Selatan no. 2B
 Kel. Pluit, Kec. Penjaringan, Jakarta Utara
 Ph: 021-66603567
 email: nini.w@autismrecovery.asia

Brain Optimax (Peak Performance Center) (Bpk. Theo Chong Reg. Psych, Psych. Board Australia)
 Jl. Boulevard Raya Barat M38, Miami Bay,
 Rukan Mall of Indonesia (depan Lobby 7 MOI)
 Kelapa Gading Square, Jakarta Utara 14240
 Ph: 021-94747614 / 45870229
 email: info@brainoptimax.com
www.brainoptimax.com

INDOCARE (Ibu Juny Gunawan)
 Jl. Pantai Indah Utara 3 Blok U1 Sektor Utara Timur
 Pantai Indah Kapuk, Jakarta Utara 14460,
 Ph: 021-55966000, Fax: 021-5995432
 email: info@indocare.com

Outlook 2016

NAVIGASI

- ➔ AUTISME
 - ➔ Diagnosis
 - ➔ Mitos
 - ➔ Pengertian
- ➔ Kampanye Peduli Autisme
 - ➔ Kampanye Peduli Autisme 2013
 - ➔ Lomba Foto Walk4Autism 2013
 - ➔ Walk for Autism 2013
 - ➔ Kampanye Peduli Autisme 2015
 - ➔ Lomba Foto Walk4Autism 2015
 - ➔ Seminar 2015: "The Life Cycle of Individuals with Autism"
- ➔ Kampanye Peduli Autisme 2018
- ➔ Kuesioner penggunaan media sosial YAI

Cari untuk:

Yayasan Autisma Indonesia
 Jasmine Tower Lt. 2, #CC02,
 Apartemen Kalibata City
 Jl. Kalibata Raya no. 1,
 Jakarta 12750
 Tlp. 0851 01 555 643
info@autisme.or.id

View on Instagram

Health Related

Community support system for Special Needs/ Handicapped Children



In late 2016, Voice embarked on its journey to unravel what human-centred innovation means, by supporting grantees to explore, test and reflect on new ideas or existing approaches applied in a new context. 2017 yielded a handful of insights and early indications of what constitutes individual, systemic, formal and informal change through innovation for the target groups. Overall, we came a few steps closer to achieving our long-term goal to strengthen influencing capacity of organisations and representatives of marginalised and discriminated groups, by using innovative capacity strengthening. Identifying and working with "unusual suspects" has been at the core of our programme design.

9 PORTRAITS OF YOUNGSTERS WITH DOWN SYNDROME

PROJECT: LET'S SPEAK UPI BY YAPESDI IN INDONESIA

'Overwhelmed and overwhelming satisfied'

After four sessions of intensive coaching on self-confidence, nine young students with Down Syndrome presented themselves to each other, their coaches and parents. They were confidently showing who they are and what they can happily do. The majority still have challenges speaking in correct and complete phrases; questions need to be asked in a simple fashion. Often, they respond with one word, but responding they do! Most importantly is that the group gained confidence and is happy



Adi, the pineapple jam maker.
 Adi's dream is to sell his pineapple jam. You can even order his tasty jam! He's also now experimenting with baking muffins. He can very well be the only person with Down syndrome who is attending public university at Bogor Agricultural University. The first time he attended class, he barely spoke a clear word. But now he has become more confident, this has improved a lot. He always stands by to help the other students.



Irfan, the djembe player.
 Irfan is such a sweet student, who is always ready to help. He always cheers up his friends when they are sad by comforting, gently calling and even massaging them. He always smiles sincerely. Even the teachers search for his face for strength if things get 'difficult' in class. Irfan is a good djembe player and often on stage at events. You can invite Irfan for your event! Always be a kind boy, Irfan!



Faiza, the bocce athlete and musician.
 Faiza is the most mature student. She is multi-talented, smart, humble, and dreams about entertaining people with her keyboard. She is one of the D'Stars band members together with her friends. You can invite the band to your event! Faiza could become the leader in the intellectual disability movement in Indo-



Morgan, the chef patissier.
 Morgan has held his first presentation in front of his classmates and parents. Self-advocator on the making and a big fan of Irsyad!



Irsyad, the swimming athlete.
 Irsyad has every reason to be proud of himself with all his swimming medals. He won them in Los Angeles (USA), Australia and the latest even in Singapore. This shy and quiet boy, who smiles when you talk to him, is Morgan's inspiration. Morgan just started swimming a few months ago and his swimming teacher always praises Irsyad and says: if you eat more you will be able to swim with more force, like Irsyad. Now Morgan meets his inspiration in the class. It's a small world after all. Inspire more people, Irsyad. You are what you are.



Afra, the hip hopper.
 Afra is our supple hip hopper, although sometimes it looks like dance dance, just because she is so into it. She doesn't know yet what she would like to become when she grows up. Afra is an expressive student and able to speak about her feelings with confidence. She confessed that her boyfriend just broke up with her, because his parents disagree with her relationship. But the boyfriend says he is the one being dumped. The class is indeed different, but the students feel no shame



Edo, the musician.
 Edo is a keyboardist, the front-liner in D'Stars band and the most hilarious student in class. Compared to his first day in class, he is not shy anymore. He regularly texts friends and family via WhatsApp, sending his music recording or just asking how they are doing. If you have any event, invite Edo and his friends and give them the chance to show off their skills. Keep practicing, Edo!



Defrey, the preacher.
 Defrey is the student who never forgets to pray. He grabs every opportunity to pray for his mom in heaven. He even prays before receiving his allowance. Defrey is not really active in class, but he has the best memory of his friends' names. If he starts talking, he can't stop. He also understands English quite well. Unfortunately, he is quite a picky eater. He doesn't want to taste any of the provided snacks, he only eats spaghetti or noodles.



Kimi, the singer.
 Kimi is the youngest in class. She loves to sing, but what she wants to become when she grows up, she does not yet know. She always helps her therapist by getting papers organised and she considers it as a job for which she needs to be well-paid. Her speaking skills are good; she sings clearly in English, even though she doesn't understand the words. Be more

<https://www.cnnindonesia.com/gaya-hidup/20180321150440-259-284734/video-kisah-para-ibu-yang-merawat-anak-dengan-down-syndrome>

Emira Oepangat
to me

Jun 27 (7 days ago) ☆ ↶ ↷

Indonesian > English Translate message

Turn off for: Indonesian x

<https://m.suara.com/health/2018/05/14/181734/lansia-di-indonesia-meningkat-dua-kali-lipat-tahun-2035>

Lansia di Indonesia Meningkat Dua Kali Lipat Tahun 2035

Kemendes memprediksi pada 2035 mendatang jumlah lansia di Indonesia meningkat dua kali lipat.

Senin, 14 Mei 2018 | 18:17 WIB

[Suara.com](#) - Kementerian Kesehatan memprediksi pada 2035 mendatang jumlah [lansia](#) di Indonesia meningkat dua kali lipat menjadi 36 juta jiwa. Tingginya jumlah lansia ini menjadi tantangan tersendiri, mengingat lansia rentan terserang berbagai penyakit.

Disampaikan Direktur Kesehatan Keluarga dari Kementerian Kesehatan, Dr. Eni Gustina, MPH., data menunjukkan satu dari empat [lansia di Indonesia](#) dalam kondisi sakit. Agar lonjakan jumlah lansia di 2035 mendatang tidak menjadi beban negara, ia berharap kerjasama lintas sektor demi mewujudkan lansia yang mandiri dan sehat.

Baca Juga : [7 Makanan Khas Buka Puasa dari Berbagai Negara di Dunia](#)

"Dari sisi kesehatan, Kementerian Kesehatan memiliki Posbindu lansia sebagai langkah preventif. Di sini lansia dilakukan *screening*, lalu dipilah dari kemandiriannya.

<https://m.suara.com/pressrelease/2018/06/03/160346/senior-citizen-expo-untuk-tingkatkan-perhatian-kepada-lansia>

Senior Citizen Expo untuk Tingkatkan Perhatian kepada Lansia

Perhimpunan Gerontologi Medik Indonesia hingga kini masyarakat dan pemerintah masih minim perhatian kepada lansia.

Minggu, 03 Juni 2018 | 16:03 WIB

[Suara.com](#) - Minimnya fasilitas publik dan layanan kesehatan yang ramah bagi warga lanjut usia ([lansia](#)) merupakan salah satu bukti nyata kurangnya kesadaran masyarakat dan pemerintah dalam menghargai warga senior, untuk itu Ikatan Alumni Universitas Indonesia (ILUNI) Fakultas Kedokteran Universitas Indonesia (FKUI) 1993 bekerja sama dengan Perhimpunan Gerontologi Medik Indonesia (PERGEMI) akan menggelar [Senior Citizen Expo](#) pada Oktober 2018 untuk kali pertama.

"Budaya menghargai lansia (lanjut usia) harus ditanamkan sedini mungkin agar tak ada gap. Itu juga harus ditunjang dengan kebijakan di tingkat pemerintah," ucap Ketua PB PERGEMI, Prof.Dr. dr. Siti Setiati, SpPD, KGer, MEpid di Jakarta, belum lama ini.

Health Related

Community support system for Elderly

[layanannya-home-care-makassar-24-jam](#)

[Seniorlivingkayangan.com](#)

[Rukun Senior Living](#)



Alzheimer Indonesia is a non profit organization that aims to improve the quality life of people with Dementia / Alzheimer, their families and caregivers in Indonesia.

Alzheimer Indonesia which is also known as ALZI was established in Indonesia on August 3rd 2013. ALZI is supported by Alzheimer Nederland, Local Government DKI Jakarta, Ministry of Health, Ministry of Social Affairs, medias, private sectors, communities and volunteers of various ages and professionals including Neurologists, Psychiatrists, Geriatricians, Lawyers, Health Communication Specialists, Students

ALZI
Indonesia

Rumah Sakit IMC Bintaro Punya Fasilitas Kesehatan Lansia

Rumah Sakit Ichsan Medical Center (IMC) Bintaro, Tangerang Selatan memiliki pelayanan khusus untuk para lansia.

Selasa, 05 Juni 2018 | 12:23 WIB

[Suara.com](#) - Kesadaran setiap orang akan gaya hidup sehat kini semakin tinggi, termasuk pada orang [lansia](#) (lanjut usia). Inilah yang membuat Rumah Sakit Ichsan Medical Center (IMC) Bintaro, Tangerang Selatan memiliki pelayanan khusus untuk para [lansia](#), salah satunya ialah Club Lansia.

dr. Vebry haryati lubis, MARS, Direktur Pengembangan Bisnis dan Rumah Sakit IMC Bintaro mengungkapkan, Club Lansia yang didirikan sebenarnya mirip seperti daycare untuk para lansia. Di sini, berbagai kegiatan bisa dilakukan bersama-sama, mulai dari penyuluhan kesehatan, rekreasi, senam, sharing hingga bermain puzzle atau karaoke.

Baca Juga : [Senior Citizen Expo untuk Tingkatkan Perhatian kepada Lansia](#)

"Setiap harinya [RS IMC Bintaro](#) memang kebanyakan melayani lansia, jumlahnya hingga 300 orang setiap hari. Mereka datang dengan penyakit-penyakit kronik, seperti hipertensi, diabetes, jantung, nyeri sendi, hingga perawatan pascastroke," jelas dia dalam acara buka puasa bersama dan santunan anak yatim RS IMC Bintaro, Tangerang Selatan, Senin (5/6/2018).

Dengan berbagai kegiatan tersebut, diharapkan, lanjut dia, para lansia bisa jauh lebih sehat, karena selain penyuluhan kesehatan dan check up secara teratur, makan makanan mereka pun, lanjut dr. Febry tentunya diperhatikan oleh para ahli gizi yang sesuai dengan kondisi kesehatan mereka.

Apalagi, selain sehat secara fisik, pikiran para lansia juga bisa lebih gembira dan terhindar dari stres, karena dapat bersosialisasi dan berbagi bersama teman seusia mereka. Hal ini, lanjut dia, juga bisa membuat mereka terhindar dari pikun atau demensia lebih cepat.

Selain Club Lansia yang dikelola di Klinik IMC Bintaro, dr. Febry juga menjelaskan bahwa kini RS IMC Bintaro tengah membuat gedung baru yang sudah bisa beroperasi

The challenges are.....

HOW MUCH IS THE COSTS
TO SAVED UP?

WHO WILL TAKE CARE OF THEM?

THE HOPE.....

Language and the brain

I want to be healthy. I want to know that if I am sick, I will be cared for with love, compassion, and wisdom so that I can once again live a healthy, vital life.

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The health care conversation in the United States has followed that same pattern:

- *Health care* (vs. people being healthy, well, and happy)
- *Pre-existing conditions* (vs. people being sick and suffering)
- *Single-payer* (vs. people being able to afford the basic necessities of life)
- *Medicaid* (vs. people who have lost their life savings to take care of a loved one, ending up destitute with no health care for themselves)
- *Insurance companies* (vs. the people who get to decide what care my mother can have)

If we really want to make life better for *people*, where are the *people* in these conversations?

Conversations that create real change aren't about systems or money; they are about what people really want.

What we are learning from other countries?

- _ Special Needs/ Handicap Children
- _ Elderly care

CHILDREN'S CARE: Parents worry about future in life

EXAMPLE: How much does autism treatment cost?

Harvard researchers estimate that the added costs of autism-related healthcare and education average more than **\$17,000** per child per year in the United States. The figure represents expenses above those for a child without autism spectrum disorder (ASD). Feb 10, 2014



'I just adore him!' GBBO star Candice Brown leads the praise for boy, six, with Down's Syndrome who learned to walk by going to ballet as he shows off his dance moves on This Morning

By Stephanie Linning For Mailonline
09:02 BST 01 Jun 2018, updated 13:59 BST 01 Jun 2018



my \$UCCESS story

Here's how a family came up with \$3 million to ensure lifetime care for their autistic son

- The challenge is providing for a loved one after you're gone.
- A special needs trust proved to be the answer.
- Think of it as a college tuition payment every year for 60 years.

Darla Mercado | @darla_mercado

Published 7:54 AM ET Wed, 26 April 2017 | Updated 12:09 PM ET Mon, 8 May 2017



David Finland, who is autistic, poses with his brothers after running with Team Achilles in the 2013 New York City Marathon. (Photo: Family photo)



The number of children diagnosed with autism has skyrocketed in recent years, from fewer than 1 in 1,000 in the 1980s to 1 in 50 kids today.

The special support might require, and also reflects the financial implications such a diagnosis has for a family.

Estimates of the **lifetime costs of raising a child with autism range from \$1.4 million to \$2.5 million**, says Adam Beck, professor of health insurance and director of the Center for Special Needs Planning at The American College in Bryn Mawr, Pa.

(about \$300,000 up until age 1 for a typical child)

Some of the expenses can be tabulated, like the **\$1,800 a year spend on diapers for a 5-year-old** or the **\$24,000 a year to pay for a caregiver, which wouldn't otherwise employ.**

The ***special needs trust*** and the **life insurance policies** are just two pieces of the funding puzzle for the family.

A family story:

"A big part of our financial planning was knowing what government benefits you're entitled to," said Carol.

For instance, to start collecting **Supplemental Security Income at age 18.**

Carol also discovered that though **states offer benefits** to help individuals with **developmental disabilities**, those **programs and the degree** to which they are funded will vary from one jurisdiction to the next.

Beyond Life Insurance

"At the time, the **services for developmental disorders weren't covered by insurance**, so that was an out-of-pocket expense we had to go through," said Carol, noting her son had as much as 20 hours a week of therapy at a cost of up to \$50 an hour.

“How do you plan for the possibility that you’d become unable to work in your 30s or 40s?”

- **Start by getting a solid diagnosis.**

Autism disorders can be difficult to diagnose, By getting a diagnosis nailed down can mean the person may qualify for treatment and other benefits throughout his or her life – long after parents aren’t around to help.

- **Evaluate child’s unique situation.**

Children with Asperger’s syndrome, a high-functioning end of the autism spectrum, may not need help making a living

- **Consider a special needs trust.**

Those who might need government support such as Social Security Disability Insurance or Medicaid-paid health care must have limited income and assets to avoid disqualifying themselves.

- **Add training wheels to mom and dad’s support.**

Figure out ways to limit how the money is used. There are Credit cards that work with special needs trusts.

- **Try to make employment practical.**

Plan to do what you can to ensure that your child can earn a living. consider providing training, or guiding their offspring toward alternatives to traditional employment that might improve their children’s financial prospects. For instance, an artistic talent could be turned into a viable small business.

► **Explore annuities and life insurance.**

Even if the autistic adult in your family isn't likely to qualify for government help, his life might be improved by an annuity that kicks in as he approaches retirement or life insurance after you're not around, suggests Somerset Wealth Strategies Adviser David Smith. But he warns shoppers to be careful. "Understand the contract specifics – how the money will come out and how it will benefit the recipient. You don't want to send them to Vegas," he says.

► **Set up a social support network.**

One symptom of autism is difficulty making and maintaining social connections. Through a special needs trust or other arrangement, a parent can provide money or other incentives to make sure that an autistic child is included in family celebrations and can take vacations. "It's hard to put this in your will, but I think it is important that parents set up a social network, making sure that their child is going to have friends and family when they are gone. It will make a big difference in their lives," Beck says.

► **Put on your own oxygen mask first.** "A special-needs family can easily drain all of its savings, "You are going to be 20+ years older than the child, and the worst thing is getting to the point where you are too old to care for your child and you don't have enough money to pay someone else to care for him."

<https://www.justgreatlawyers.com/estate-planning-for-parents-of-children-with-autism>

Estate Planning for Parents of Children with Autism

As people grow older, especially parents, they begin to think about the future, and how their children will be provided for after they're gone. For parents of children without developmental disabilities, this is easier, as those children can typically provide for themselves.

However, when you have a child with [Autism Spectrum Disorder](#), the issue becomes much knottier. Not only do you have to financially provide for that child after you're gone, you must ensure they'll be well taken care of and that your death does not compromise the child in any way other than the obvious emotional impact losing you will have.

Below we will discuss what it means to [plan your estate](#) when you have a child with autism. We will address the basics – like what exactly estate planning is and the challenges it can bring – as well as what documents you need to have in order in your estate planning, which documents your child needs to be successful and in compliance with the law, and how you should proceed once you have put your affairs in place.

Planning for the future when you have a child with autism can be difficult, but if you take a forthright approach, you will pave the way toward a successful life for your child with autism, even if you are no longer around to take care of them.

What Is Estate Planning?

ELDERLY CARE: Cost of Caring for Elderly Parents Could Be Next Financial Crisis

By Marlo Sollitto

A survey conducted by AgingCare.com found that although adult children are often responsible for paying for their elderly parent's care, the large majority of caregivers are vastly unprepared.

The survey found:

63% of caregivers have no plan as to how they will pay for their parent's care over the next five years.

62% say the cost of caring for a parent has impacted their ability to plan for their own financial future.

The Cost Of Elder Care

Adults have been providing an increasing percentage of financial for various types of adult care.

Type	Average	Annual
Nursing home: semi-private room	\$214/day	\$78,110
Nursing home: private room	\$239/day	\$87,235
Assisted living	\$3,477/month	\$41,724
Home care: home health aide	\$21/hour	\$21,840
Home care: homemaker	\$19/hour	\$19,760
Adult day services	\$70/day	\$18,200



Food for THOUGHT

Euthanasia: Intentionally ending one's life

Is this the BEST way for all parties?

Estimated Cost Savings from Legalizing Physician-Assisted Suicide

Assuming that (1) 2.7 percent of patients who die each year (62,000 Americans) would choose physician-assisted suicide, (2) these patients would forgo an average of four weeks of life, and (3) the medical costs in the last month of life for each patient who dies are \$10,118 (in 1995 dollars), we estimate that legalizing physician-assisted suicide and euthanasia would save approximately \$627 million in 1995 dollars (Table 1). This amount is less than 0.07 percent of total U.S. health care expenditures.

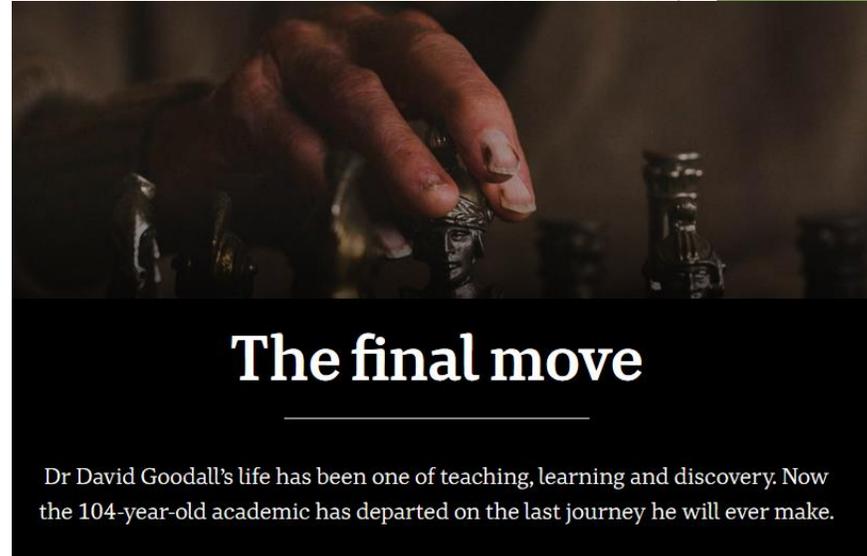
Table 1.

TABLE 1. ESTIMATED COST SAVINGS FROM THE USE OF PHYSICIAN-ASSISTED SUICIDE BY PATIENTS WITH CANCER WHO RECEIVE CONVENTIONAL CARE (IN 1995 DOLLARS).

Percent (no.) Who Would Use Physician-Assisted Suicide	End-of-Life Health Care Costs			
	AVERAGE MEDICARE COSTS — PART A AND PART B		TWICE THE AVERAGE MEDICARE COSTS — PART A AND PART B	
	In Last Mo of Life (\$10,118)	In Last 2 Mo of Life (\$24,507)	In Last Mo of Life (\$20,230)	In Last 2 Mo of Life (\$49,014)
2.7 (62,000)	\$627 million*	\$99 million	1.25 billion	1.80 billion
3.4 (78,000)†	789 million	1.13 billion	1.58 billion	2.24 billion
5.0 (115,000)‡	1.14 billion	1.67 billion	2.33 billion	3.34 billion
7.0 (161,000)§	1.63 billion	2.34 billion	3.24 billion	4.67 billion

*This amount represents the most reasonable estimate of cost savings.
 †This percentage is the proportion of all cases of euthanasia and physician-assisted suicide in the Netherlands, including the cases of euthanasia in which patients did not provide current consent. The number extrapolates the Dutch percentage to the U.S. population.
 ‡This percentage is the proportion of all dying patients who make inquiries about or request euthanasia or physician-assisted suicide in the Netherlands. Approximately one third of such inquiries and requests are answered or honored. The number extrapolates the Dutch percentage to the U.S. population.

Estimated Cost Savings from the Use of Physician-Assisted Suicide by Patients with Cancer Who Receive Conventional Care (in 1995 Dollars).



www.abc.net.au/news/2018-05-05/david-goodall-trip-to-switzerland-for-voluntary-euthanasia/9716354

* Cost of “the” Drug USD 75 - 150

Would Financial Motivations Encourage Insurance Companies, Health Care Providers, and Patients to Seek Euthanasia and Physician-Assisted Suicide if Those Options Were Legally Available?

General Reference (not clearly pro or con)

The Organisation for Economic Co-operation and Development (OECD), in their "OECD Health Data 2012: How Does the United States Compare" report, available at www.oecd.org, stated:

"Health spending accounted for 17.6% of GDP in the United States in 2010, down slightly from 2009 (17.7%) and by far the highest share in the OECD, and a full eight percentage points higher than the OECD average of 9.5%. Following the United States were the Netherlands (at 12.0% of GDP), and France and Germany (both at 11.6% of GDP).

The United States spent 8233 USD on health per capita in 2010, two-and-a-half times more than the OECD average of 3268 USD (adjusted for purchasing power parity). Following the United States were Norway and Switzerland which spent over 5250 USD per capita. Americans spent more than twice as much as relatively rich European countries such as France, Sweden and the United Kingdom.

6 costs to expect when caring for aging parents

Cost 1. Remodeling expenses

Cost 2. Lost hours of work

Cost 3. Bringing in additional help

Cost 4. All of the little things that add up

Cost 5. Medical expenses

Cost 6. Long-term expenses

Start planning now to care for elderly parents

- Financial Inventory (Pension, Investments, etc)
- Home Equity (sell, Downsize)
- Medicaid Qualification
- Get Covered - Long Term Care really will help *but only 8% of the population have it (in the US)*

In Indonesia

Opportunities For Life Insurance companies

URGENT

POLICY PROVISIONS REVIEW?

COLLABORATE with other service providers (?) to enriched your company Value Propositions

Safety, Income, Growth....
The Missing Puzzle Piece To Your Retirement Goals

What are Your 2018 Retirement Resolutions?

Protect and Guarantee Your Retirement Income:
Look in 2018's Highest Annuity Rates
Up to 7% Returns
Compare 100's of

Get Peace of Mind Today!
GET YOUR FREE QUOTE

Life Insurance for People with Disabilities

July 9, 2014

People with disabilities can often buy standard life-insurance policies or more high-risk plans tailored to disabled people. Read about your options.



Long-term care insurance

Long-Term Care Insurance

Long-term care insurance is an insurance product, sold in the United States, United Kingdom and Canada, that helps pay for the costs associated with long-term care. [Wikipedia](#)

BPJS Kesehatan and Ketenagakerjaan ++?

Understanding and Explore Annuities?

APPENDIX

PRINSIP ASURANSI

INSURABLE INTEREST

KEPENTINGAN YANG DAPAT DIASURANSIKAN.

PERJANJIAN ASURANSI UMUM AKAN BERLAKU DAN MENGIKAT JIKA TERTANGGUNG **MEMPUNYAI KEPENTINGAN ATAS OBYEK**, ARTINYA IA AKAN MENDERITA KERUGIAN JIKA OBYEK MENGALAMI RISIKO .

INSURABLE INTEREST AKAN DIEVALUASI KETIKA MENGAJUKAN PERTANGGUNGAN DAN KETIKA KLAIM DIAJUKAN.

DIDALAM ASURANSI JIWA , INSURABLE INTEREST DILIHAT DARI HUBUNGAN KEPENTINGAN **PENERIMA MANFAAT** TERHADAP **TERTANGGUNG**. APAKAH PENERIMA MANFAAT AKAN MENDERITA KERUGIAN FINANSIAL JIKA TERTANGGUNG MENINGGAL DUNIA. DIEVALUASI KETIKA PENGAJUAN PERMOHONAN PERTANGGUNGAN.

PRINSIP ASURANSI

UTMOST GOODFAITH (ITIKAD TERAMAT BAIK)

SECARA UMUM SEMUA PERJANJIAN HARUS DIDASARI ITIKAD BAIK, JUGA DIDALAM PERJANJIAN ASURANSI, CALON TERTANGGUNG/PEMEGANG POLIS KETIKA MELAKUKAN OFFER, MENGETAHUI SECARA PASTI BAHWA OBYEK YANG AKAN DIPERTANGGUNGKAN BENAR DALAM KEADAAN BAIK, TIDAK SEDANG ATAU AKAN MENGALAMI RISIKO YG AKAN MENIMBULKAN KERUGIAN.

CALON TERTANGGUNG/PEMEGANG POLIS WAJIB MENGUNGKAPKAN SEJUJURNYA KONDISI OBYEK (**DUTY OF DISCLOSURE**).

KARENA **OBYEK BERADA DIPIHAK TERTANGGUNG/PEMEGANG POLIS**, MAKA **KEWAJIBAN MENGUNGKAPKAN DATA OBYEK** ADA PADANYA.

ASURADUR JUGA WAJIB BERITIKAD BAIK, DENGAN MENJELASKAN SYARAT POLIS, ATAU MENINDAKLANJUTI PEMERIKSAAN ATAS DATA YANG OLEH CALON TERTANGGUNG TELAH DIBERITAHU SECARA SAMAR/SEPINTAS,

DAN HILANG HAKNYA MENGUJI (CONTESTABILITY) JIKA HAL ITU TIDAK DILAKUKAN.

PRINSIP ASURANSI

INDEMNITY (GANTI RUGI).

PERJANJIAN ASURANSI Jiwa secara tekstual adalah **PERJANJIAN SEJUMLAH UANG**, bukan indemnity karena kerugian yg terjadi karena meninggalnya seseorang tidak dapat dihitung.

Oleh karena itu jika atas diri seorang tertanggung diasuransikan kepada beberapa polis/asuradur, maka ketika ia meninggal dunia, semua polis harus membayar santunan.

Secara **KONSEPTUAL** sebenarnya asuransi adalah untuk mengganti kerugian ekonomis/finansial, kalau risiko terjadi.

Artinya, **SEBERAPAPUN JUMLAH POLIS YANG DIMILIKI KAN DIBAYAR KLAIMNYA**, namun pembayaran tsb tidak akan mampu menanggulangi kerugian penerima manfaat. Penerima manfaat dapat menuntut lagi pihak yg menimbulkan kerugian selain asuradur (KUHPer PASAL 1365).

Jadi ketentuan **SUBROGASI** sebagai tercantum dalam pasal 1400 KUHPer tidak berlaku.

PRINSIP ASURANSI

PROXIMATE CAUSE

PENYEBAB TIMBULNYA KERUGIAN (PERIL) YANG DICOVER POLIS ADALAH **SEBAB UTAMA YANG DOMINAN**, SUATU SEBAB YG AKTIF SEPANJANG RENTETAN KEJADIAN , HANYA KEJADIAN ITU YG MENIMBULKAN KERUGIAN TANPA ADANYA INTERVENSI DARI KEKUATAN LAINNYA YG BERPENGARUH DALAM TERJADINYA KERUGIAN.

HUKUM YANG BERLAKU

DI INDONESIA PERJANJIAN ASURANSI TUNDUK KEPADA:

1. KITAB UNDANG-UNDANG HUKUM PERDATA (KUHP_{er})
2. KITAB UNDANG-UNDANG HUKUM DAGANG (KUHD)
3. UNDANG-UNDANG & PERATURAN LAIN

DASAR KESEPAKATAN HUKUM YANG BERLAKU

KUHPERDATA MENGATUR TENTANG DASAR DAN SYARAT-SYARAT PERJANJIAN UMUMNYA, TERUTAMA PASAL-PASAL DALAM BUKU 3.

KUHDAGANG MENGATUR TENTANG PERJANJIAN ASURANSI (BUKU KESATU BAB 9 DAN 10)

UNDANG-UNDANG & PERATURAN LAIN, SEPERTI UU NO. 40/2007 TENTANG PERSEROAN, UUTENTANG PERLINDUNGAN KONSUMEN, UU NO. 40/2014 TENTANG PERASURANSIAN, DAN PERATURAN PERATURAN, SURAT EDARAN YANG DIKELUARKAN OLEH OJK.

SAYANGNYA KUHD HANYA MENGATUR SEDIKIT SEKALI TENTANG PERJANJIAN ASURANSI JIWA.

PADAHAL UMUMNYA POLIS ASURANSI JIWA YG DITERBITKAN DI INDONESIA MENGAMBIL ALIH SEMUA KETENTUAN POLIS ASING.

HUKUM YANG BERLAKU

APAKAH DENGAN DEMIKIAN SYARAT-SYARAT POLIS TIDAK MEMPUNYAI DASAR HUKUM SAH SEHINGGA MENGIKAT PARA PIHAK?

SESUAI PASAL 1338 KUH-PERDATA, MAKA PERJANJIAN/SYARAT POLIS SAH MENGIKAT, JIKA DISEPAKATI PARA PIHAK, ASALKAN **SESUAI PASAL 1320** KUH-PERDATA TENTANG SYARAT SAHNYA SUATU PERJANJIAN, YAITU:

1. PARA PIHAK SEPAKAT UNTUK MENGIKATKAN DIRI (PROSES OFFER & ACCEPTANCE)
2. PARA PIHAK CAKAP/KOMPETEN UNTUK MEMBUAT PERIKATAN.
3. UNTUK SUATU HAL TERTENTU
4. OLEH SUATU SEBAB YANG HALAL



KARAKTERISTIK PERJANJIAN ASURANSI

PERJANJIAN ASURANSI MEMPUNYAI KARAKTERISTIK SEBAGAI

BERIKUT: **UNILATERAL**
ALEATORY
CONTRACT OF ADHESION
INFORMAL

UNILATERAL : HANYA SATU PIHAK YANG BISA DITUNTUT SECARA HUKUM UNTUK MELAKSANAKAN KEWAJIBANNYA.

ALEATORY : DALAM HUKUM INDONESIA ISTILAHNYA PERJANJIAN YANG BERSIFAT UNTUNG-UNTUNGAN

CONTRACT OF ADHESION : ISTILAH DALAM HUKUM INDONESIA = PERJANJIAN DENGAN KLAUSULA BAKU - MENGIKAT

INFORMAL: BENTUK & ISI POLIS UNTUK JENIS PERTANGGUNGAN YANG SAMA SAJA, TIDAK SAMA ANTARA SATU PERUSAHAAN DENGAN LAIN PERUSAHAAN.

What exactly is a pre-existing condition?

- ▶ Pre-existing condition is not only the term used for illnesses that a person has at the time of buying a policy but it also includes:
- ▶ **Medical history of illness:** History of heart attack, gestational diabetes, etc.
- ▶ **Hospitalization history:** Hospitalization in case of angioplasty, kidney stone, etc.
- ▶ **Signs:** Increase in sugar level, obesity, etc.
- ▶ **Symptoms:** Having brain fog, feeling sweaty, etc.
- ▶ **Medication for any disease or illness:** Hypertension medication, diabetes medication, etc.
- ▶ **Skin disorder:** Psoriasis, Vitiligo, etc.
- ▶ **Major accidental injury:** Head injury, having prosthetic limb, etc.
- ▶ **Diagnosed illnesses:** Diabetes, hypertension, etc. that you have or had before or at the time of buying a policy.
- ▶ Coming back to the reason why my friend's mother's claim was rejected -
- ▶ She (the mother) was healthy at the time of buying the policy i.e. she neither had any illnesses nor disorders at the time of buying a policy (person with completely normal test report). However, she was under medications for blood pressure. Eventually, it meant that her blood pressure was regulated by external medication which she failed to mention. Because of this her claim for something unrelated, in this case, the accident, was rejected.
- ▶ This article talks about some common question about pre-existing illnesses and how they impact your medical insurance policy.



How does pre-existing illness impact your coverage?

Buying a health insurance policy after having a pre-existing disease may be slightly difficult, because the insurance companies are reluctant to cover individuals with pre-existing conditions. It holds true not only for health insurance but also for the life insurance policies.

This is because individuals who already have health problems have a higher chance of recurrent claims in the immediate to near future.

Some of the terms and conditions which an insurance company puts up if you have a pre-existing condition:

► Premium loading

You will be charged higher premium in case you have any ailment at the time of buying a policy. This is known as premium loading. Because of this premium loading, you will be charged higher premium than any other person of the same age but without any ailment. E.g. In case you have hypertension as pre-existing, your premium would be higher than any other person of same age because of premium loading.

Note: It is only at the time of buying the policy that an insurance company can load your premium based on your pre-existing. However, as per Insurance Regulatory and Development Authority (IRDA) mandate, no insurance company can load its customer for any disease that occurs after issuing the policy and renewing it without any break.

► Waiting period

You would have a waiting period from minimum 2 to 4 years only after which your pre-existing ailments would be covered, depending on the plan you buy. E.g. If you state appendicitis as pre-existing and your policy has a waiting period of 2 years. Then, your expenses for appendicitis would be covered only after policy renewal for the third year.

► Premium loading + waiting period

You may have both premium loading and waiting period. E.g. Consider that you have hypertension as pre-existing and your policy had waiting period of 4 years. Then, you will have higher premium than any other person of same age because of premium loading. Also, your expenses for hypertension or related ailment would be covered only after policy renewal for the 5th year.

► Medical check-up

If you have a pre-existing diseases there are possibilities that you might have a medical check-up based on which the insurance company would decide whether to issue you a policy or not. E.g. In case you have diabetes, your sugar control would be checked before issuing a policy.

Permanent exclusion for the pre-existing illness or condition

Sometimes considering your pre-existing ailment severe, the insurance company might offer you cover only if you agree on

- ▶ a permanent exclusion for this disease. This might leave you exposed to high risk and heavy expenses in spite of having insurance. E.g. In case you have diabetes insurance company would permanently exclude diabetes and related illnesses.

Policy denial

- ▶ If in case your pre-existing is chronic and severe like high diabetes, a medical history of heart attack, cancer, etc. Then, the Insurance Company has the right to deny providing or issuing a policy to you. E.g. In case you have a history of heart attack insurance company would deny issuing policy to you.
- ▶ If you have had a healthy life so far but have a lifestyle habit such as smoking, drinking moderate to heavily, etc. which can make you susceptible to serious ailments in the future, in such cases as well you may be charged a higher premium.

DOs and DONTs around pre-existing diseases

- ▶ **Do tell the insurance companies about your pre-existing disease**
- ▶ To get the above benefits the most basic thing that you need to do is to state clearly about your pre-existing disease at the time of buying a policy. This will ensure that you know the terms and conditions. It gives you a choice to agree or disagree with those terms and conditions.
- ▶ **Do get a voluntary health check-up done**
- ▶ Before buying a policy you can always have a voluntary health check-up done. This will help you in case you suspect of having any illnesses. This will eliminate any doubts and help you get a clear policy.

Do not hide your pre-existing

- ▶ This is a very common doubt amongst individuals while buying a policy. Well, there are serious consequences of it. There is a very high chance that the insurance company would find out about your pre-existing disease at the time you make a claim, through the kind of illness and medical history recorded by your doctor. Then, irrespective of claim being for related or non related ailment, like in the case we mentioned earlier, the company has full rights to deny the claim.
- ▶ A more serious consequence of hiding the existing pre-existing illness is that an insurance company may terminate or abort the policy contract with you forever. Without refunding the premium that you paid.
- ▶ **Do not buy a policy without comparison**
- ▶ There are many health insurance policy available in the market do not buy a policy in haste or just because your friend has bought one. Compare all the options and invest smartly. To know more about the steps to buy a policy and to compare options available for you visit [Coverfox.com](https://coverfox.com)
- ▶ Read our blog to hate pre-existing diseases less and learn more about how a health insurance policy is issued against existing conditions and how you can [buy a health insurance for your parents with pre-existing diseases](#), worry free! :)

To conclude:

To ensure that your health insurance gives you **adequate cover do not hide any ailment and clearly declare** them before buying the policy. This will ensure that you have a clean settlement process for all your future claims. Wish you the best of health, now and forever!

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