



The Real Cost of Getting Sick

Malaysian medical costs are rising faster than almost anywhere in the region. What treatment actually costs today – and what that means for your cover.

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Every year I sit with clients who are surprised by two numbers: what treatment costs, and what their medical card premium has become. Both are moving in the same direction, quickly, and understanding why makes the difference between reacting in panic and planning calmly.

Medical inflation: the number behind the headlines

Malaysia's medical cost inflation reached about **15% in 2025** — well above the global average of 10% and the Asia-Pacific average of 11% — and is projected to reach roughly **16% in 2026**. At 15% a year, a medical bill **doubles in about five years**. The drivers are structural: newer technology, more advanced treatments, and a rising burden of non-communicable disease, with claims growing faster than premiums.

~15%

Malaysia medical inflation, 2025

~16%

projected for 2026

~5 years

for costs to double at that rate

What treatment actually costs in a private hospital

Abstract percentages become real when you see the invoice. Published Malaysian ranges for common private hospital treatment:

Treatment	Typical private hospital cost
Heart bypass (CABG)	RM50,000 – RM120,000 (average around RM80,000)
Angioplasty	RM20,000 – RM40,000
Angiogram with stent(s)	RM25,000 – RM50,000, depending on stent count
Cancer treatment (varies by type & stage)	RM18,000 – RM395,000
Chemotherapy, per cycle	RM4,000 – RM15,000 depending on medication

Note the last row especially. Chemotherapy is not a single payment — it is a course, often many cycles across months, at a time when the patient is least able to work.

Why your premium went up — and what BNM did about it

Because claims are rising this fast, insurers repriced medical plans. In December 2024 Bank Negara Malaysia stepped in with interim measures: insurers and takaful operators must **spread premium increases over at least three years**, with adjustments of **no more than 10% per year** for at least 80% of policyholders — in effect until the end of 2026. Policyholders **above age 60** saw no increase in 2025, with any adjustment only after their 2026 policy anniversary. Reported health premiums rose about 7% in 2025.

The honest reading: the increases are real, but they are being staged rather than dropped on you at once. The worst response is to surrender a medical card because of a premium rise — you lose cover permanently, and re-underwriting later at an older age with a new medical history is often impossible.

Before you cancel anything, talk to me

There are almost always better options than surrendering: adjusting the room-and-board level, reviewing the deductible or co-insurance arrangement, or restructuring the plan. Cancelling a medical card is one of the very few financial decisions that is genuinely difficult to undo.

The second exposure: critical illness

A medical card pays the hospital. It does not pay *you*. When serious illness arrives, the bills that hurt most are often the ones no hospital issues: the income you stop earning, the spouse who takes leave to care for you, the home adjustments, the treatment sought overseas, the years of recovery.

This exposure is not rare. Malaysia's National Cancer Registry puts lifetime cancer risk at about **1 in 10 for men and 1 in 9 for women** before age 75 — and, worryingly, **around 60% of cancers are detected at stage 3 or 4**, when treatment is longest and most expensive. For colorectal cancer, late-stage diagnosis reached 72.4% in the registry's 2012–2016 report.

1 in 10 / 1 in 9

lifetime cancer risk, men / women (before 75)

~60%

of cancers detected at stage 3 or 4

72.4%

of colorectal cancers found late (MNCR 2012–2016)

THE TWO-LAYER ANSWER

A medical card for the bills, critical illness cover for the life

PRUMillion Med 2.0 provides a high annual limit of up to RM8 million with no lifetime limit, and room-and-board options from RM200 to RM400 — built for exactly the kind of inflation described above. **PRUValue Med** works as a medical expense add-on with a Med Value Point of up to RM2 million, continuing to cover 80% of eligible expenses even beyond it. Alongside them, **PRUMy Critical Care** pays a lump sum on diagnosis across multiple stages of illness — money that replaces income and buys choices, not just treatment. Full benefits, limits, exclusions and waiting periods are as per the Product Disclosure Sheet and your Sales Illustration.

What to check this month

- » What is my annual limit — and does it still look adequate against a RM120,000 bypass or a multi-year cancer course?
- » Is there a lifetime limit on my plan, and how close am I to it?
- » Do I have critical illness cover separate from my medical card — and is the sum assured at least 2–3 years of income?
- » When is my next premium revision, and have I planned for it rather than being surprised by it?

Bring your policy documents to a review session — I will read them with you, in plain language, and show you exactly where you are strong and where you are exposed. No sale required.

Let's talk about your numbers

No pressure, no obligation — just a conversation about what you read here, or about your own numbers. Every article on MyVintej can become a conversation.

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Sources & further reading

- Aon / Asia News Network (2026) — Malaysia medical inflation 15% in 2025, projected ~16% in 2026
- Bank Negara Malaysia (Dec 2024) — interim measures on medical insurance repricing; Fintech News Malaysia summary
- RinggitPlus (2026) — “Health premiums rose 7% in 2025 as medical costs climbed”
- Malaysian private hospital cost guides (KPJ Sentosa 2025/2026 guide; Health365; MalayMedical)
- Malaysia National Cancer Registry Report 2012–2016, Ministry of Health Malaysia
- Prudential Assurance Malaysia — PRUMillion Med 2.0, PRUValue Med, PRUMy Critical Care

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