HEALTH INSURANCE FOR FOREIGNERS

Insurance Product Information Document



Company:

Vitalitas pojišťovna, a.s., Czech Republic

Product:

Insurance of Necessary and Urgent Care for Foreigners

This document provides only a brief overview of the basic features of the insurance. Full details of the product are given in the precontractual information, the insurance conditions and the insurance contract, where the specific scope of cover is also stated.

What is this type of insurance?

The insurance of necessary and urgent care for foreigners covers the costs of healthcare for foreigners who are not participants in public health insurance in the Czech Republic and in the Schengen area. An insurance contract is a document of travel health insurance for a stay by foreigners of up to 90 days in accordance with Act No. 326/1999 Coll., on stays by foreigners in the territory of the Czech Republic, as amended.



What is insured?

Insurance of necessary and urgent care for foreigners provides coverage for necessary healthcare provided to an insuree, with agreed limits on insurance benefits.

Insurance of necessary and urgent healthcare includes:

- ✓ Necessary outpatient healthcare and hospitalisation
- ✓ Urgent medical procedures
- Diagnosis including necessary examinations
- Medicines prescribed by a doctor
- ✓ Urgent dental care
- Necessary emergency and rescue services
- ✓ Repatriation to country of origin
- Repatriation of bodily remains
- ✓ Related assistance services
- Costs of necessary and urgent healthcare outside the Czech Republic in Schengen countries in the case of the Czech Republic + Schengen insurance option

Liability insurance

The insurance company covers damage to property, life or health of a third party that occurs during the term of insurance and for which the insuree is liable under the legal regulations of the country in whose territory the damage occurred.

Limit on insurance benefits of: CZK 1 000 000 / EUR 40 000.

Accident Insurance

An insurance event is an accident suffered by the insuree, who then has damaged health with potential permanent consequences or whose death is caused. Limit on insurance benefits — permanent consequences CZK 200 000, death by accident CZK 100 000.

The precise extent of insurance benefits is stated in the insurance contract.



What is not insured?

- Damage occurring before the beginning and after the end of the insurance.
- Damage whose symptoms occurred or of which the insuree must have known before the conclusion of the insurance contract.
- So called "Medical tourism"
- Costs of examination and treatment of chronic diseases.
- Damage that occurs outside the territorial validity and type of insurance.
- Healthcare that can be deferred.
- Damage arising from an intentional criminal act of the insuree, under the influence of narcotic and psychotropic substances or alcohol, unless it is an accident.
- ✗ Injuries arising out of professional sports or extreme sports.
- Damage caused by war, civil unrest, terrorist attacks, etc.
- Cosmetic treatments, homeopathy, spas, sanatoriums, treatment of mental disorders and addictions.
- Birth and postnatal care for newborns.

A detailed list of exclusions is set out in the insurance terms and conditions.



Are there any restrictions on cover?

- ! The insurance company pays insurance benefits up to the amount of actual and proven costs, up to the maximum extent of the chosen insurance and up to the limits specified in the insurance contract.
- ! Limit on cover for healthcare and transport up to EUR 60 000 per insurance event (CZK 1 600 000).
- Limit on insurance coverage for dental care: CZK 5 000
- Limit on insurance coverage for outpatient prescription medicines: CZK 5 000
- If the policyholder or insuree breaches his/her duties, the insurance company may reduce the insurance benefits by a reasonable amount.

For a full list of limitations in the insurance coverage, please refer to the insurance terms and conditions and the insurance contract.



Where am I covered?

- ✓ In the territory of the Czech Republic to the extent of necessary and urgent care.
- ✓ In the Schengen area, except for the Czech Republic, the insurance covers tourist stays to the extent of necessary and urgent care, the length of a stay may not exceed 30 days.



What are my obligations?

The insuree and the policyholder are obliged to comply with the duties set out in the insurance terms and conditions in the articles regulating the duties of parties to the insurance as well as the duties laid down by generally binding regulations.

Duties of policyholder and insuree:

- Provide true and complete information when taking out insurance, including completing a health questionnaire.
- Notify the insurer in writing of any changes to the information provided in the insurance contract during the term of the contract.
- Pay the premiums on time and in the agreed amount.
- If the insurance applies to a person other than the policyholder, the policyholder is obliged to inform such person
 of the terms and conditions of the insurance.
- Do everything possible to avert an insurance event and reduce the extent of its consequences.
- In case of an insurance event, always contact the assistance service promptly and follow its instructions.
- Cooperate with the attending doctor throughout the treatment and adhere to the treatment regimen.
- In case of an insurance event, complete and send to the insurance company a notification of the insurance event and complete medical documentation necessary for its examination.
- At the insurance company's request, release the attending doctor from confidentiality about facts related to an
 insurance event or undergo a medical examination by a designated doctor.
- In case of an insurance event, inform the insurer of any other health insurance contracts.



When and how do I pay?

Premiums are payable in one lump sum for the entire duration of the contract, unless otherwise specified in the contract, are payable on the date of commencement of the insurance and are deemed to be paid on the date they are credited to the insurer's account. The amount of premiums is determined in accordance with the rates set by the insurer and is contained in the insurance contract.

Premiums can be paid by credit card, in cash or by wire transfer from the policyholder's account to the insurer's account.

If the insurance terminates during the term of the insurance, the insurer is entitled to the premiums for the term of the insurance.



When does the cover start and end?

The insurance is concluded for a fixed term and commences and ends on the following dates specified in the insurance contract as the beginning and end of insurance. A prerequisite for insurance is the timely payment of premiums.

The insurance contract may also be terminated prematurely, in particular by the death of the insuree, on the date of expulsion from the Czech Republic or refusal of an application for a residence permit, on the date of refusal of repatriation, on withdrawal from the insurance contract under the Civil Code, on the day on which the insuree becomes uninsurable, on the termination of the insurable interest or on the day the insuree becomes a participant in public health insurance.



How do I cancel the contract?

The insurance contract can be terminated by written notice within 2 months of its conclusion, the notice period is 8 days, after which the contract terminates.

The insurance contract can be terminated within 3 months of the date of the insurance event. The insurance will terminate on the expiry of the one-month notice term.

Other ways and the exact conditions of termination of insurance are described in the insurance terms and conditions and in the Civil Code.