

PRE-CONTRACTUAL INFORMATION

FOR INSURANCE CONTRACT ON TRAVEL HEALTH INSURANCE FOR FOREIGNERS

In accordance with the applicable legal regulations, we present the following information to you, a party interested in the conclusion of an insurance contract for travel health insurance for foreigners, serving as a basic introduction to the insurance offered and its parameters. Due to its limited scope, it contains only the most important information, more detailed information can be found in the General and Special Insurance Terms and Conditions (GITC and SITC). If you have any questions, please contact Vitalitas pojišťovna customer service.

BASIC INFORMATION ABOUT THE INSURER

Vitalitas pojišťovna, a. s., registered office: Tusarova 1152/36 170 00 Prague 7 - Holešovice
Business ID number: 25710966, entered in the Commercial Register maintained by the Municipal Court in Prague, section B, entry 5464, (hereinafter the “Insurer”)

The Insurer provides travel, health and accident insurance. The sole shareholder is the insurance company Oborová zdravotní pojišťovna zaměstnanců bank, pojišťoven a stavebnictví (OZP). For complete information on its solvency and financial position, please visit the Downloads section of the website www.vitalitas.cz.

HOW TO CONTACT US?

telephone no.: +420 296 339 629
website: www.vitalitas.cz

e-mail address: expat@vitalitas.cz
contact address: Zelený pruh 95/97, 140 00 Prague 4

data box: 7avgw45

WHAT THE INSURANCE APPLIES TO

Comprehensive Health Insurance for Foreigners and Insurance for 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 mandatory travel health insurance for a stay by foreigners in accordance with Act No. 326/1999 Coll., on stays by foreigners in the territory of the Czech Republic, as amended.

In case of an insurance event, the insurer shall provide the beneficiary with benefits under the terms and conditions and to the extent specified in the insurance contract and the insurance terms and conditions, but only up to the agreed limits. The specific parameters of the insurance, including the limits on insurance benefits, are set out in the draft insurance contract.

You can take out insurance in the following options:

Health insurance for necessary and urgent care for foreigners ensures reimbursement of necessary healthcare provided to the insuree, with agreed limits on insurance benefits, including necessary outpatient healthcare, hospitalisation, emergency and rescue services, necessary dental care, medicines prescribed by a doctor, repatriation and related assistance services up to a total limit of EUR 60,000 per insurance event.

Comprehensive health insurance for foreigners ensures reimbursement of reasonable and necessary costs of outpatient and inpatient healthcare provided to an insuree in order to maintain his/her health condition from the period before the conclusion of the insurance contract, with agreed limits on insurance benefits. The insurance covers, in particular, the costs of comprehensive healthcare in the Czech Republic up to a total limit of EUR 400 000 per insurance event and necessary and urgent care during a tourist stay in the Schengen area of no more than 30 days up to EUR 60 000.

Additional liability insurance

If it is agreed in the insurance contract, the insurance company covers damage to health, property or life 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. The limit on benefits is CZK 1 000 000.

Additional insurance in case of accident

An insurance event is an accident suffered by the insuree, who then has damaged health with potential permanent consequences or whose death is caused. The limit on insurance benefits in case of permanent consequences is CZK 200 000 and in case of accidental death it is CZK 100 000.

The insurance includes assistance services provided by Eurocross Assistance, which are available 24 hours a day, 365 days a year in Czech, English, Russian, Ukrainian and all other world languages, available by calling +420 296 339 629.

TERRITORIAL SCOPE OF INSURANCE

Comprehensive health insurance for foreigners and Health insurance for necessary and urgent care for foreigners applies to insurance events that occur on the territory of the Czech Republic and Schengen area countries, as specified in the insurance contract.

TIME SCOPE OF INSURANCE

The insurance commences and takes effect on the day following the payment of the premiums at the earliest, but not before the commencement of the insurance, which is specified in the insurance contract and is for a fixed period. For the duration of the insurance, the insurance company provides insurance protection to the insuree, i.e. it provides insurance benefits in case of an insurance event. The termination of the insurance contract and the insurance resulting from it most often occurs on the date specified in the insurance contract as the last day of the contract period, i.e. the expiry of the insurance term.

EXCLUSIONS

The insurance covers only damage occurring after the commencement and before the end of the insurance. The insurance does not cover damage that occurs outside the territorial validity and type of insurance, damage that occurs as a result of professional sports, war events, acts of terrorism, pregnancy and childbirth, unless they are specified in the insurance contract, medical tourism or other events specified in the GITC and SITC.

AGREEMENT OF HEALTH INSURANCE FOR FOREIGNERS

HOW TO TAKE OUT THE INSURANCE?

The insurance can be arranged electronically “online” on the website www.vitalitas.cz by “distance selling”, at an OZP branch or through partner organisations. A prerequisite for insurance is the conclusion of an insurance contract and payment of the premiums to the insurer. You can accept the insurer’s offer by paying the premiums specified in the contract into the designated account under the variable symbol, either by wire transfer from a bank account (payment order or payment card) or in cash. Premiums are set in accordance with the rates determined by the insurer and the length of insurance.

WHAT DOCUMENTS WILL YOU RECEIVE FROM US?

We will provide you with an insurance contract with a record of the meeting, personal data protection advice, General and Special Insurance Terms and Conditions when insurance is arranged at a branch, or send them to your e-mail address.

- You agree to the **draft insurance contract and the record of the meeting on the insurance** by paying the premiums by the due date.
- The **insurance contract** confirming the commencement of your insurance, which contains the specific parameters of the insurance, including the limits on insurance benefits.
- **Information about Personal Data Protection**
- The **Pre-contractual information** you are reading is intended to provide you with brief information about the insurer, the insurance agreed, etc.
- The **Insurance product information document** provides you with brief information about the insurance you are taking out.
- The **General and Special Insurance Terms and Conditions** describe what the insurance is for, how it works, our duties to each other, exclusions from the insurance under which we will not pay for damage, the rules for paying insurance benefits and the duties arising from this insurance; they are also available on the insurance company’s website www.vitalitas.cz in the Downloads section.
- **Health insurance card** with the telephone number for Eurocross Assistance in case of an insurance event.

METHOD OF CANCELLATION OF INSURANCE

The insurance ends on the expiry date, but it can also be terminated prematurely. The reasons for cancellation can be found in the insurance terms and conditions.

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.

If the contract was concluded in the form of a distance contract, the policyholder has the right to cancel the insurance contract within fourteen days of the date of its conclusion without giving any reason, and the insurer will refund the premiums paid without undue delay, but at the latest within thirty days; it has the right to deduct benefits it has already paid out under the insurance.

TAXES

The conclusion of the insurance contract does not impose any tax or fee liability on the policyholder. The insurance is subject to Act No. 586/1992 Coll., on income taxes, as amended, according to which insurance benefits are not subject to income tax.

WHAT TO DO IN THE EVENT OF A CLAIM

- Contact Eurocross Assistance on +420 296 339 629 and follow its instructions. Have the insurance contract number, the insuree’s first name and surname, your contact details and a description of the problem ready for communication.
- You can report an insurance event by filling in the online form in the Damage Report section or by using the PDF version available in the Files to Download section on the website www.vitalitas.cz.
- Send the completed form with original documents (bills, medical reports) electronically using the online form or to the insurer’s address.
- The insurance benefits will be paid to you by wire transfer to the bank account you specify in the form for the reported insurance event.
- If you have any questions about the current status of a claim, please contact us as indicated above, see “HOW TO CONTACT US?”

In case of illness or injury:

If possible, contact the assistance service, which will recommend a suitable medical facility or, in case of hospitalisation, contact your attending physician, send the hospital a guarantee for your treatment and, if necessary, organise your repatriation. Present your assistance card at the medical facility, and keep your travel documents with you. If you pay for treatment in cash, ask for receipts and medical reports.

If somebody is demanding damages from you:

Inform the injured person that you are insured and give them the contact details for the assistance service. Do not sign anything you do not understand well, document the damage and its circumstances, get a police report, photo or video documentation and any witnesses (contact details, written statement or video recording of statement). Inform the assistance service and give a truthful description of what happened.

DUTIES AND CONSEQUENCES OF THEIR BREACH

The insurance terms and conditions contain certain duties. In the event of a breach of these terms and conditions by the policyholder, the insuree or the beneficiary, the insurer is entitled to reduce the insurance benefits in proportion to the effect of the breach on the extent of the insurer’s duty to provide benefits.

As the insuree, you are obliged to provide truthful information when taking out the insurance, including filling out a medical questionnaire, do everything possible to prevent an insurance event and, if it occurs, submit all documents necessary for the investigation of the insurance event, including medical documentation, undergo a medical examination by a designated doctor and comply with the treatment regimen.

LAW, FORM OF ACTS, COMPLAINTS

The insurance contract and the relations based on it are governed by the legal order of the Czech Republic and any disputes arising from it will be settled before the courts of the Czech Republic. Communication regarding the insurance will be in Czech. The insurance terms and conditions and some other documents are translated into English, Ukrainian and Russian, with the Czech language version being decisive. Acts, notices and communications may be made in writing or electronically.

In case of complaints, please contact us by e-mail, by letter, by telephone or in person at a branch using the aforementioned contact details. We will respond to a complaint within 30 days of receipt.

You can also take advantage of the option of out-of-court resolution of consumer disputes through independent bodies and contact the Czech National Bank, the authority responsible for supervision of the insurer's activities, registered office: Na Příkopě 28, 115 03 Prague 1, www.cnb.cz, or the Czech Trade Inspection Authority, Štěpánská 44, 110 00 Prague 1, www.coi.cz, or the Office of the Ombudsman of the Czech Association of Insurance Companies, Elišky Krásnohorské 135/7, 110 00 Prague 1, www.ombudsmancap.cz. If the insurance contract was concluded online, a consumer dispute can be resolved through the electronic platform operated by the European Commission on <https://webgate.ec.europa.eu/odr/>.

PERSONAL DATA PROCESSING

This is described in detail in the document "Information on Personal Data Processing" on the insurer's website.

This Pre-contractual Information is valid from 1 January 2024