INTERNATIONAL HEALTH INSURANCE

Insurance Product Information Document

Insurance company: Vzajemna zdravstvena zavarovalnica, d.v.z., Slovenia Product: Tujina Welcome

The purpose of this document is to provide a summary of information about a specific insurance product and has not been adapted to your specific needs and requirements. Complete preliminary and contractual information about the insurance product is available in other documents (insurance terms and conditions, insurance policy, offer or other documents that you received prior to or after taking out insurance). Read the all of the documentation carefully so that you have complete information about the insurance.

WHAT IS THIS TYPE OF INSURANCE?

This is health insurance intended for the persons (foreigners) coming to Slovenia and provides the coverage of healthcare and related services on the territory of Slovenia. The scope of coverage depends on the selected insurance (narrow scope - covered costs of emergency healthcare and related services; broad scope - in addition to emergency services, the costs of the necessary healthcare, preventive and other services are also covered, subject to passing a medical exam). If so agreed, the insurance can also be validated for other European countries. The insurance comprises medical assistance, i.e. if you become ill or are injured, and you have the option to select between individual or group insurance.

WHAT IS INSURED?

Assistance services (24 hour per day, 7 days per week):

- organisation of emergency medical assistance and urgent medical transportations;
- provision of information for you and your close relatives;
- availability to answer your phone calls with the option of telephone cost reimbursement.

Urgent costs of treatment:

- costs of urgent medical care;
- costs of treatment until return to the home country;
- costs of urgent dental services;
- costs of transportation to the nearest clinic or hospital and back to the place of accommodation abroad.
- If so agreed when taking out the insurance, the insurance coverage can also cover the costs of treatment of acute deterioration of chronic illnesses.
 Transportation costs:
- costs of transportation to the place of residence or a hospital in the home country;
- costs of transporting mortal remains to the home country;
- cost of transportation due to early return to the home country in the event of a severe illness or death of a close relative.
- In the event of your hospitalisation or death, we also cover:
- ✓ the cost of transportation for the arrival of a family member,
- the cost of transportation for the person remaining with you in the case of hospitalisation,
- the cost of transportation for the arrival of your family member if you are abroad alone and hospitalised for more than seven days and unable to return home,
- ✓ the costs of the return of your child who is younger than 18 years.

Other costs:

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- In the case of hospitalisation, the costs of accommodation for a family member or accommodation for a person who remains in the company of the insured, or accommodation for the insured if they are unable to return to the home country as initially planned.
- The costs of search and rescue as a result of unforeseen illness or injury in areas that are difficult to access.
- The costs of legal services, i.e. the cost of organising legal assistance (in case legal proceedings were initiated against you in accordance with the laws of the country in which you are staying to establish criminal or civil liability), the costs of a translator via telephone and a temporary security deposit.

The insurance with broad scope coverage, in addition to the above, also covers the following:

- medical and related services that need to be provided according to a doctor's opinion, including examination and urgent medical treatment during pregnancy and delivery;
- the costs of necessary dental services;
- the costs of preventive outpatient medical examinations, preventive vaccinations and preventive programmes for the early detection of cancer;
- the costs of prescribed physiotherapy or health resort;
- the costs of prescribed medical devices and corrective lenses.



WHAT IS NOT INSURED?

- * treatment that is not medically urgent;
- transportation due to minor medical problems which could be treated at the place of occurrence;

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- illnesses or injuries that existed prior to departure abroad or arrival to Slovenia and treatment of chronic diseases; costs of intentional termination of pregnancy;
- treatment of acute deterioration of chronic illnesses, unless such coverage is specified when the insurance is taken out;
- engagement in all professional sports activities, high risk and extreme sports activities, at professional or recreational level, unless agreed otherwise;
- unless you select broad scope coverage, the insurance does not cover the costs of pregnancy, regular examinations during pregnancy, complications, delivery, except when saving the life of the child or the mother;
- acts while under the influence of alcohol, drugs or psychoactive substances;
- an insurance case that originates from the use of firearms or performing particularly dangerous tasks;
- accidents or illnesses in performing more risky tasks for which no appropriate higher premium had been paid;
- in the framework of dental services, the costs of dental covers, bridges, crowns, implants and
- prosthetic elements are not covered;
- other exclusions are specified in the General Terms and Conditions.

ARE THERE ANY RESTRICTIONS ON COVER?

- Insurance must be taken out prior to the departure abroad or arrival to Slovenia. Subject to agreement, you can also take out the insurance when already abroad or in Slovenia; however, in such case, insurance shall only be effective after the expiry of three days from the day it has been taken out.
- I If you decide to take out insurance with broad scope coverage, the costs related to pregnancy and delivery are limited as follows:
 - I if the pregnancy did not exist upon taking out the insurance, delivery shall only be covered after the expiry of the agreed waiting period, i.e. 6 months from the date of insurance commencement;
- I If the pregnancy existed upon taking out the insurance: examinations and urgent treatment during pregnancy are covered, including examinations due to acute problems during pregnancy, treatment as a result of a spontaneous abortion and delivery by the end of the 36th week of pregnancy (early delivery), if such examinations and treatment are required and the need for them did not exist upon taking out the insurance, in spite of the pregnancy.
- I The costs of delivery are only covered if the delivery is performed on the territory of Slovenia.
- I Insurance coverage does not apply in the country in which you have registered official permanent residence.



WHERE AM I COVERED?

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 Insurance coverage shall apply to the territory indicated on the insurance contract. You can select insurance that only applies to the territory of Slovenia or Slovenia and extended Europe.

WHAT ARE MY OBLIGATIONS?

- To provide complete and correct data.
- . If you have insured another person, the insured must be immediately informed of the termination of the insurance contract.
- If you fall seriously ill or sustain an injury or require hospitalisation or transport to your country of residence, you have to inform our assistance centre immediately or as soon as possible.
- Our preliminary approval, obtained by calling our assistance centre, is required for the coverage of costs arising from necessary medical services, acute conditions of chronic illness and physiotherapy or health resort in the case of rehabilitation.
- Upon the occurrence of an insured event, you are as a rule obliged to pay the cost of medical and other services to the service provider and then claim compensation of the insurance amount from the insurance company.
- You have to submit an insurance claim no later than within three (3) months of returning to your country of residence.
- You must inform us of any change of personal data and other circumstances relevant to the insurance.

WHEN AND HOW DO I PAY?

The premium is paid upon taking out the insurance and prior to the beginning of travel, unless specified otherwise, and in accordance with the method of payment agreed with the insurance company.

WHEN DOES THE COVER START AND END?

Insurance coverage shall start on the day stated as the start date on the insurance contract, provided that you have paid the premium by that time. Insurance coverage shall end on the day stated as the termination date on the insurance contract.

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HOW DO I CANCEL THE CONTRACT?

Insurance can be terminated in exceptional cases. If the insurance is terminated prior to the beginning of insurance coverage, we are entitled to retain 20% of the premium; if the insurance is terminated after the beginning of insurance coverage, we are entitled to retain the premium for the entire duration. The notice of termination of the insurance contract must be submitted in writing.