

Health Insurance

Information document for the insurance product

Company: DZI – Life Insurance JSC

Product: Medical Insurance “Health”



Country: Republic of Bulgaria

This information document summarizes the most important terms and conditions of the product. It does not reflect the individual terms of your insurance contract. The full pre-contractual and contractual information for the medical insurance “Health” is contained and provided with your insurance contract (Policy, General Terms and Conditions, Proposal - Questionnaire).

What is this type of insurance?

The medical insurance "Health" is a voluntary insurance designed for individuals and legal entities. The insurance ensures treatment in case of accident or illness provided by qualified medical care providers, in outpatient (ambulatory) and inpatient (hospital) conditions.



What is covered by the insurance?

- ✓ Performance of specifically determined prophylactic examinations and tests;
- ✓ Examinations and tests in medical centres for outpatient medical care, specifically determined by the insurer;
 - ✓ You will be able to perform examinations by specialist doctors or persons of academic rank from the specialties specified in the policy;
 - ✓ You will be able to use clinical-laboratory, clinical-instrumental testing and imaging diagnostics;
- ✓ Examinations and tests in case of symptoms of Covid 19
- ✓ Examinations and tests after conducted treatment of Covid 19
- ✓ Treatment in inpatient medical institutions.
- ✓ Telemedicine/Second Medical Opinion Package - covers the confirmation or modification of an initial diagnosis and treatment recommendations made by physicians in US hospitals. 24 life-threatening medical conditions are covered.

Types of packages:

- ✓ **"Silver" Package** - includes payment for medical services in outpatient conditions up to BGN 1000 and hospital treatment up to BGN 3000.
- ✓ **"Gold" Package** - includes payment for medical services in outpatient conditions up to BGN 2000 and hospital treatment up to BGN 5000.
- ✓ **"Premium" Package** - includes payment for medical services in outpatient conditions up to BGN 10 000 and hospital treatment up to BGN 10 000.



What is not covered by the insurance?

- ✗ War, military action, civil unrest, radioactive incidents, acts of terrorism, earthquakes, epidemics of local or national scale (excluding influenza epidemics), declared by the Ministry of Health (MH) and/or other competent state institutions.
- ✗ All examinations and tests for diseases declared a pandemic by the World Health Organization, as well as their outpatient or inpatient treatment.
- ✗ Amounts for Emergency Medical Care;
- ✗ Amounts for treatment when using: alcohol, drugs, doping and other psychotropic substances and the damage to health caused thereby (including accidents, road traffic accidents, trauma and injuries);
- ✗ Chronic and preceding diseases;
- ✗ Mental illness, congenital anomalies and diseases;
- ✗ Examinations, tests and treatment of: Sexual dysfunction, sterility and assisted reproduction;
- ✗ Tests and treatment of sexually transmitted diseases and benign skin formations;
- ✗ PCR tests to prove Covid 19
- ✗ Rapid antigen test - to prove infection with Covid 19
- ✗ IgG and IgM antibody test - to prove recovery from Covid 19
- ✗ Cosmetic and plastic corrections or other cosmetic services;
- ✗ Prophylactic examinations without the presence of specific complaints or symptoms of a disease;
- ✗ All non-approved methods of testing, diagnostics and treatment according to medical standards;
- ✗ Immunizations and vaccinations;
- ✗ Pregnancy, childbirth and the complications caused by them;
- ✗ Acupuncture, iris diagnostics, balneotherapy, kinesitherapy and massages, rehabilitation, spa procedures;
- ✗ Expenses for medical products used for laparoscopic and arthroscopic operations and artificial joints;
- ✗ Costs for intraocular lenses;
- ✗ Prepaid health care packages in medical institutions;
- ✗ Examinations and tests for the issuance of medical certificates;
- ✗ Administrative fees;
- ✗ Prepaid healthcare packages in outpatient and inpatient medical care institutions.
- ✗ Preparation or participation in organized sports events and practicing of high-risk activities;
- ✗ Other exclusions described in detail in the General Terms and Conditions of the insurance.



Are there any coverage limitations?

- ! Treatment costs are covered up to the amount of the limits specified in the insurance policy.
- ! Persons over the age of 62 years are not insured;
- ! Diseases occurring before the conclusion of the insurance are not covered;
- ! Diseases occurring during the period of postponement after the conclusion of the policy are not covered.
- ! During the first year, by the end of the first month after the conclusion of the insurance, the prophylactic examinations indicated in the insurance must be performed;



Where am I covered by the insurance?

- ✓ Coverage is provided for outpatient and inpatient care for accidents and diseases occurring on the territory of the Republic of Bulgaria.



What are my obligations?

- To reply to all questions we have asked in the Proposal-Questionnaires and the Personal Health Declaration by providing us with accurate, correct and complete information;
- To notify us of any change in the declared circumstances;
- To pay the insurance premium under the contract within the agreed term;
- To observe the order and the way of using the health services, specified in the General Terms and Conditions;
- To notify us within the prescribed time limits and procedures in case of occurrence of an insured event;
- To provide the necessary documents when making a claim.



When and how do I pay?

- The insurance premium is paid by bank transfer;
- The price of the insurance is paid as a single payment or as a deferred payment in installments;



When does the coverage begin and end?

- Accident coverage starts on the day and time specified as commencement in your policy;
- Illness coverage starts at 00:00 a.m. on the date following one month from the commencement of the insurance contract, provided that the insurance premium has been paid within the agreed period and the mandatory prophylactic examinations described in the contract have been performed;
- The insurance coverage ends on the day and time specified as end in your policy;
- In the event of non-payment or partial payment of a deferred installment by the maturity date recorded in the policy, the policy coverage is terminated at 24:00 p.m. on the 30th day from the maturity date or within another time limit, explicitly recorded in the policy.



When can I terminate the contract?

- You may terminate your insurance at any time by sending a one-month written notice to us;

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