

Medical Insurance

Information document for the insurance product

Company: DZI – Life Insurance JSC

Product: TREATMENT WITHOUT BORDERS



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 "Treatment without borders" Insurance is contained and provided with your insurance contract (Policy, General Terms and Conditions, Questionnaire).

What is this type of insurance?

The medical insurance "Treatment without borders" is a voluntary insurance designed for individuals and legal entities. The insurance provides a second medical opinion and treatments abroad when diagnosing a malignant neoplasm or the medical procedures described in the document.



What is covered by the insurance?

The medical insurance "Treatment without borders" ensures financial provision of the healthcare services used during the period of the contract in connection with the diseases and medical procedures covered by the insurance.

Covered diseases and medical procedures:

- ✓ Treatment of Cancer
- ✓ Bypass of the coronary artery (myocardial revascularization)
- ✓ Replacement or reconstruction of a heart valve
- ✓ Inter-cranial and specific spinal cord surgery
- ✓ Live-donor organ Transplant
- ✓ Bone marrow transplantation

Services covered prior to receiving Treatment Abroad:

- ✓ Second medical opinion service

Medical expenses covered during treatment abroad:

- ✓ Medical expenses
- ✓ Costs for accommodation during the hospital stay
- ✓ Expenses for medicines;
- ✓ Services rendered to a living donor

Non-medical expenses covered during treatment abroad:

- ✓ Travel expenses;
- ✓ Expenses for the accommodation, outside the Republic of Bulgaria, of the Insured, travelling companion (or two companions, when the Insured receiving treatment is a minor)
- ✓ Daily hospitalization indemnity
- ✓ Repatriation expenses

Medical expenses covered after returning from treatment abroad:

- ✓ Medication expenses after returning from treatment abroad

Follow up care after returning from treatment abroad



What is not covered by the insurance?

- ✗ Expenses derived from all Diseases or medical procedures not specifically contemplated under general terms;
- ✗ Treatment for Diseases which were diagnosed treated or which showed related medically documented symptoms or findings (signs) during the Exclusion Period.
- ✗ Medical procedures required due to the presence of AIDS, HIV or any condition arising from them;
- ✗ Any service that is not Medically Necessary for the treatment of the underlying disease;
- ✗ Expenses treatment or service for treatment, for which the best treatment is a transplant covered by the Policy;
- ✗ Treatment for long-term side effects, relief of chronic symptoms.
- ✗ All costs incurred in connection anywhere in the world when the Insured cannot be considered as a resident in the Republic of Bulgaria and has no permanent address in the Republic of Bulgaria;
- ✗ All costs occurred in the exclusion period;
- ✗ All expenses incurred in a hospital other than the authorized and specified in the Preliminary Medical Certificate;
- ✗ Expenses incurred in connection with social services, home health care or services provided in rehabilitation centers and the like centers;
- ✗ Costs incurred for the purchase of any kind of Prosthesis or orthopedic appliance and other similar equipment.
- ✗ Expenses for the purchase or rental of wheel chairs, special beds, air conditioners or other similar equipment;
- ✗ Charges made for Alternative Medicine, such as homeopathic medicines, even when specifically prescribed by a Doctor.
- ✗ Fees for interpreters, telephone and other expenses not of a medical nature;
- ✗ Expenses incurred by the Insured or his / her relatives or companions except those explicitly covered;
- ✗ Excluded diseases and medical procedures;
 - Any tumor in the presence of AIDS
 - Any non-melanoma skin cancer
 - Any coronary disease which is treated by techniques other than of bypass coronary arteries.
 - Any transplantation when required by alcoholic liver disease; transplantation; all transplants from a dead donor, any organ transplantation that involves treatment associated with stem cell treatment..
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- ✗ Other exclusions described in detail in the General Terms and Conditions of the insurance



Are there any coverage restrictions?

- ! Persons over the age of 64 years are not insured;
- ! Subject to insurance are healthy persons;
- ! Diseases occurring during the exclusion period after the conclusion of the policy are not covered.



Where am I covered by the insurance?

- ✓ The medical insurance "Treatment without borders" covers expenses for treatment incurred outside the territory of the Republic of Bulgaria.



What are my obligations?

- To reply to all questions we have posed in the Proposal-Questionnaire by providing us with accurate, correct and complete information;
- To inform us of any change in the declared circumstances;
- To pay the insurance premium under the contract within the agreed term;
- 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;
- For policies concluded for an indefinite period – the premium is determined and is due for each insurance period.



When does the coverage begin and end?

- Coverage for diseases and procedures under "Treatment without borders" Insurance starts from 00:00 a.m. on the day of expiry of:
 - 6 months from the date specified as start of the insurance for individual and family contracts;
 - 3 months from the date specified as start of the insurance for group contracts;For new persons included in a group contract, the liability of the Insurer begins after expiry of 3 months from the date specified as start of the next insurance month;
- The insurance coverage ends on the day the insured person reaches the age of 85 years;
- 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 30 day from the due date.



When can I terminate the contract?

- You may terminate your insurance at any time by sending a one-month written notice to us;
- For insurances concluded for an indefinite period – you may terminate the insurance at the end of the current insurance period by a one-month written notice to us. Termination takes effect upon expiry of the insurance period.

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