

Health insurance



A document containing information about the insurance product

Enterprise: Towarzystwo Ubezpieczeń INTER Polska S.A.
with its registered office in Poland, licence number
of the Minister of Finance BS/3770/91 (hereinafter: INTER
Polska)

Product: INTER Vision

The full pre-contractual information and contractual information concerning this insurance product can be found in the General Terms and Conditions of the Health Insurance INTER VISION approved by the Resolution No. 40/2009 of the INTER Polska Management Board of 24/09/2009, amended by the Resolution No. 61/2012 of 29/11/2012 and amended by the Resolution Np. 35/2013 of 23/07/2013, a List of Healthcare Services Implemented under the Health Insurance INTER VISION, Special Insurance Conditions of INTER VISION Assistance, Special Health Insurance Conditions of INTER VISION BASIC, Special Health Insurance Conditions of INTER VISION SILVER, Special Health Insurance Conditions of INTER VISION GOLD, Special Health Insurance Conditions of INTER VISION DIAMOND together with Annex 1 and 2 (hereinafter: GTC) and in the document confirming the conclusion of the insurance contract (policy).

What kind of insurance is this?

INTER VISION insurance is a health insurance that enables the use of medical services in the INTER Polska contract institutions in a non-cash form or in any medical facilities in the cash form (reimbursement to the amount specified in the List of Healthcare Services).

Sickness insurance, Section II, Group 2 in accordance with the attachment to the Act of 11 September 2015 on insurance and reinsurance activity.



What is the subject of the insurance?

- ✓ The subject of insurance are the costs of healthcare services provided to the Insured.
- ✓ Healthcare is a medically necessary procedure performed by the Insured during treatment or prevention.
- ✓ The scope of insurance depends on the insurance option chosen by the Insured.
- ✓ As part of the INTER VISION health insurance, the Insured is offered:
 - ✓ four insurance options: INTER VISION Basic, INTER VISION Silver, INTER VISION Gold, INTER VISION Diamond,
 - ✓ INTER VISION Assistance insurance,
 - ✓ additional insurance (freely chosen by the Policyholder):
 - ✓ Occupational medicine,
 - ✓ Consequences of Accidents,
 - ✓ Surgeries,
 - ✓ Second Medical Opinion (Best Doctors),
 - ✓ Rehabilitation,
 - ✓ Costs of Treatment Abroad,
 - ✓ Prosthetic Treatments in the Aftermath of an Unfortunate Incident,
 - ✓ Daily Hospital Benefit,
 - ✓ Serious Illness,
 - ✓ Dentistry.
- ✓ Limits of benefits for individual insurance events in the assistance insurance contract are specified in the Special Insurance Conditions of INTER VISION Assistance.
- ✓ Conclusion of additional insurance and assistance insurance is not possible without concluding the INTER VISION insurance contract at the same time.
- ✓ You can conclude a health insurance contract in one of the selected insurance options separately or together with any of the other additional insurance contracts listed above.



What is not covered by the insurance?

- x The cost of healthcare services arising, among others, in case of:
 - x HIV infection,
 - x alcohol-related disease,
 - x treatment in the field of aesthetic medicine, cosmetics,
 - x treatment in the field of plastic surgery,
 - x mental illnesses.
- x INTER Polska does not cover:
 - x costs of healthcare services provided as a part of a stationary treatment, if the stay in the hospital lasted longer than 24 hours,
 - x health services provided in life-threatening situations requiring emergency treatment, falling within the scope of emergency medical assistance provided by ambulance services (resuscitation ambulances, accident ambulances).



What are the limitations of the insurance protection?

- ! INTER Polska does not cover the costs of healthcare services and does not pay other benefits in the case of diseases, including their consequences, which have arisen, among others:
 - ! as a result of practicing competitive or professional sports,
 - ! as a result of practicing high-risk sports,
 - ! as a result of driving the land, air or water vehicle without required authorizations by the Insured, or in violation of the applicable provisions, or driving vehicles not admitted to traffic in accordance with applicable law.
 - ! as a result of failure by the Insured to make every effort to recover, in particular if the Insured has not complied with and has not followed all recommendations of doctors.
- ! INTER Polska does not cover:
 - ! the cost of healthcare services that the Policy Holder/Insured has extorted or tried to extort,
 - ! diseases whose symptoms occurred or were treated before the conclusion of the insurance contract, if INTER Polska was not notified about them before the conclusion of the insurance contract and INTER Polska did explicitly ask about them,
 - ! services going beyond the ones specified in the List of Healthcare Services.
- ! INTER Polska is not responsible for the consequences of insurance events, among others, if:
 - ! the need to provide assistance service to the Insured is not directly or indirectly related to an accident or sudden illness of the Insured,
 - ! they are the result of events resulting from the Insured's participation in the competition as a driver, driver's assistant or passenger of any motor vehicles, including all kinds of test drives, they are a consequence of mental illness, post-traumatic encephalopathy (post-traumatic brain injury), neuroses.

- ! In an individual insurance, two grace periods apply additionally - temporary limitations of INTER Polska's liability:
 - ! general grace period - for all benefits is 3 months and it is not applied in the case of the insurer paying a one-off premium defined in the tariff and paid together with the first installment of the premium,
 - ! special grace period - 8 months for services provided in connection with pregnancy, delivery, dental treatment, orthodontic treatment or prosthetic treatment.



Where is the insurance valid?

- ✓ The insurance is valid on the territory of Poland.



What are the Insured's duties?

Before concluding the contract, the Insured is obliged:

- to provide INTER Polska with all known circumstances about which INTER Polska has asked in the application form or before concluding the insurance contract in other documents.

During the term of the insurance contract, the Insured is obliged:

- to notify INTER Polska of any change in circumstances, about which the insured informed in the application or in other documents,
- to use the insurance card only for its intended purpose and not to give any access to it to third parties,
- if it is necessary, at the request of INTER Polska, to undergo examinations (with the exception of genetic tests) at the medicine doctor designated by INTER Polska at the expense of INTER Polska to assess the risk, determine the right to the benefit and the amount of this benefit.

In the case of making use of services, the Insured is obliged:

- to present each time in the contractual facilities an insurance card with an identity card,
- in order to receive reimbursement of incurred costs of healthcare services performed outside the network of contractual facilities, submit to INTER Polska a claim form with original invoices/receipts and other documents necessary to make use of the benefit. A claim can also be sent online,
- to provide INTER Polska with additional information necessary to determine the circumstances related to the insurance event.

When the Insured is also the Policyholder it is obliged:

- to pay the insurance premium,
- to inform INTER Polska about the change of address,
- in the group insurance, the Policyholder is obliged to provide INTER Polska with a list of persons joining and withdrawing from the insurance as well as declarations and other documents indicated by INTER Polska, no later than on the 20th day of the month preceding the next monthly insurance period



How and when should premiums be paid?

The premiums shall be paid by the Policyholder.

The premium is paid in advance up to the last day of the calendar month preceding the period for which the premium is due.

The premium may be paid annually or in monthly installments by bank transfer to the bank account indicated by INTER Polska in the policy.



When does the insurance cover begin and end?

- The insurance contract is concluded for **one insurance year** and it is extended for the next insurance year, unless it is terminated in writing at the latest 30 days before the anniversary of the policy.
- The insurance coverage in relation to the Insured begins from the date of joining the insurance, always on the first day of the month.
- The insurance coverage in respect of the Insured expires:
 - in the event of termination of or withdrawal from the insurance contract,
 - on the date of the Insured's death,
 - on the last day of the insurance year in which the Insured's 65th birthday falls,
 - in the group insurance - on the last day of the month in which the Policyholder indicated the Insured as a person withdrawing from the insurance.
- The insurance coverage ends - also with regard to insurance events that did not end during the insurance period - with the date of termination of the insurance contract.



How to terminate the contract?

By submitting an appropriate statement to INTER Polska **in writing** within the following deadlines:

- if there is no will to continue the contract for the next insurance year - at the latest 30 days before the anniversary of the policy,
- in the event of withdrawal from the contract - if the insurance contract was concluded for a period longer than 6 months - within 30 days (a natural person) or 7 days (entrepreneur) from the date of its conclusion,
- if the Insured in group insurance wants to withdraw from the group insurance - within 30 days from the date of accession,
- in the event that INTER Polska makes amendments to the GTC or the amount of insurance premiums - within 30 days from the date of receipt of information about changes, with effect from the day of the changes being in force,
- in the case of disclosure of a circumstance that entails a significant change in the probability of an insurance event, each party may demand an appropriate change in the amount of the premium, starting from the moment in which the circumstance occurred, but not earlier than from the beginning of the current insurance period. If such a request is made, the other party may terminate the contract with immediate effect within 14 days.