

Comprehensive health insurance for foreigners

SLAVIA
POJIŠTOVNA

Insurance Product Information Document

Company: Slavia pojišťovna a.s., Czech Republic

Product: Comprehensive health insurance for foreigners

Complete pre-contractual and contractual product information is provided in the General Insurance Conditions VPP KZPC 11/2023.

What kind of insurance is this?

Comprehensive health insurance for foreigners is private and non-life insurance.



What is the subject of insurance?

- ✓ Comprehensive health insurance for foreigners in the scope of extended health care beyond necessary and urgent health care.
- ✓ Costs of comprehensive health care and transportation of the insured.
- ✓ Repatriation or transport of bodily remains to the home country.
- ✓ Costs of dental care of the insured.
- ✓ Costs of outpatient medicines prescribed to the insured.
- ✓ Costs for all preventive examinations and vaccinations of children according to the Czech vaccination calendar.
- ✓ Costs of necessary and urgent health care outside the Czech Republic (Schengen zone).
- ✓ Associated assistance services.



What the insurance does not cover?

- ✗ Events whose obvious symptoms occurred before and after the agreed insurance.
- ✗ Events that occurred before the payment of insurance premiums.
- ✗ Health care that is not standardly covered by public health insurance.
- ✗ Events and damages that have arisen outside the territorial validity and type of insurance.
- ✗ Events and damages caused by intentional fault, fault under the influence of narcotics and psychotropic substances or alcohol, unless it is an injury.
- ✗ Events described in the Article 7, VPP KZPC 11/2023.



Are there any limitations in insurance coverage?

- ! Insurance can be arranged for maximum of 5 years.
- ! There is limit of insurance coverage for health care and transport up to CZK 10,000,000 (€ 400,000) per insured event.
- ! There is limit of insurance coverage for dental care up to CZK 15,000.
- ! There is limit of insurance coverage for outpatient medicines up to CZK 10,000.



Where does my insurance cover apply to me?

- ✓ In the Czech Republic in the scope of comprehensive health care.
- ✓ In the Schengen zone, with the exception of the Czech Republic, the insurance covers a tourist stay, to the extent of necessary and urgent care, while the maximum length of stay must not exceed 30 days.



What are my responsibilities?

- In the event of a loss event, always and without delay, if the health condition of the insured allows it, contact the assistant service or the insurer directly and follow their instructions.
- Pay premiums to the insurer.
- To answer truthfully, completely and without undue delay all written questions of the insurer concerning the agreed insurance, especially the health questionnaire.
- At any time during the term of the contract to notify the insurer in writing of a change in the data specified in the insurance contract.
- The insurer and the insured are obliged to act in such a way that there is no damage to life, health, property or other values that could be the subject of the insurance interest, and they must not tolerate similar actions of third parties.



When and how should I make payments?

The payment of the premium for the entire insurance period is a one-off payment, due on the day of concluding the insurance contract or no later than the day specified as the due date. Premium can be paid in cash, by credit card, bank transfer or money order to the insurer or the person authorized to take over the premium.



When does the insurance coverage begin and end?

The insurance coverage starts at 00:00 on the day agreed in the insurance contract as the date of commencement of the insurance and ends at 24:00 on the day specified as the end of the insurance.



How can I terminate the contract?

The insurance contract can be terminated by written notice within 2 month of the conclusion of the contract with a notice period of 8 days.

The insurance contract can be terminated within 3 months from the date of the insured event with 1 month's notice.

In the event that no insurance is taken out, the Insurer shall return the premium paid to the insured, minus the costs associated with concluding the insurance agreement and its administration, amounting to 20% of the unused premium.

In the event that the insurance expires after the beginning of the insurance and no insured event occurred during the insurance period, the Insurer shall return the unused premium to the insured reduced by 20% of the costs of the unused premium associated with concluding the insurance agreement and its administration.