

UniMed 2.0. Health Insurance Insurance Product Information Document

UNION Vienna Insurance Group Biztosító Zrt.

Registered office: 1082 Budapest, Baross u. 1.

Company registration number: 01-10-041566

Tax No.: 17781293-5-44

1. Insured

Students of the University between the ages of 18 and 65.

2. The policy period

The contract is concluded for 6 semesters.

Period: 2020/2021 semester II - 2023/2024. semester I

3. Inception date

The starting date of the insurance contract shall be the first day of the month following signature of the insurance offer. The inception date shall be the same day, provided that the first insurance premium has been paid.

4. The insured event and services

- a) outpatient primary and specialist care
- b) laboratory diagnostic procedure
- c) medical call center 7/24
- d) organization of inpatient care
- e) cost of medications and medical accessories
- f) patient transpont
- g) repatriation

5. Health care services provided by the insurer

In accordance with the insurance contract, the insurer determines annual coverage limit for the risks specified in the contract; the level of the limit is HUF 1 000 000 / semester.

Benefits* Total limit/student/semester: HUF 1.000.000	Deductible
Outpatient primary care (english-speaking GP service)	no
Outpatient specialist care (including outpatient surgeries and the laboratory and diagnostic tests required for medical treatment)	no
Medical care resulting from urgent needs (in the framework of outpatient care)	no
Inpatient care – including same-day surgeries	no
Patient transport	no
Costs of medicines	no
Costs of medical equipment and bandages	no
Repatriation	no

Sublimits:

- costs of medicines: HUF 50,000 / semester
- costs of medical equipment and bandages: HUF 50,000 / semester
- dental and oral treatments requiring immadiate care: HUF 200,000 / semester
- repatriation: HUF 750,000 / semester

6. Exclusions

6.1. The insurance does not cover medical and health services or events directly related to any of the following:

- the insured's illness or medical condition which is proven to have existed prior to the effective date of the insurance coverage, or which had been diagnosed prior to the effective date of the insurance coverage, or which required treatment during this time period, or any permanent physical or mental impairment of the insured that had been diagnosed prior to the effective date of the insurance coverage,

- medical care related to pregnancy (confirmation of pregnancy, antenatal care) or child birth, and associated costs incurred,

- abortion of pregnancy (unless termination of the pregnancy was necessary to preserve the life or health of the mother, or if termination of the pregnancy was performed in a case where pregnancy was the result of a criminal act),

- surgeries related exclusively to treating infertility, and medical treatments related to any form of artificial reproductive techniques,

- sterilization surgeries and consequences

- sex reassignment surgeries,

- treatments and surgeries for aesthetic (cosmetic) purposes, and their consequences

- vision correction surgeries,

- dioptric glasses/sunglasses, contact lenses and their accessories, and the costs of the medical examination required for the above,

- hearing aid,

- dental treatments, with the exception of cases requiring immediate care (emergency cases of root canal treatments, treatment of abscess, dental extractions) and accident consequences,

- medical care in relation to HIV infection,

- tests and treatments performed in relation to the consumption of alcohol, narcotic drugs or other addictions,

- convenience (V.I.P.) health care services (e.g. single bedroom),

- acupuncture, acupressure treatment, oriental medicine, alternative and naturopathic medicine,

- purchase of vaccine for immunization shots, reimbursement of costs,

- treatment received in sanatoriums or in assisted accommodation,

- rehabilitation or nursing of chronic illnesses (especially geriatrics, hospice care, special needs education, speech therapy, physicotherapy, physical therapy, bath therapy, weight loss therapy, infusion therapy to improve blood flow, pain management infusion therapy), excluding treatments which are for the purpose of diagnosing chronic illnesses, initiation of a therapy, the prevention of significant deterioration of acute conditions,

- medical care that is not for the purpose of diagnosis of illness for the insured, or for the prevention of deteriorating condition and rehabilitation of the insured's health, especially screening tests not ordered or attended in relation to this insurance, or a parent having to stay at a hospital with his/her child, nor is the insured's stay at a hospital for the purpose of nursing a parent,

- treatment by a person who does not have medical certification and permit to practice medicine, as well as medical care or other health care treatment made necessary as a result of treatments performed by such person.

6.2. Furthermore, the insurance does not cover events caused in whole or in part by:

- ionizing radiation,
- nuclear energy,
- infection by HIV,

- war, combat operations, hostile actions of foreign forces, civil disorders, coup d'état or attempted coup d'état, riots, civil war, revolution, rebellion, demonstrations, processions, labor acts, terrorist acts, workplace disorder, border conflicts, insurrection.

- **6.3.** For the purposes of these conditions warlike events shall mean war (whether war be declared or not), border conflicts, insurrection, revolution, riots, coup d'état or attempted coup d'état, civil war.
- **6.4.** Notwithstanding the provisions set out in Clause 6.2.d., the insurance covers the damages incurred of the insured state of health which results from his/her active participation in demonstrations, processions, or strike actions announced in advance and organized in accordance with the provisions of effective Hungarian regulations, provided that the insured has fully complied with his/her obligation to prevent and mitigate loss or damage.
- **6.5.** The insurance does not cover events that occured during the duration of the coverage, if:

- the event was the result of the insured's regular alcohol consumption, recreational drug use, or there was a direct connection between the event and the abuse of narcotic substances or medical drugs, unless these latter were prescribed by a physician, and were taken in the recommended manner

- the insured was verifiably alcohol intoxicated or under the influence of drugs, stupefying agents or medication at the time of the event, and this fact contributed to the occurrence of the event. If a blood alcohol test was administered, the person is legally intoxicated if his/her blood alcohol concentration exceeds 1.5% – or 0.8% while driving a motor vehicle,

- the insured was driving a motor vehicle without a valid driver's license or vehicle registration certificate as well at the same time also committed other traffic violations, and the event resulted directly from these actions

- the insured was driving a motor vehicle while under the influence of alcohol when the event occurred and at the same time also committed other traffic violations, and the event resulted directly from these actions.

6.6. The insurance does not cover events which may have been caused by the insured's engagement in sports activities with increased risks listed herein:

scuba diving to a depth of 40 metres, singlehanded and open sea sailing, white water rafting, riverboarding (hydrospeed), canyoning, surfing, mountaineering and rock-climbing on routes graded 5 or higher, high-mountain expeditions, caving and cave expeditions, bungee jumping, automotor sports (e.g. auto-crash, go-kart, motocross, motorboat sports, motorcycle sports,

rally, ability competitions by car), quad biking, private flying/sports flying/aviation sports (e.g. paragliding, ballooning, motor sail plane, hang-gliding and ultra-light flying, hot-air ballooning, parachute jumping, free plane flying, stunt flying, base jumping).

6.7. The insurance does not cover events which may have been directly caused by the insured's engagement in or pursue of the following hazardous activities or occupations:

stuntmen, circus artists, equilibrists, test pilots, flight test pilots, parachute jumpers, jet plane crew in the army, bodyguards, commando staff, foreign legionnaires, peacekeepers, secret agents, armed guards, armored car personnel, specialists or officers serving in the army who are exposed to high levels of risks during their activities (e.g. bomb experts, divers).

6.8. Release from benefit payment

The insurance company will be released from the benefit payment if it can prove that the event which resulted in the insured event was caused unlawfully and willfully or unlawfully and in gross negligence by:

- the Insured;or
- a relative living in the same household with him/her.
- 6.9. The insured shall be acting in gross negligence in particular if:

- insured was driving a motor vehicle without a valid vehicle registration certificate or the insured did not have a valid driver's license for driving such vehicle, and this fact contributed to the occurrence of the insured event,

- insured has committed at least two traffic offenses at the time of the event which led to the insured event, and as such the event which led to the insured event resulted directly from these actions.

6.10. If the policyholder or the insured infringe their obligation to disclose the required information or to report changes, the insurance company's obligation to pay the benefits shall not set in, unless they can prove that any of the following circumstances exist:

- the concealed or undisclosed circumstance was known to the insurance company at the time when insurance policy was concluded, or

- the concealed or undisclosed circumstance did not intervene in the occurrence of the insured event

6.11. When an event underlying an insured event occurs, the insured is required to act as generally and reasonably expected in the given situation, and as such promptly seek emergency assistance or medical care. If the insured fails to comply with this obligation, the insurance company will be relieved from the payment of insurance benefits. The insured's refusal of a medical procedure – due to his/her autonomy or freedom to decide guaranteed by law – shall not be an breach of his/her duty to mitigate loss.

The above shall not be construed, however, as limiting or restricting the insured in freely choosing a physician or a medical and health service provider.

7. Use of the service

The insurer provides its service via Teladoc Hungary Kft. as a care organiser, and the health care is provided by health service providers.

The insured may report his/her claim for health care at the following phone number between 8:00 a.m. and 8:00 p.m. on working days.

- for Students studying **in Budapest:** + 36 1 776 7027
- for Students studying outside of Budapest: +36 1 461 1572

Non-stop phone number of the medical call centre:

- for Students studying in Budapest: + 36 1 776 7027
- for Students studying **outside of Budapest:** +36 1 461 1572

The care organiser arranges the execution of the tests for the insured / insured group, and notifies the policyholder of the place and time of the tests. The policyholder informs the insureds of the venue and the time.

When reporting claims for services or when calling the call centre, the name and date of birth of the insured must be provided for the purpose of identification.

8. Resolution of disputes

Please report any complaints concerning the insurer's service to the insurer:

- a) in writing or by telephone to:
 UNION Vienna Insurance Group Biztosító Zrt.
 (1461 Budapest, Pf.: 131., tel.: (+36-1) 486-4343)
- b) or in person at the following address:
 UNION Vienna Insurance Group Biztosító Zrt.
 Central Customer Service Office (Budapest, Váci út 33.)

The insurer's supervisory authority is: National Bank of Hungary (1054 Budapest, Szabadság tér 8-9.; central phone number: (+36-1) 428-2600)

In case the insured disagrees with the response to his/her complaint submitted to the insurer, the insured may

a) contact the National Bank of Hungary (mailing address: National Bank of Hungary, 1534 Budapest BKKP Pf. 777; hotline subject to local rates: (+36-40) 203-776; website: felugyelet.mnb.hu; e-mail: ugyfelszolgalat@mnb.hu) with complaints concerning inquiries into the violation of consumer protection provisions under Act CXXXIX of 2013 on the National Bank of Hungary;

b) contact the Financial Arbitration Board (mailing address: H-1525 Budapest BKKP Pf. 172; telephone: +36-1 489-9100; e-mail: pbt@mnb.hu) or a court of law according to the rules of civil procedure with complaints concerning the issuance, validity, legal effects and termination of the policy as well as breaches of contract and their legal effects.

Claims arising from or in relation to the insurance contract may also be enforced directly through judicial avenues. The resolution of complaints does not substitute litigation.

UNION Vienna Insurance Group Biztosító Zrt.