

Health Insurance

Insurance product description

The Company: UNION Vienna Insurance Group Biztosító Zrt., Hungary

The product: UNIMED Health Insurance

The information provided herein is not complete. Before entering into an insurance agreement, please read carefully the terms and conditions of UNIMED health insurance.

What type of insurance is the UNIMED health insurance?

It is a health insurance product designed to finance medical care used by students studying in Hungary.

When an insured has an illness or an accident, the insurer organises and covers the costs of medical attention up to HUF 2,000,000 p.a. incurred at a health service provider that has contract with the insurer. The insured therefore is provided the medical service and receives no money from the insurer.



What is covered by this insurances?

Under this insurance GP services (GP speaking English), outpatient specialist care, emergency care (both outpatient and inpatient care), inpatient care, patient transport are organised and financed, and the costs of medication are reimbursed.

- ✓ Outpatient primary care (English-speaking GP)
- ✓ Emergency care (as part of outpatient care)
- ✓ Inpatient care (including emergency care)
- ✓ Patient transport
- ✓ Medication costs



What is not covered by this insurances?

The insurer does not finance the costs of medical attention when they incur in relation to:

- ✗ a service provider operating in a foreign country,
- ✗ an illness that already existed prior to the conclusion of the insurance agreement (chronic illnesses) and the costs of medication used to treat that illness,
- ✗ reproduction capacity (infertility tests and interventions to influence fertility),
- ✗ termination of pregnancy for reasons other than medical grounds,
- ✗ plastic aesthetic operations,
- ✗ psychiatric, psychological, oncology, rheumatology therapy series and care,
- ✗ care required due to alcohol or drug overdose/addiction,
- ✗ screening tests,
- ✗ spectacles and contact lenses,
- ✗ contraception devices,
- ✗ medication costs of sexual diseases, except: trichomonas and chlamydia
- ✗ treatment received due to attempted suicide,
- ✗ acupuncture, homeopathic and chiropractic treatments.

The detailed list is included in the insurance terms and conditions.



What limitations are included in the insurance cover?

- ! age: The insurance may be taken for persons aged between 14 and 30 years
- ! only the following dental care is covered: emergency dental care, direct pain relief treatment, and temporary root canal treatment for a maximum two teeth, up to HUF 50,000
- ! the insurer applies a benefit limit and/or excess in relation to certain risks



Where is my insurance valid?

- ✓ The insurance covers only services provided by service providers operating in Hungary.



What are my obligations in relation to the insurance?

The contracting party and the insured are obliged to:

- disclose the required information at the start of the contract,
- pay the premium and report changes, as well as prevent damages during the term of the agreement,
- provide data and information in the case of a claim.



When and how do I have to pay the premium?

The annual insurance premium may be paid in one lump sum or in semi-annual instalments. The first insurance premium is payable when the contract is signed, and the regular insurance premium is due in advance as specified in the premium payment schedule. The premium is payable by the contracting party, but a proportionate part thereof may be charged to the given insured.



When does the cover start and finish?

The insurance cover starts on the first day after the signature of the contract providing that the contracting party has paid the premium into the insurer's account.

The insurance cover relating to one insured is terminated in the following cases:

- when the definite term of cover has expired,
- on the date when the insured passes away,
- when the contracting party reports to the insurer that the insured abandoned the insurance,
- when the contract ceases (its cases are described in detail in the terms and conditions).



How can I terminate the contract?

The insurance contract may be terminated only by the contracting party. The contract ceases to exist in the following cases:

- upon the lapse of the term stated in the contract,
- when either party indicates their intention to terminate the contract 30 days prior to its anniversary date,
- upon non-payment of the premium,
- in the event of termination of the contracting party without a legal successor.

The cases of termination of the insurance in relation to the insured individuals are detailed in the paragraph entitled "When does the cover start and finish?".