

Comprehensive health insurance for foreigners – PREMIUM

Insurance Product Information Document

Insurance company: INTER PARTNER ASSISTANCE, S.A., acting through
INTER PARTNER ASSISTANCE, organizational unit

Product: Health Insurance for Foreigners

The information in this document is intended to help you understand the basic features and conditions of insurance.

Complete information can be found in other documents: in the insurance contract, in the Insurance Terms and Conditions of Comprehensive Health Insurance for Foreigners – PREMIUM – PP KZPC – PREMIUM of 1 April 2024 and in the Supplementary Insurance Terms and Conditions of Health Insurance for Foreigners for the Schengen Area and Transit Countries of the DPP ZPCNS of 1 April 2024, (hereinafter referred to as the „PP“).

What type of insurance is it?

Non-life insurance for the event of selected risks listed in the section **“What is the subject of insurance?”**, intended for the stay of third-country nationals in the territory of the Czech Republic, the Schengen Area and/or transit countries.

On the territory of the Czech Republic, the insurance is valid in the scope of comprehensive health care.

On the territory of the Schengen Area and the territory of the transit country, the insurance is valid to the extent of necessary and urgent health care.



What is insured?

Depending on the insurance program, the insurance includes the following insurance:

- ✓ Insurance of medical expenses in the regime of comprehensive care in the territory of the Czech Republic
- ✓ Insurance of medical expenses in the regime of necessary and urgent care in the Schengen Area and/or transit countries, except for the Czech Republic.
- ✓ Liability insurance
- ✓ Baggage insurance
- ✓ Accident Insurance
- ✓ Telemedicine Insurance

What is the insurance benefit?

- ✓ **In the case of insurance of medical expenses in the comprehensive care regime:** reimbursement of purposefully incurred costs to a similar extent as in the case of public health insurance in the Czech Republic, for treatment or treatment, including diagnostic procedures that are directly related to them, are prescribed by the doctor, including preventive and dispensary care, and stabilize the condition of the insured to such an extent that he or she is able to continue his or her stay or is able to be repatriated.
- ✓ **In the case of insurance of medical expenses in the regime of necessary and urgent care in the Schengen Area with the exception of the Czech Republic:** reimbursement of unavoidable and purposefully incurred costs of treatment or treatment, including diagnostic procedures that are directly related to them, are prescribed by the doctor and stabilize the condition of the insured to such an extent that he or she is able to continue his or her stay or is able to repatriate.



What is insured?

(continuation)

- ✓ **In the case of liability insurance:** payment for damage or other damage for which the insured is liable under general law and is obliged to compensate.
- ✓ **In the case of luggage insurance,** compensation for luggage and personal items usual for the purpose of the trip, which the insured took with him on the trip, or for items that he or she demonstrably acquired during the trip
- ✓ **In the case of accident insurance,** a one-off financial payment for permanent consequences caused by an accident or in the event of death as a result of an accident
- ✓ **In the case of Telemedicine insurance,** the provision of a telephone or online consultation regarding your health condition, or your examination via video call or chat, and the issuance of a medical report or e-prescription.

Please note: A complete list of insurance benefits can be found in the PP.



What is not covered by the insurance?x<

- ✗ Illness, injury or other change in health that occurred before the start of the insurance.
- ✗ A claim that occurred outside the Schengen area and/or a transit country, except for baggage insurance.
- ✗ The loss event occurred in the territory of the state of which the insured person is a citizen or of the state in which the insured person participates in public health or other similar insurance.
- ✗ Damage caused by the operation or driving of a motor vehicle.
- ✗ Damage to borrowed or rented items.
- ✗ A damage event that occurred in connection with the consumption of alcohol or other narcotic, toxic or psychotropic substances. This exclusion does not apply in the event of an accident.

Please note: A full list of restrictions and exclusions can be found in the PP.



Are there any restrictions on insurance coverage?

For example, the insurance does not cover the following cases:

- ! Insurance benefits are provided up to the limit of insurance benefits specified in the PP
- ! Stay in the Schengen Area for the purpose of treating the insured
- ! Damage caused by the practice of a dangerous or risky sport, or damage incurred as a result of the practice of a professional sport
- ! Damage caused by a close person or damage caused to a close person.
- ! In the case of liability insurance, the deductible is deducted from the resulting indemnity.

Please note: A full list of restrictions and exclusions can be found in the PP.



Where do I get cover?

Comprehensive care insurance applies only to events occurring in the Czech Republic. Insurance in the regime of necessary and urgent care applies to insured events that arose in the territory of the Schengen Area member states and/or transit countries, with the exception of the territory of the Czech Republic.

Please note: Complete information can be found in the PP.



What are my responsibilities?

In particular, the insured is obliged to:

- ensure that an insured event does not occur, in particular it must not breach the obligations aimed at averting or reducing the risk imposed on it by law.
- In the event of a claim, first of all, contact the insurer or the assistance service with a request to secure the services included in the insurance, inform them about the claim, in particular the date and place of the occurrence of the claim, the address of the insured, request instructions from the insurer or assistance services and proceed in accordance with them.
- In the event of a claim, the insured is also obliged to follow the instructions of the insurer and/or the assistance service and to cooperate effectively with them, to fulfil other obligations imposed by the insurer and/or the assistance service after the occurrence of the claim.

Please note: A full list of obligations can be found in the T&C.



When and how to make payments?

The policyholder pays the premium in one lump sum when arranging the insurance.



When does insurance coverage start and end?

Insurance coverage begins at 0:00 a.m. on the day indicated as the start of insurance in the insurance policy, but only on the condition that the entire premium has been paid. The insurance coverage ends at 12:00 p.m. on the day specified in the insurance policy as the end of the insurance.

Please note: Complete information can be found in the PP.



How can I terminate my insurance?

In particular, insurance can be terminated prematurely:

- A written agreement with the insurer;
- withdrawal from the insurance contract,
- Termination of employment, if applicable.

Other ways and exact conditions for the termination of insurance are described in the PP and in the Civil Code.