

Private Health Insurance

Insurance Product Information Document

DKV Luxembourg S.A. - Product: EASY HEALTH

With this information sheet you receive a compact overview regarding the insurance according to the above-mentioned tariff and the benefits included. This information sheet is not complete and the examples given below are only an extract of the total benefit catalogue.

The entire content is listed in the following documents:

- Your insurance application and our offer
- The insurance policy and any further stipulated agreement
- The General terms and conditions of insurance GCI
- The tariff conditions of the insured tariff

Please read carefully all of the documents in order to be fully informed on your insurance cover.

What type of insurance is it?

Additional protection for holders of a statutory insurance.



What is insured?

Outpatient treatment

- ✓ Medical treatments
- ✓ Drugs and dressings
- ✓ Remedies such as physiotherapy, massages
- ✓ Services of a midwife
- ✓ Medical aids such as hearing aids, arch supports
- ✓ Visual aids
- ✓ Refractive eye surgery (e.g. Laser)
- ✓ Alternative treatment methods

Dental treatment

- ✓ Dental treatment
- ✓ Dental deep cleaning
- ✓ Replacement teeth such as crowns, implants, inlays
- ✓ Orthodontic treatment

Inpatient treatment

- ✓ Medical treatment (including chief physician)
- ✓ Accommodation costs (including single room)
- ✓ One-Day-Clinic
- ✓ Rooming-in for one parent with co-insured children
- ✓ Transportation to the hospital in an ambulance
- ✓ Hospital daily benefit

Tariff BEST CARE+ / BEST CARE PREMIUM+

- ✓ Preparation of a second opinion by recognised specialists for certain diseases requiring inpatient treatment, malformations and complications following accident injuries
- ✓ If necessary, organization of a surgery by an expert within 5 working days
- ✓ Payment of an expense flat rate

The scope of insurance also includes the free of charge protection according to the TRAVEL+ tariff (see separate information sheet)



What is not insured?

- ✗ Not medical necessary treatments
- ✗ Preventive, health cure and sanatorium treatments
- ✗ Aesthetic treatments
- ✗ Diet, nutrition and tonics
- ✗ Damage caused by exposure to radiation and nuclear energy and damage caused by war, civil war, unrest, terrorism or similar circumstances
- ✗ Benefits for insurance claims before commencement of the insurance contract
- ✗ Benefits for post-insurance expenses



Are there any restrictions on cover?

- ! Insurance cover is defined by the type and extent of cover described in the General Terms and Conditions of Insurance and in the tariff conditions of the corresponding tariff.
- ! No reimbursement of expenses for claims occurring during the waiting period
- ! The amount of reimbursement is limited on expenses incurred.
- ! Other limitations such as:
 - Breach of obligations
 - If the policyholder does not arrange for payment of instalments due in due time
 - During sojourn in a non-European country



Where am I covered?

- ✓ Insurance cover applies to Europe.
- ✓ Insurance cover is provided during the first month of a temporary sojourn in a non-European country.



What are my obligations?

- The policyholder and the person insured are obliged to furnish on demand any information and documentation necessary in order to determine an insurance claim.
- Persons insured are obliged to undergo a medical examination performed by a medical consultant on behalf of the company if requested to do so by the insurance company.
- The policyholder is obliged to pay the agreed premium plus taxes on time.



When and how do I pay?

- The first instalment/premium payment must be paid at the latest immediately after the insurance policy has been given to the policy holder, however, not before the inception date of insurance cover indicated on the insurance policy.
- All other premiums are due, depending on the agreed method of payment, at the beginning of the agreed contribution period.
- Premium payment can be effected via bank transfer or via direct debit mandate in favor of the insurer. Should you opt for monthly instalments, it is indispensable to arrange for a direct debit mandate in favor of the insurer.



When does the cover start and end?

- Insurance cover commences in accordance with the time period stated in the policy document (commencement of insurance); however, not before the insurance contract has been concluded, i.e. not before the insurance policy has been signed by both contractual partners and not before the termination of waiting periods.
- Insurance cover ends – including any insurance claims which may be still pending – when the insurance contract is terminated.
- Insurance cover is terminated, for example; in case of:
 - Cancellation of the insurance contract
 - Death of the insured person
 - Non-compliance with the requirements of a risk/person to be insured stipulated in the tariff conditions



How do I cancel the contract?

- The policyholder can contest the automatic renewal of the insurance contract by notifying the insurance company with effect at the end of the insurance year, however, not before termination of the second insurance year at the earliest.
- Cancellation must be effected in writing.
- Period of notice to cancel the insurance contract is 30 days.
- As a policyholder, you may limit the cancellation of the insurance to a single insured person in your insurance contract.
- The cancellation is only valid provided that the policyholder can prove that the insured persons affected by this were informed of notification to cancel.
- In some situations, you might have an extraordinary cancellation right, e.g. if premium contributions are subject to an increase.

Private Health Insurance

Insurance Product Information Document

DKV Luxembourg S.A. - Product: TRAVEL /TRAVEL+

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- Your insurance application and our offer
- The insurance policy and any further stipulated agreement
- The General terms and conditions of insurance GCI

Please read carefully all of the documents in order to be fully informed on your insurance cover.

What type of insurance is it?

Travel Insurance for journeys abroad



What is insured?

Outpatient treatments

- ✓ Medical treatments
- ✓ Drugs and dressings
- ✓ Remedies such as physiotherapy, massages
- ✓ Medical aids that become necessary for the first time during a stay abroad and as a consequence of an accident (excluding vision or hearing aids)

Dental treatments

- ✓ Pain-relieving treatment
- ✓ Simple dental filling
- ✓ Repair of existing tooth replacement in order to re-establish ability to chew
- ✓ Provisional prostheses

Inpatient treatments

- ✓ Medical treatment (incl. surgery)
- ✓ Accommodation costs (incl. additional costs for individual room)

Ambulance services

- ✓ Medical necessary transport using approved rescue services to the nearest hospital or doctor

Repatriation and return transport

- ✓ Organization and assumption of the costs for a medically reasonable and justifiable return transport of the insured person
- ✓ Organization and assumption of costs for a transfer in the event of the death of the insured person

The maximum amounts specified in the General Terms and Conditions of insurance apply to the benefits specified.



What is not insured?

- ✗ Treatments abroad if the treatments were the only or at least one of the reasons for your journey;
- ✗ Treatments of existing illnesses where the necessity of the treatment abroad was known before the journey started (based on medical diagnosis)
- ✗ Costs for contraceptive
- ✗ Costs for prevention medicine, vaccination and serum
- ✗ Costs for diseases based on intention or addiction
- ✗ Costs in connection with suicide or attempted suicide
- ✗ Costs of treatments for mental, psychogenic and psychosomatic illnesses
- ✗ Costs related to an insured person's pregnancy known prior to the beginning of the journey
- ✗ Dental prostheses and dental crowns
- ✗ Costs for aesthetic treatments
- ✗ Costs for insured events that occurred prior to the beginning of insurance cover
- ✗ Costs occurring after the termination of insurance cover



Are there any restrictions on cover?

- ! Insurance cover is defined by the type and extent of cover described in the General Terms and Conditions of Insurance.
- ! The amount of reimbursement is limited on expenses incurred.
- ! Further limitations such as:
 - No insurance cover applies to the territories for which the Ministry of Foreign Affairs of Grand-Duchy of Luxembourg ("Ministère des affaires étrangères") or a relevant Ministry or competent authority in the bordering countries of Luxembourg has issued a travel warning for this territory.



Where am I covered ?

- ✓ Your insurance cover is valid for the journey abroad indicated on your insurance application.
- ✓ Considered as foreign countries are all territories outside the Grand Duchy of Luxembourg and the country in which you have your permanent residence.



What are my obligations ?

- In order to check our obligation to pay benefits, we may need information from you or the insured person. You or the insured person are obliged to provide us with the requested information.
- The insured person is obliged at our request to have himself/herself examined by a medical practitioner commissioned by us.
- You are obliged to pay all due premiums including taxes within due time.



When and how do I pay ?

- Premium payment has to be effected immediately.
- Premium payment can be effected via credit card or Digicash.



When does the cover start and end ?

- The beginning and the end of the insurance cover are indicated in the General Terms and Conditions.



How do I cancel the contract ?

- The insurance contract ends automatically with the termination date indicated on the policy. There is no automatic renewal of the insurance contract.