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Special Conditions

Exclusive

SPECIAL TERMS AND CONDITIONS „HEALTH AND VALUE“ – WORLD HEALTH PLAN

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These Special Terms and Conditions shall be only applicable together with General Terms and Conditions for Health (medical) Insurance „Health and Value“ and as a part of a valid insurance policy.

The territorial scope of the insurance coverage shall comprise insurance events occurred worldwide.

The insurance shall be placed in EUR.

The maximal value of all indemnities per calendar year per person insured shall be up to EUR 2 886 708.00. The insurer shall pay indemnities in the following cases and limits:

I.STATIONARY HOSPITALIZATION

(Art. 20 and Art. 22 Par. 1, 2 and3 of the General Terms and Conditions of the insurance; PointA.Additional insurance terms and conditions hereof).

The insurance coverage shall comprise services during a stationary hospitalization under medical prescription as a result of a disease, accident or birth, to the following limits:

1.Guarantee for reimbursement

1.1. In case of stationary hospitalization (a room with one or more beds) the insurer shall fully reimburse the costs via a direct statement with the hospital, according to the limit agreed in the insurance policy, after the MedUNIQA SOS center has been notified before the patient’s hospitalization for stationary treatment and has confirmed the undertaking of the insurance case.

1.2. Should the MedUNIQA SOS center be not notified, the hospitalization costs (in a room with one or more beds) shall be reimbursed upon presentation of paid original invoices and copies of medical documents for the conducted treatment, reduced by 20% of self-participation. The maximum amount of the self-participation per hospitalization shall be up to EUR 3 471.00 within Europe, and up to EUR 6 931.00 outside Europe.

No self-participation shall be applied, should the urgency of the hospital treatment not allow contacting the MedUNIQA SOS center prior to the hospitalization and undertaking the insurance case by the center.

2.Accompanying person

For hospitalization of children below 18 years of age, insured hereunder, the expenses for an accompanying person shall be fully reimbursed, provided that the hospitalization has been reimbursed under 1.1.

Should the hospitalization fall within the provisions of 1.2, the costs shall be reimbursed upon presenting medical documents for the treatment performed and original invoices paid, minus 20% of self-participation. The maximum amount of the self-participation within Europe shall amount to maximum EUR 347.00, while outside Europe shall amount to maximum EUR 690.00 per hospitalization.

The self-participation shall not be applied if self-participation is not applicable for hospitalization of an insured child.

3.Daily allowances for hospitalization, one-off amount forgiving birth

In the event of hospital (stationary) treatment of an insured person, the insurer shall not reimburse any costs, and daily allowances shall be paid to the insured person to the amount of EUR 173.00 per hospitalization day, and for giving birth, an one-off amount of EUR 1 730.00 shall be paid.

II.DAILY STATIONARY TREATMENT

(in addition to Art. 20 (1) andArt.22, Par. 1, 2 and 3 of the General Terms and Conditions ofthe insurance; point A. Additional insurance terms andconditions hereof).

1.Should the treatment under medical prescription requirehospitalization for a period less than 24 hours, with noovernight stay necessary from a medical point of view, andshould the MedUNIQA SOS center has been notified and hasundertaken the insurance case, the costs shall be fullyreimbursed. In cases where direct settlement is not possible,the costs shall be reimbursed upon submitting of a paidoriginal invoice.

2.Should the MedUNIQA SOS center be not notified, thehospitalization costs per day or the outpatient costs per day (ina room with one or more beds) shall be reimbursed uponpresentation of paid original invoices and copies of medicaldocuments for the conducted treatment, reduced by 20% ofself-participation. The maximum amount of the self-participation per treatment shall be up to EUR 3 471.00 withinEurope, and up to EUR 6 931.00 outside Europe.

No self-participation shall be applied, should the urgency of the hospital treatment not allow contacting the MedUNIQA SOS center prior to the hospitalization and undertaking the insurance case by the center.

III.PATIENT TRANSPORTATION

(in addition to Art. 21 of theGeneral Terms and Conditions of the insurance; point A.Additional insurance terms and conditions hereof).

1. Subject to reimbursement shall be costs for medical transportation of an incurred person within Europe upon medcial prescription for treatment under point I or point II with a maximum limit of EUR 2 317.00 per calendar year.

2. Should, for medical reasons, transportation be only possible by helicopter, the maximum annual amount specified in point 1 shall be increased to EUR 4 614.00.

IV. OUTPATIENT TREATMENT

(Art. 19 and Art. 22 of the General Terms and Conditions of the insurance; Point A. Additional insurance terms and conditions hereof).

The insurance coverage shall comprise payments for

outpatient services necessary from a medical point of view, medically prescribed as a result of a disease, accident or pregnancy, within the following limits:

1. Subject to full reimbursement shall be costs for:

a) Outpatient medical treatment;

b) Medicines prescribed by a physician;

c) Auxiliary tools for treatment under medical prescription;

d) Physiotherapeutic treatment under medical prescription, ergotherapy, speech-language pathology;

e) Phychoterapeutic treatment under medical instruction by licensed physicians,

Up to a total of EUR 11 546.00 per calendar year,

Within this minimal amount, subject to reimbursement shall be costs incurred for:

- Ophthalmological auxiliary tools (spectacles and lenses) of up to EUR 690.00 per two calendar years;

- Psychotherapy of up to EUR 690.00 per calendar year.

2. Costs for dialysis under medical prescription shall be reimbursed up to EUR 347.00 per procedure.

V. DENTAL CARE

(Art.19 (1), Art.19 (4), Art.22 Par 1 and 2, of the General Terms and Conditions of the insurance; Point A. Additional insurance terms and conditions hereof).

The insurance coverage shall include reimbursement of costs incurred for dental care within the limits as follows:

Subject to reimbursement shall be 80% of the costs per calendar year, incurred for:

a) supporting dental care;

b) dental radiographic images;

c) tooth extraction;

d) fitting of dentures (e.g. crown, bridge);

e) jaw surgery;

f) tooth implant;

g) parodontosis;

h) orthodont services (orthodonty);

i) prophylactic measures for teeth keeping and maintenance, such as oral hygiene, dental calculus removal, fluoridation, crack closure, up to a total of EUR 5 768.00 per calendar year.

Within this maximal amount subject to reimbursement shall be costs incurred for:

- maxilla-facial orthodonty – jaw orthodonty of up to EUR 1 153.00,

- prophylactic measures amounting up to EUR 347.00.

VI. GIVING BIRTH TO A CHILD IN A HOME ENVIRONMENT

(Point A. Additional insurance terms and conditions hereof).

In case of giving birth at home, a one-off amount of EUR 1 730.00 shall be paid, instead of all the remaining indemnities.

VII. Rehabilitation (in addition of Art.20, Par. 4, p.2 of the General Terms and Conditions of the insurance; Point A. Additional insurance terms and conditions hereof).

The costs for stationary rehabilitation under medical prescription, related to a preceding insured stationary treatment as a result of a disrupted metabolism, a heart or a tuberculosis disease or as a result of an accident, shall be reimbursed up to EUR 231.00 daily for maximum of 90 days.

VIII. TREATMENT IN A MINERAL BATH SANATORIUM

(in addition to Art. 21, Par.20, point 2 of the General Terms and Conditions of the insurance).

For a stay in mineral bath sanatorium under medical prescription and in cases of approved costs for therapy and stay, EUR 40.00 shall be paid per daily stay during the rehabilitation for a maximum of 28 days within a period of two calendar years.

IX. COSTS FOR SEARCH AND RESCUE

(point A. Additional insurance terms and conditions hereof).

Subject to reimbursement shall be costs for search and rescue of up to EUR 3 471.00 per insurance case.

X. REPATRIATION OF A PATIENT AND TRANSPORTATION OF CORPSES

(in addition to Art. 21 of the General Terms and Conditions of the insurance; point A. Additional insurance terms and conditions hereof).

1. Repatriation (including transportation) of a patient

In case of life-threatening changes in the health condition as a result of a disease or accident, the insurance coverage shall comprise services for repatriation (including transportation) of a patient, amounting to:

The following expenses shall be fully reimbursed:

a) Repatriation of the insured person on physician's instruction from a European country other than the home one to a hospital of residence or to a hospital in Austria, and transportation of a patient according to medical indications from Bulgaria to a hospital in Austria;

b) Transportation of an insured person's close relative;

Repatriation of the insured person (including patient transportation) shall be organized by the MedUNIQA SOS, otherwise costs of maximum EUR 2 193.00 shall be subject to reimbursement.

The above mentioned expenses shall not be paid, in the event that the patient repatriation is needed for a planned treatment.

2. Transportation of corpses

Subject to reimbursement shall be the costs for preparation and transportation of the corpses of a deceased person from the country where death has occurred to Bulgaria or to the country of former residence. The transportation shall be done by the most economical transport.

The transportation shall be organized by the MedUNIQA SOS center, otherwise costs for maximum EUR 927.00 shall be reimbursed.

A. ADDITIONAL PROVISIONS

1. Periods of delay (Art. 11 of the General Terms and Conditions of the insurance).

The total period of delay shall be 2 (two) months.

The special period of delay for indemnities according to point V (dental care), except dental therapy, performed for pain control and providing first aid after an accident, shall be 8 month.

The special period of delay for indemnities for giving birth, miscarriage, pregnancy examination and any diseases related to the pregnancy and any consequences thereof, shall amount to 9 (nine) months. In case of premature birth or miscarriage, which upon normal pregnancy would result in a birth after 9 months, insurance protections shall be provided upon expiration of the total period of delay.

2. Jaw surgery and dental care

Reimbursement of costs incurred for dental care and jaw surgery, dental radiographic image, tooth replacement and jaw adjustment shall be performed in full compliance with point V (dental care).

3. Rehabilitation (point VII)

Insurance coverage shall be provided for rehabilitation treatment at proper health institutions for stationary treatment

licensed by the government.

4. Costs for search and rescue (point IX)

Costs for search and rescue shall mean the costs approved for search of the insured person and transportation of him/her to the nearest accessible road or to the nearest hospital to the place of the accident.

The costs shall be reimbursed if the insured person has suffered an accident or is in trouble in a mountain or a water basin and must be rescued, regardless of whether the insured has been injured or not, and whether he/she is dead as a result of getting into trouble in a mountain or water basin, and must be transported.

A situation where the insured person must be immediately evacuated due to a health problem shall be considered an accident.

Costs incurred for rescue by helicopter shall be only reimbursed in the event that there had been no other way possible for rescuing the insured person.

5. Repatriation of a patient (point X)

a) Preconditions for repatriation (including transportation) of an insured person shall be the opportunity for transportation of the insured, and the possibility of worsening of his/her health condition.

b) In case of repatriation (including transportation) of an insured person the MedUNIQA SOS center shall be notified. In order to take adequate measures, the MedUNIQA SOS center shall be provided with the information written on the SOS card. Based on the obtained information the MedUNIQA SOS center shall contact the attending physician and shall take a decision, considering the criteria specified in point a) regarding transportation and the type of transportation. The decision shall be taken together with the attending physician but the final decision shall be taken by the physician of the MedUNIQA SOS center.

6. Payment of insurance indemnity

In addition to Art. 23 of the General Terms and Conditions of the insurance, all invoices shall be presented in Bulgarian, German, French or English.

B. ACTUALIZATION OF INDEMNITIES AND PREMIUMS

1. a) The insurer shall undertake to preserve the value of the insurance coverage or to adapt his indemnities in case of change in the prices of healthcare services, so that the guarantee for reimbursement shall remain in all positions where explicitly submitted.

b) Adapting shall be also undertaken upon change in frequency of reimbursement claims.

2. Indemnities under point I, II and X shall be adapted in compliance with the changes in the prices of healthcare services, and according to the contract partners.

All the remaining items shall be adapted on the basis of comparison of the actual European Consumer Price Index (ECPI) with the preceding year or with the index on which the last adaptation was based. Fixed self-participations shall also be adapted pursuant to this index.

Every change in the healthcare sector or in the applicable legal regulations, imposing a change in indemnities, shall also be considered upon adapting these indemnities.

3. The indemnities shall be adapted regardless of age, without any period of delay for additional indemnities and regardless of a possible health condition worsening.

4. The premium update shall be based on the indemnities adapted according points 1 and 2, by considering the changes of reimbursement and the costs related thereto, any changes in healthcare system or the applicable legal provisions and the age of the insured person as of the date of the update.

5. The new indemnities and premiums shall become effective on the first day of the month, after notifying the insured person in writing.

6. Within one month following the month of submitting the written notification, the insured person shall be entitled to reject in writing an adaptation of the insurance services and premiums. In such a case the insurance shall be deemed terminated as of the date of the update.

C. MISCELLANEOUS

MedUNIQA SOS card

In case of stationary hospital treatment or clinical treatment, patient repatriation (including transportation) and transportation of a deceased person, please contact the UNIQA SOS center by the number on the SOS card.

D. FINAL PROVISIONS

1. In case of contradiction between these Special Terms and Conditions and the General Terms and Conditions, the provisions of these terms and conditions shall prevail.

2. In case of contradiction between these Special Terms and Conditions and/or the General Terms and Conditions with the insurance policy provisions, the insurance policy provisions shall prevail.

These Special Terms and Conditions have been adopted by a decision of the MB of UNIQA Life Insurance plc on 18.07.2016 and shall enter into force on 01.09.2016, when the validity of the Tariff „World Health Plan" effective since 04.04.2016, shall be terminated.

The undersigned, _____, hereby declare, that I have been provided with a copy of these Special Terms and Conditions, containing 3 (three) pages, I am aware of the content hereof, and I accept them.

Date: _____ Signature: _____