

EMERGENCY AND INDISPENSABLE MEDICAL CARE INSURANCE

The insurance policy on health insurance of foreign nationals in case of emergency and indispensable medical care is a proof of travel health insurance of foreign nationals pursuant to Act No. 326/1999 Coll., on the stay of foreign nationals on the territory of the Czech Republic.

1. The extent of insurance cover:

The emergency and indispensable medical care includes:

- a) Necessary care of medical emergency and rescue services;
- b) Transportation recommended by doctor to the nearest professionally competent medical facility;
- c) Determining a diagnosis and treatment procedure, including necessary examinations;
- d) Emergency and indispensable medical treatments, including necessary medications and medical material;
- e) Necessary hospitalization for a necessary period of time; to a maximum extent of emergency and indispensable medical care regularly paid from public health insurance in the Czech Republic.
- f) Repatriation of the insured, who is sick, which is from a medical point of view possible and necessary and organized by assistance service after the decision of the insurer and the approval of the insured's attending doctor to the country whose passport the insured holds or to a different country where the insured has a residence permit;
- g) Transportation of mortal remains of the insured to the country whose passport the insured possessed or to the country where the insured had residence permit organized by assistance service after the approval of the insurer.
- h) Medicinal products prescribed by doctor.

The subject of the insurance is:

- a) Costs of emergency and indispensable medical care provided to the insured on the territory of the Schengen area and related assistance services.

2. Limits and sub-limits of insurance claim:

2.1. **The annual limit of insurance claim** for costs of emergency and indispensable medical care provided to the insured on the territory of the Schengen area and related assistance services is agreed to be in following amounts:

- a) **The limit of insurance claim** for costs of emergency and indispensable medical care and related assistance services on the territory of the Schengen area is agreed to be in the amount of **CZK 1,600,000 (at least € 60,000)** for one occurrence.
- b) **The annual sub-limit of insurance claim** for dental care of the insured on the territory of the Schengen area is agreed to be in the amount of **CZK 5,000**.
- c) **The annual sub-limit of insurance claim** for medications prescribed to the insured in the outpatient department on the territory of the Schengen area is agreed to be in the amount of **CZK 5,000**.

3. Territorial scope of the insurance:

For the territory of the Schengen area, including the CR, the insurance applies to the study visit of the insured.

COMPLEX HEALTH INSURANCE OF FOREIGN NATIONALS

The complex health insurance policy for foreign nationals is a proof of travel health insurance of foreign nationals pursuant to Act No. 326/1999 Coll., on the stay of foreign nationals on the territory of the Czech Republic.

1. The extent of insurance cover:

1. The complex medical care includes:

- a) Necessary care of medical emergency and rescue services;
- b) Transportation recommended by doctor to the nearest professionally competent medical facility;

- c) Determining a diagnosis and a treatment procedure, including necessary examinations;
- d) Emergency and indispensable medical treatments, including necessary medications and medical material;
- e) Necessary hospitalization for a necessary period of time;
- f) Outpatient curative care and institutional care, including diagnostic care;
- g) Preventive care and dispensary care;
- h) Potential repatriation or transportation of mortal remains of the insured;
- i) Medicinal products prescribed by doctor.

2. Emergency and indispensable medical care includes:

- a) Necessary care of medical emergency and rescue services;
- b) Transportation recommended by doctor to the nearest professionally competent medical facility;
- c) Determining a diagnosis and a treatment procedure, including necessary examinations;
- d) Emergency and indispensable medical treatments, including necessary medications and medical material;
- e) Necessary hospitalization for a necessary period of time; to a maximum extent of emergency and indispensable medical care regularly paid from public health insurance in the Czech Republic.

The subject of the insurance is:

- a) Costs for complex medical care and related assistance services on the territory of the Czech Republic,
- b) Costs for emergency and indispensable medical care provided to the insured on the territory of the Schengen area and related assistance services.

2. Limits and sub-limits of insurance claim:

- 2.1. **The limit of insurance claim** for complex medical care and related assistance services on the territory of the Czech Republic is agreed to be in the amount of **CZK 2,000,000 (at least € 75,000)** for one occurrence.
- 2.2. **The annual sub-limit of insurance claim** for dental care of the insured is agreed to be in the amount of **CZK 5,000**. The limit for dental care applies to any treatment up to the amount of the limit, including above-standard dental material (e.g. white dental fillings etc...).
- 2.3. **The annual sub-limit of insurance claim** for medications prescribed to the insured in the outpatient department is agreed to be in the amount of **CZK 5,000**.
- 2.4. **The annual limit of insurance claim** for costs of emergency and indispensable care provided to the insured on the territory of the Schengen area and related assistance services is agreed to be in following amounts:
 - a) **The limit of insurance claim** for costs of emergency and indispensable medical care and related assistance services on the territory of the Schengen area is agreed to be in the amount of **CZK 1,600,000 (at least € 60,000)** for one occurrence.
 - b) **The annual sub-limit of insurance claim** for dental care of the insured on the territory of the Schengen area is agreed to be in the amount of **CZK 5,000**.
 - c) **The annual sub-limit of insurance claim** for medications prescribed to the insured in the outpatient department on the territory of the Schengen area is agreed to be in the amount of **CZK 5,000**.

3. Territorial scope of the insurance:

On the territory of the Czech Republic the insurance is valid to the extent of the complex medical care. For the territory of the Shengen area, excluding the Czech Republic, the insurance applies only to a tourist stay of the insured in the length of at least 30 days.

COMPLEX HEALTH INSURANCE OF FOREIGN NATIONALS with increased limits

1. The extent of insurance cover:

1. The complex medical care includes:

- a) Necessary care of medical emergency and rescue services;

- b) Transportation recommended by doctor to the nearest professionally competent medical facility;
- c) Determining a diagnosis and a treatment procedure, including necessary examinations;
- d) Emergency and indispensable medical treatments, including necessary medications and medical material;
- e) Necessary hospitalization for a necessary period of time;
- f) Outpatient curative care and institutional care, including diagnostic care;
- g) Preventive care and dispensary care;
- h) Potential repatriation or transportation of mortal remains of the insured;
- i) Medicinal products prescribed by doctor.

2. Emergency and indispensable medical care includes:

- a) Necessary care of medical emergency and rescue services;
- b) Transportation recommended by doctor to the nearest professionally competent medical facility;
- c) Determining a diagnosis and a treatment procedure, including necessary examinations;
- d) Emergency and indispensable medical treatments, including necessary medications and medical material;
- e) Necessary hospitalization for a necessary period of time; to a maximum extent of emergency and indispensable medical care regularly paid from public health insurance in the Czech Republic.

The subject of the insurance is:

- a) Costs for complex medical care and related assistance services on the territory of the Czech Republic,
- b) Costs for emergency and indispensable medical care provided to the insured on the territory of the Schengen area and related assistance services.

2. Limits and sub-limit of insurance claim:

- 2.1. **The limit of insurance claim** for complex medical care and related assistance services on the territory of the Czech Republic is agreed to be in the amount of **CZK 2,600,000 (at least € 100,000)** for one occurrence.
- 2.2. **The annual sub-limit of insurance claim** for dental care of the insured is agreed to be in the amount of **CZK 10,000**. The limit of dental care applies to any treatment up to the amount of the limit, including above-standard dental material (e.g. white dental fillings, etc. ...).
- 2.3. **The annual sub-limit of insurance claim** for medications prescribed to the insured in the outpatient department is agreed to be in the amount of **CZK 10,000**.
- 2.4. **The annual limit of insurance claim** for costs of emergency and indispensable medical care and related assistance services on the territory of the Schengen area and related assistance services is agreed to be in following amounts:
 - a) **The limit of insurance claim** for costs of emergency and indispensable medical care and related assistance services on the territory of the Schengen area is agreed to be in the amount of **CZK 1,600,000 (at least € 60,000)** for one occurrence.
 - b) **The annual sub-limit of insurance claim** for dental care of the insured on the territory of the Schengen area is agreed to be in the amount of **CZK 5,000**.
 - c) **The annual sub-limit of insurance claim** for medications prescribed to the insured in the outpatient department on the territory of the Schengen area is agreed to be in the amount of **CZK 5,000**.

3. Territorial scope of the insurance:

On the territory of the Czech Republic the insurance is valid to the extent of the complex medical care. For the territory of the Shengen area, excluding the Czech Republic, the insurance applies only to a tourist stay of the insured in the length of at least 30 days.