

International Private Medical Insurance

Insurance Product Information Document




Company: Astrenska Insurance Limited. Authorised by the Prudential Regulation Authority in England and regulated by the Central Bank of Ireland for conduct of business rules.

Product: Vhi International Level 2

This document does not contain the full terms and conditions of the cover which can be found in the policy wording and schedule. It is important that you read all these documents carefully.

What is this type of insurance?

This is an international private medical insurance contract which provides the customer with cover for medical treatment whilst they are living/working outside of Ireland.



What is insured?

Overall Maximum Benefit

- ✓ The maximum amount we will pay in respect of all benefits is €5 million per person, per year.

Medical & Hospitalisation

- ✓ Hospital accommodation and treatment as an In-patient or day-care admissions – Full cover.
- ✓ Consultations and treatment received on an out-patient basis during the three months immediately following discharge as an in-patient or day-care patient - covered up to €3,000.

Cancer Care Cover


- ✓ The costs of in-patient, day-care and out-patient treatment after being diagnosed with cancer – cover is provided up to:
 - €100,000 in Geographical Area 1
 - €250,000 in Geographical Area 2
 - €350,000 in Geographical Area 3

Chronic Medical Conditions

- ✓ The cost of medical treatment intended to stabilise and relieve symptoms of a chronic medical condition (such as asthma, epilepsy, etc), including routine management and palliative treatment (temporary relief of symptoms, etc) – covered up to €15,000.

Maternity

- ✓ The cost of any treatment directly as a result of specific complications or pregnancy and childbirth - full cover.
- ✓ The cost of normal pregnancy and childbirth, including ante natal care, delivery costs, elective caesarian section, and post-natal care – covered up to €5,000 per pregnancy.



What is not insured?

- ✗ Any invoices received more than six months after the start of any medical treatment.
- ✗ Preventative treatments of any kind or any general health check-ups.
- ✗ More than 30 days psychiatric in-patient treatment in any period of insurance.
- ✗ Any expenses related to pregnancy during the first 10 months following an insured person's date of entry onto the policy (this period may be reduced where the expectant mother has previously been covered by a Health Insurance Plan from an Irish licensed insurer).
- ✗ Any optical benefit in respect of prescription sunglasses or where the glasses or lenses have not been prescribed by an optician or ophthalmologist.
- ✗ Any hearing benefit in respect of a hearing aid which has not been prescribed by an audiologist or ENT consultant.



What is insured continued...

Outpatient Benefits

- ✓ The cost of necessary consultations with a general practitioner or specialist and any tests, investigations and prescribed drugs or medicines - covered up to:
 - €3,000 in Geographic Areas 1 and 2.
 - €5,000 in Geographic Area 3
- ✓ Up to three out-patient psychiatric visits – up to a maximum of 60 minutes per visit.

Temporary Return Home Benefit

- ✓ Cover in your Home Country for visits of 60 days or less (120 days or less for students) – Full cover.

Optical Benefit

- ✓ One eye test per year – full cover.
- ✓ The cost of any prescription glasses or lenses – covered up to €400.

Hearing

- ✓ One hearing test per year – full cover.
- ✓ The cost of any prescribed hearing aid – covered up to €350.

Optional Add-on

- You can add optional cover for travel benefits for an additional premium.
- You can add optional cover for dental treatment benefits for an additional premium.

Please check your policy documents to confirm if you have purchased an Optional Add-on.



Are there any restrictions on cover?

- ! You are not covered for five years in respect of any medical treatment for any medical condition which existed before the start of your cover. (Where you were covered by an Irish licensed Health Insurance Plan, immediately before the start of this policy, cover for pre-existing conditions will be extended to the start of that policy).
- ! Your out-patient medical expenses excess is €75 per medical condition.
- ! A 20% co-insurance applies to all out-patient prescribed drugs and medicines and each psychiatric visit.
- ! A 50% co-insurance applies to prescription glasses/ lenses.
- ! More than 12 months combined in-patient treatment in total in respect of any one insured event.
- ! Treatment for any alcoholism, drug or substance abuse or dependency.
- ! Participation in certain sports and activities
- ! Cover for overseas stays of less than six months.



Where am I covered?

- ✓ You are covered for medical treatment in the countries listed in the Geographical Area selected by you:
 - Area 1 - Europe only
 - Area 2 – Worldwide excluding USA & Caribbean
 - Area 3 – Worldwide
- ✓ You are also covered for a total of 60 days in any period of insurance for necessary emergency medical treatment outside of your selected Geographical Area.



What are my obligations?

You are required to:

- Contact us when planning medical treatment in order to obtain pre-authorisation.
- Make any payments within the required or agreed time and to provide any documents or information which we request.
- You must answer all questions fully and honestly at all times and tell us immediately if there is any change to International Health Insurance plan or if there are any changes in your circumstances.
- You must act honestly and within the terms of contract or agreement.
- Inform us if you are returning home to Ireland for longer than 60 days (120 days if you are a student).



When and how do I pay?

You must pay your premium when it becomes due. The policyholder is responsible for ensuring all payments are made. If you are signed up for direct debit you are required to pay in line with your payment schedule. If you are paying by salary deduction your premium will be deducted by your employer from your salary. All premiums owed must be paid within the policy term.



When does the cover start and end?

Your policy will last for one year unless we agree to a shorter period. The policy start and end dates are shown on your policy document.



How do I cancel the contract?

You can cancel your policy at any time by following the instructions in your terms and conditions.

If you cancel your policy of insurance within 30 days from either the date of issue or receipt of your policy terms and conditions, we will refund to you any premium you have paid and we will recover from you any payments we have made.

Note: After the initial 30 day cooling off period, we require a minimum 6 months' premium regardless of when you decide to cancel your policy; thereafter we will provide a pro rata refund on any unused portion of paid policy premium.