TRAVEL INSURANCE

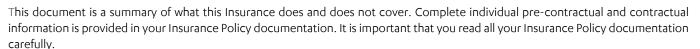
Insurance Product Information Document

Company: KOOPERATIVA poisťovňa, a. s.,

Vienna Insurance Group registered at Štefanovičova 4,

816 23 Bratislava, Slovakia,

Insurance reference number 00 585 441



What is this type of Insurance?

This insurance is a cover of Medical Expenses for medically necessary treatments following an Accident or Acute Illness as well as of Non-life Benefits mentioned below. Within the Sum Insured there are sub-limits for reimbursement of certain expenses and for services covered by the Insurance.



What is Insured? Who is covered?

This insurance is designed for

- a. natural persons looking for a comprehensive travel insurance, and
- b. for the legal entities seeking comprehensive travel insurance for their clients being natural persons or for their employees and employees' family members.

General Benefits

✓ Medical Emergency and other Expenses

Should you become unwell whilst on your trip we will pay for your hospital, ambulance, emergency, family visit, medical repatriation costs up to the insurance limit.

- ✓ Palliative Dental Costs: €/\$250 per person.
- Lump Sum payable in case of Accidental Death or Dismemberment

We will pay the relevant percentage of the Sum Insured if, within one year from the date of an Accident or Injury covered by the Policy, death or permanent disability

Sports Activity up to the limit of €/\$100 000 per person.

✓ Loss of Luggage

We will cover you if your personal belongings are lost or stolen up to €/\$2,000 per person per policy.

- Luggage Delay by more than 12 hours up to €/\$350 per person.
- Trip Delay by 6 hours or more up to €/\$2 000 per person.
- Trip Cancellation for non-refundable expenses up to €/\$ 5 000 per person.
- ✓ **Trip Interruption** up to €/\$ 5 000 per person.
- ✓ Emergency Return to Home country up to the stated limit in the Policy Terms and Conditions for a roundtrip economy class ticket
- ✓ Emergency Medical Reunion up to the stated limit in the Policy Terms and Conditions for a roundtrip economy class ticket
- ✓ **Liability Insurance** incl. Legal Expenses up to \$500,000 per person.



What is not Insured?

Medical Treatment received due to a Pre-Existing Condition or Complication thereof.

Kooperativa

- Medical Treatment, which is not Medically Necessary, as defined in the Policy.
- Medical Treatment related to Organ Transplants.
- Suicide, Attempted Suicide (including drug overdose) Self-destruction, Attempted self-destruction, or Intentional self-inflicted Injury while sane or insane.
- Medical Treatment for an Injury or Sickness resulting from the Insured's intoxication or use of illegal drugs.
- Any Treatment related to the Detoxification, Rehabilitation, and all support service.
- Anything mentioned in the General Exclusions Section of your Insurance Policy.

Other Exclusions apply, please refer to your Insurance Policy Documentation for the full details of Exclusions, Limitations and Terms and Conditions.



Are there any Restrictions on Cover?

- Medical treatment, goods and services that are not indicated as covered in the schedule of benefits
- ! The amount of the deductibles or co-payment (part of the claims to be borne by the insured person), as stated in the insurance contract.
- ! You cannot claim more than the Sum Insured shown in your Policy Schedule and/or Policy Document.
- ! Pre-existing and Chronic Conditions are not covered.

Other Restrictions apply. Please refer to your Insurance Policy for more details.

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Where am I covered?

This Insurance covers you in the Geographical Areas stated within your Policy Conditions.



What are my Obligations?

You must carefully review and understand your Insurance Policy Terms and Conditions. This document is only a summary of Insurance cover and does not contain all Exclusions and Limitations, as well as other Terms and Conditions.

- You must make sure you meet the Eligibility criteria under your Insurance Policy.
- You must provide full and accurate information to all questions asked. Your answers must be true to the best of your knowledge and belief. Your answers will form part of the statement of facts on which your Insurance Policy will be based. If you become aware of the fact that the information you have provided us is inaccurate or has changed, you must immediately inform us. Failure to do this may invalidate your insurance and claims might not be paid, meaning that you will be liable for any related costs.
- You must cooperate fully and present claim substantiating documentation and information (including relevant health related personal data) in order to receive Benefits under the Insurance Policy.
- You must pay the Insurance Premium.
- You must obtain preauthorization for benefits as requested in your Insurance Premium.
- You must inform us about changes of your address, country of residence, contact details and other data as requested in the Insurance Policy.



When and how do I pay?

Your Premium is payable either by a credit or a debit card, or via bank transfer.

If your Insurance Policy specifies a Single Premium, it should be paid before commencement of the Insurance Term.



When does the cover start and end?

Your insurance is effective on the latest of:

- The Effective Date of the Policy; or
- The moment You depart from Your Home Country airspace, provided full Premium due has been paid.

Your insurance will end on the earliest of:

- The date You are no longer an Eligible Individual; or
- The date You return to Your Home Country; or
- The expiration of 364 days from the Effective Date of coverage; or
- The date shown on the Individual Insurance Certificate or Membership Card issued by the Policyholder; or
- The date the You become a permanent resident of the United States.



How do I cancel the Insurance Policy?

If You decide to cancel this Policy, You can do so within 7 days of receipt of the Policy and will receive full credit for the Insurance Premium You've paid, provided You have not started Your journey and no claim under this Policy has occurred.

- If You decide to cancel Your Policy after this period, You will receive a credit for the percentage of the Insurance Premium paid calculated on a pro-rata basis equivalent to the period of cover left unused provided that no claims have been made.
- If a claim has been made, or there has been an incident which may lead to a claim, the Insurer will not refund any Insurance Premium.

