

Foreigner's Medical Insurance

Insurance Product Information Document



Company: Cosmos Insurance Company Public Ltd

Product: Foreigner's Medical

This document is a summary for information purposes of Foreigner's Medical insurance Policy. All terms and conditions of cover are included in our policy wording, specimen of which you may request by your insurance intermediary or at our offices. The Company has the right to accept, amend or reject the standard terms of cover.

What is this type of Insurance

This is an insurance policy that is contracted by the Employer in respect of a non-Cypriot employee for the issuance of a residence and work permit in Cyprus.

This policy provides to the insured in respect of medical expenses occur following an accident or illness.



What is covered?

Annual maximum limit of 1€4.000 and maximum limit per accident or illness €9.000

In-patient treatment

- ✓ Daily hospitalization (Room & Board) up to €70
- ✓ Daily hospitalization in intensive care unit (Room & Board) up to €175
- ✓ Operating theatre, drugs and dressings & internal appliances
- ✓ Surgery costs, surgeons' and anesthetists' fees and diagnostic tests
- ✓ Physician and nurse fees
- ✓ Repatriation of mortal remains up to €3.450
- ✓ Child birth allowance (Natural or Ceasarean section) up to €515

Out-patient plan (optional) with annual maximum limit of €900 per insurance period

- ✓ Out-patient consultation with a maximum limit of €20 for each consultation
- ✓ Diagnostic Tests up to €175
- ✓ Drugs up to €175



What is not covered?

Any expenses related to the below are excluded unless it is otherwise specified to the table of benefits and certification of insurance:

- ✗ Suicide or self-inflicted injury
- ✗ Invasion, hostile raid, war, warfare activity or civil war, revolution
- ✗ Conflict/acts of terrorism, criminal acts
- ✗ Preventive medical examinations
- ✗ Mental, neurological or neuropsychological disorders, epileptic crises, congenital disorders, depression
- ✗ Pregnancy, ectopic pregnancy, curettage
- ✗ Geriatric treatment, cosmetic or plastic surgery
- ✗ Treatment for rheumatism, arthritis, lumbago, sciatica, myalgia and cervical pain, unless there is hospitalization
- ✗ Physiotherapy unless there is a bodily injury caused by an accident
- ✗ Expenses that are due to work related accident
- ✗ Hazardous activities
- ✗ Allergies
- ✗ Fertility treatment / birth control
- ✗ HIV / AIDS
- ✗ Alcohol and substance abuse
- ✗ Chemical contamination and exposure
- ✗ Dental and vision treatment
- ✗ Pre-existing conditions
- ✗ Cosmetics, antiseptic products and dermatological products for cosmetic purposes.

All exclusions are defined to the policy wording, certification of insurance and any other special terms and/or endorsement.



Are there any restrictions on cover?

- ! Expenses that exceed the annual maximum limits stated to the table of benefits.
- ! Any expenses incurred outside Cyprus.
- ! Benefits that are not provided under the chosen plan.
- ! The annual deductible amount of €15 that the policyholder or insured must pay per period of cover before the policy will pay for eligible claims under the out-patient plan.
- ! 10% co-insurance for In-patient and 20% co-insurance for Out-patient treatment for each incident.
- ! Pre-existing conditions and any other condition which is personally excluded
- ! Expenses that are not medically necessary or reasonable and customary.
- ! 10 months waiting period for child birth allowance
- ! 6 months waiting period for gynecological problems
- ! 30 days waiting period for illness

All restrictions are defined to the policy wording, certification of insurance and any other special terms and/or conditions.

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Where am I covered?

- ✓ You are covered within the geographical area of the Republic of Cyprus.



What are my responsibilities?

- To ensure that the information, details and descriptions provided are accurate and truthful and that you have not withheld or misrepresented any event.
- To pay the premium on due date.
- In the event of any claim to provide accurate and truthful information and submit all relevant documentations and any further information requested which are necessary for the evaluation of the claim.
- In-patient claims must be submitted within 14 days from the date when the expenses occurred and 7 days for Out-patient treatment.
- To follow the terms and conditions of your policy.



When and how do I pay?

The premium is payable annually to the Company in advance as shown on the Policy Schedule and Premium Schedule.

The method of payment can be:

- Cash
- Direct Debit
- Credit / Debit card (VISA)



When does my insurance cover start and end?

Cover is provided within the period of insurance stated to your policy (Certification of Insurance, Policy Schedule). The policy has a duration of 12 months and is renewable.



How can I cancel my insurance contract?

Policyholder has the right to terminate the policy at any time by sending a written notice to the Company.