

## LUX MED Hospital Insurance for Individual Customers – Illness Care.

Document containing information about an insurance product

**Company:** LMG Försäkrings AB S.A. Branch in Poland

**Product:** LUX MED Hospital Insurance for Individual Customers – Illness Care.

Full details provided before the conclusion of the insurance contract and information concerning the contract itself are found in other documents forming an integral part of the contract, including the General Terms and Conditions of LUX MED Hospital Insurance for Individual Customers – Illness Care (GTC No. I/1/2025/OWCH).

### What kind of insurance is it?

Voluntary individual personal insurance — Chapter II group 2 in accordance with the appendix to the Act on insurance and reinsurance activity of 11 September 2015.



### What is the subject matter of the insurance?

The subject matter of the insurance is:

- ✓ the health of the insured person.

We provide insurance cover in the scope of:

- ✓ hospital care coordination, aimed at assisting the Insured Party by the Hospital Care Coordinator in the use of the hospital services,
- ✓ hospitalisation on a scheduled basis in case of receiving a referral for hospital treatment,
- ✓ diagnostics necessary to commence hospitalisation,
- ✓ rehabilitation in the scope of physical therapy and kinesiotherapy or lymphatic drainage after hospitalisation,
- ✓ diagnostic tests necessary to monitor the recovery process during the rehabilitation period,
- ✓ follow-up visits after hospitalisation.

The event which entitles the Insured Party to use the insurance shall be the receipt of a referral for hospital treatment, where a specific ICD-10 code of a given illness is indicated. A specified scope of illnesses, with indication of their ICD-10 codes, is provided in Appendix No. 1 to the GTC for persons over the age of 18 or in Appendix No. 2 to the GTC for persons under 18 years of age.

The above information is indicative, detailed information is included in the GTC.



### What is not covered by the insurance?

- ✗ Treatment and consequences of diseases other than those indicated in the scope of insurance,
- ✗ Urgent treatment of illnesses, conditions, injuries, including sudden and acute conditions,
- ✗ Hospitalisation which, for medical safety reasons, requires one-time high-level and multi-specialist treatment in a medical facility not included in the list of Hospitals we have provided, or its scope exceeds the scope referred to by the GTC.

The above information is indicative, detailed information is included in the GTC.



### What are the limitations of insurance coverage?

Our liability does not extend to incidents resulting from:

- ! transplantation of organs or tissues, cells, cell cultures,
- ! practising high-risk sports by the Insured Party,
- ! self-diagnosis, treatment, modification of prescribed treatment or gross negligence by the Insured Party,
- ! committing or attempting to commit a crime or offence,
- ! being under the influence, abusing or being poisoned as a result of the voluntary consumption of: alcohol, drugs, other intoxicants or psychotropic substances.

The above information is indicative, detailed information is included in the GTC.



## Where is the insurance valid?

- ✓ The insurance is valid in the territory of the Republic of Poland.
- ✓ Hospital services are provided solely at the locations indicated by us, the full list of which is updated on an ongoing basis and is available at: [www.opiekaszpitalna.luxmed.pl](http://www.opiekaszpitalna.luxmed.pl).



## What are the obligations of the Insured Party?

- Notifying us of an insurance event within 60 days of referral to a Hospital.
- Informing us of all circumstances known to the Insured Party that we will ask about before concluding the Contract.
- Following physicians' recommendations and adhering to the rules in force at the medical facilities and hospitals.
- Complying with the service performance deadlines agreed with us.
- Producing an identity document with a photograph prior to provision of the service.
- Providing us, together with the application for the Service, with all the possessed medical documentation which is related to the reported event and to cooperate with us if the documentation provided requires supplementation or if additional information is necessary to establish our liability for the reported claims.



## How and when are premiums paid?

The premium may be paid on a one-off basis or in monthly instalments. The amount of premium or its instalments, frequency and deadlines for payment of premium instalments, as well as the details regarding the manner of its payment will be provided in the policy. The premium must be paid by bank transfer to the account indicated in the Policy.



## When does the insurance coverage start and end?

The insurance coverage shall commence on the date agreed with the policyholder and indicated in the policy. The insurance agreement is concluded for 12 months.

Depending on whichever occurs first, the agreement and insurance coverage shall terminate:

- on the day on which we received the Policyholder's notice of withdrawal from the Agreement,
- upon the lapse of the last day of the notice period,
- upon the lapse of the last day of the additional 7-day time limit for payment of the next instalment of the Premium, if the instalment has not been paid, in accordance with the GTC,
- upon the lapse of the last day of the term of the Agreement, if the coverage is not extended on the Anniversary,
- upon the lapse of the last day of the Coverage Period in which any of the Insured Parties reached the age of 70 (in the case of the Main Insured Party, a Partner, an Adult Child) or the age of 18 (in the case of a Minor Child),
- on the day of death of any of the Insured Parties,
- on the day of death of the Policyholder.



## How can the contract be terminated?

In the case of agreements concluded remotely, the policyholder has the right to withdraw from the insurance agreement without giving a reason within 30 days from the date of notification of the conclusion of the agreement, i.e. from the date of delivery to the electronic address of the policy confirming the conclusion of a given agreement or from the date of confirmation of the information referred to in Article 39(3) of the Act of 30 May 2014 on Consumer Rights, if this is a later date.

The Policyholder has the right to terminate the agreement at any time with one month's notice, which starts on the 1<sup>st</sup> day of the month immediately following the date of submitting the termination notice.

A declaration of withdrawal from the agreement or termination of the agreement can be sent to our e-mail address: [obslogaubezpieczenia\\_ind@luxmed.pl](mailto:obslogaubezpieczenia_ind@luxmed.pl).