

Detailed description of health insurance programmes of ERGO Life Insurance SE Latvian branch

- Area of the policy: The Republic of Latvia
- Validity period of the Insurance: 24 hours a day

Coverage/ services (EUR)	Sums insured/ limits (EUR)
Total sum insured (out-patient and in-patient services)	45 000.00
Limit per one sickness	5000.00
Out-patient services, including	
Physical therapy treatments, out-patient rehabilitation	within one month after check-out from hospital
State emergency medical care	
In-patient services (treatment in hospital)	
Emergency dentistry (1 case per period)	50.00
Payment for medicine	60.00 (20.00 per one sickness)
Additional coverage - Repatriation	5000.00
Total sum insured of the programme	50 110.00

Acute illness and chronic disease conditions are paid in accordance with the referral of the family doctor and/ or special doctor assigned by him/her.

Payment for service:

In contracting institutions (Partners specified by ERGO):

1. in the amount of 100%;
2. the EU and the European Economic Area Member State
Students without EHIC cards in amount of 75%.

Non-contracting institutions in the amount of 75%.

Out-patient services:

- Family doctor services (consultations, examinations, manipulations etc.);
- Services of doctors - specialists under the referral of the family doctor;
- Services of doctors - specialists of direct availability without referral of the family doctor (gynecologist, oculist, psychiatrist);
- Laboratory and diagnostic examinations with referral of the family doctor or doctor - specialist assigned by him/her;
- Physical therapy treatment, out-patient rehabilitation with referral of the treating doctor within one month after check-out from hospital.

In-patient services (upon prior alignment) with referral of the family doctor or doctor-specialist assigned by him/her.

State emergency medical care

Prevention of conditions/ cases dangerous for life.

In order to receive payment, it is necessary to submit discharge from the in-patient institution.

Emergency dentistry (annual limit eur 50.00)

One case per period of insurance shall be covered. Provides payment for the services of emergency dentistry assistance during the first visit in case of acute teeth pain:

- doctor's consultation
- X-ray in order to specify diagnosis
- local anesthesia
- root canal opening and cleaning
- inserting temporary fillings
- tooth extraction

Purchase of medicine (annual limit eur 60.00)

Medicine shall be covered in accordance with prescription issued by treating doctor up to the amount of EUR 20.00 per one sickness, maximum up to EUR 60.00 during the period of insurance.

Repatriation (sum insured eur 5000.00) (Upon prior alignment)

Transportation of the insured person or human remains to the home country.

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To insure is to understand.

Key exclusions:

- General exclusions defined by Law On Insurance Contracts and by Special conditions of Insurance policies from Nr. 73-590-3000 till Nr. 73-590-3012;
- expenses, which have occurred, when treating the disease or injury diagnosed prior to the start of the Insurance contract, including expenses, which have occurred during the treatment of chronic illnesses;
- cosmetic services and treatment, services of aesthetic dermatology (surgery);
- non-traditional diagnostics/ treatment;
- family planning, contraception, infertility diagnostics and/or treatment, artificial insemination, services related to abortion without medical indications and treatment of consequences thereof;
- cardiovascular surgeries and medical treatment associated with organ transplants and prosthetics, eye refraction corrective surgeries, plastic and reconstructive surgery, tissue substitute materials, supplementary materials, accessories and technical aids;
- doctors' fees, selection of doctors, council of doctors, out-patient and in-patient services, social care, paid oncology, hematology and palliative treatment;
- diagnostics and treatment of sexually transmitted diseases, including HIV and AIDS, as well as diagnostics and treatment of consequences thereof, diagnostics and treatment of viral hepatitis, diagnostics and treatment of fungal diseases;
- expenses of diagnostics and treatment of health disorders, which have occurred as a result of the use of alcohol, narcotic or toxic substances, treatment of mental diseases or syndromes;
- expenses, which have occurred due to the Insured person influencing his/her health (has intentionally caused bodily injuries him/herself) or self-treatment;
- expenses, which have occurred as a result of radioactive intoxication, radioactive contamination, natural disasters;
- expenses, which have occurred upon the Insured person participating in war or similar actions, formation of any kind of military groups, terrorism as well as mass disturbances;
- expenses, which have occurred upon the Insured person performing unlawful activities, violation of rights or committing criminal offence (or taking a part therein) if it has been recognized by the court or other competent institution;
- expenses, which have occurred due to Force Majeure;
- services, which are received upon failing to comply with the provisions of the Insurance contract;
- services, which are received without medical indications, expenses for the execution of medical documents;
- expenses, which have occurred from traumas or bodily injuries obtained as a result of professional sport (engagement in sport shall be deemed as professional if it is the basic occupation or one of the sources of income of the Insured person).

The ERGO logo is displayed in a large, bold, white sans-serif font against a dark red background. The letters are thick and closely spaced, with a slight shadow effect.

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