Product Information
STUDIUM Fee-for-Service Health Insurance

Generali Biztosító Zrt. • Customer Service Direct Line: +36 1 452-3333 • generali.hu/kapcsolat

1. The core concept of STUDIUM Insurance

The STUDIUM insurance product of Generali Biztosító Zrt. (Generali Insurance Ltd.) provides fee-for-service health insurance coverage primarily for natural person foreign citizens aged 18 to 65 years who are ***enrolled as students at the Károli Gáspár University (registered seat: 1091 Budapest, Kálvin tér 9.) under the in the Stipendium Hungaricum government grant program*** and who are added to the coverage of the STUDIUM insurance policy concluded by and between the University as Policyholder and the Insurance Company. A residence permit for a longer stay in Hungary requires appropriate health insurance coverage. Generali's STUDIUM product is suitable for that purpose, as well.

The insurance covers the costs of medical procedures, treatments, physician and hospital services, medications and medical equipment, and in a medical necessity, the insured person's patient transport, provided that the insured receives these services at or with the consent of the designated service provider or if such services are arranged by the designated service provider specifically named on the insured's declaration and the Health Insurance Card, except in emergencies (as defined in medicine), when the insured may be treated in a medical institution or by a health care provider other than the designated service provider.

You may read detailed information about the insurance product in the 'Customer Information and General Provisions Governing Insurance Policies' as well as in the 'General Conditions of STUDIUM Fee-for-Service Health Insurance'.
You are advised to carefully read this product information and the policy conditions referred to above which are integral parts of the insurance policy, so that you clearly understand what events are covered under the insurance you wish to take out.
Please be advised, furthermore, that as set forth in the policy conditions and in this Product Information, there are cases which are not covered under this insurance, or where the benefit payment is limited, or where the Insurance Company may be relieved from benefit payment.

2. What you need to know about this insurance

Parties to the insurance policy:

- **insurance company:** Generali Biztosító Zrt. (H-1066 Budapest, Teréz krt. 42-44.)
- **Policyholder:** ***Károli Gáspár University (registered seat: 1091 Budapest, Kálvin tér 9.)*** **the institution which takes out the insurance policy from the Insurance Company and agrees to pay the insurance premiums.**
- **insured**: any natural person of foreign citizenship participating ***in the Stipendium Hungaricum government grant program,*** who is not less than 18 and not more than 65 years of age as at the date when the insurance policy is concluded and whose health is covered under the insurance with respect to specific insured events, and who is enrolled as a student **at the *Károli Gáspár University (registered seat: 1091 Budapest, Kálvin tér 9.)*** during the policy period.

The insurance policy is concluded pursuant to a written agreement by and between the policyholder and the insurance company.
In order to add new insured persons to the coverage of the insurance policy (extension of coverage), a written consent of the particular insured needs to be obtained. This may be done so if the new insured duly completes and signs the insured's statement as well as the Health Insurance Card.
The Insured's Statement shall constitute a part of the insurance policy. The insured is required to complete all the prescribed declarations with complete and true information.
Health insurance card: a card bearing the same serial number as that of the insured's statement and issued by the insurance company containing the most important information related to the insurance coverage, which is designed to be proof of the insurance coverage at the health care service provider.

An insured may be added to the insurance coverage for a fixed period not exceeding the insurance period.

The insured will be added to policy as at the time when the respective insurance coverage commences and will be removed from the policy when the insurance coverage terminates.

The insurance period is stated on the Insured's Statement as well as on the Health Insurance Card.

The insurance coverage of a particular insured shall commence at 0 a.m. on the day following the day when the insured's statement and the Health Insurance Card are signed by the insured - *if the the insured's statement arrives to the Insurance Company* - and provided that the Policyholder has paid the single premium for the particular insured in full to the Insurance Company.

No waiting period is stipulated.
Geographical limit: Hungary
Limit: HUF 2,000,000 The insurance company shall pay a maximum of **two million HUF** to cover the **costs of medical and health services received by the insured in medical necessity** during the insurance period/period of the insurance coverage extension specified on the insured's statement:

- **of which maximum HUF 100,000 may be paid to cover the costs of medications,**
- **maximum HUF 100,000 may be paid to cover the costs of durable medical equipment.**

Deductibles: the insurance company shall pay 50% of the costs of medications and durable medical equipment purchased or received in medical necessity, so these costs shall be subject to 50% deductibles. Other deductibles shall not be applied.

3. If you need medical treatment:

You are advised to get medical attention as soon as you notice symptoms and not to wait until your condition significantly deteriorates. If you believe that you need to consult a medical professional, do not hesitate to do so.
The designated service provider needs some time to arrange that the appropriate physician can meet you at a suitable time.
In acute cases, based on your complaints or the nature of your symptoms, you may be offered an appointment with a doctor only beyond 48 hours.
In all cases, follow the instruction of the designated medical service provider/medical management company.
Please, make sure you always have your STUDIUM Health Insurance Card with you, as you may never know when you need it.

4. Designated service provider:

HEALTH CARE ON WORKDAYS	HEALTH CONSULTATION SERVICE
Company name: Szent Kristóf Szakrendelő Kft. ***Address of the Medical Center:*** ***1117 Budapest, Fehérvári út 12.*** ***To make an appointment (to book a medical appointment) CALL OUR ENGLISH-SPEAKING OPERATOR DURING SURGERY OPENING HOURS at: +36 30 859 2657.*** ***Recepcion times: Monday – Friday: 08.00 – 20:00***	***8:00a.m. and 20:00p.m. on workdays;*** ***Call the phone number below to reach an English-speaking primary care physician.*** ***Telephone number of primary care physician: 30/678-6450.***

5. Designated service provider:

HEALTH CARE DURING OUT OF RECEPTION HOURS
At other times (when the clinic is closed, at weekends, on bank holidays, at night), **call the central telephone number 1830 if you develop acute complaints** (for example, high fever that can only be relieved with prescription medication, sudden pain, cramps, vague abdominal and chest complaints, acute symptoms of a chronic disease) and **if your condition is not immediately life-threatening, but medical care cannot be postponed until the next appointment of the designated service provider**.

There is no English menu option on 1830 - if there is no Hungarian-speaking helper with you, it is advisable to call 112. In this case, you will be asked about your complaints on 112, and then an English-speaking person from 1830 will call you back with the answer.

EMERGENCY CARE 24 HOURS A DAY
In life-threatening internal medical situations (such as severe chest pain, dyspnea – shortness of breath- , loss of consciousness) **or in cases requiring immediate surgical/traumatological care, the emergency number, 112 should be called!**
After a short wait, the call will be transferred to an English-speaking operator. (It may be helpful if the call is made together with a Hungarian-speaking friend.)
Emergency care is available at any time of the day, further information can be found at mentok.hu/ugyelet.

IMPORTANT INFORMATION!
On the phone no diagnosis can be established, no medical indications or treatment can be provided; the same refers on proper medical treatment, or the prescription of medication or medical equipments!

6. Submitting invoices on services prepaid by the insured and the reimbursement of costs

The costs of medical and health services provided or arranged for by the designated service provider do not need to be prepaid by the insured, as the insurance company pays the costs of such medical treatment directly to the medical facility providing the care or through the designated service provider.

If the insured is treated in a medical facility other than the designated medical facility and the case does not qualify as a medical necessity (or emergency) as defined in the clinical standards of care, the designated health care provider shall be notified or informed (by the insured or by the medical facility providing medical treatment to the insured) if practicable **before the medical treatment is started but no later than on the weekday following the day of such treatment** of the name of the medical facility where the insured receives/received medical care and of the medical condition that is/was treated, to allow that the designated health care service provider may contact the treating physicians, medical facility or health care service provider.

If the condition of the insured only allows him/her to warn the treating health care service provider of the above obligation to supply information, then the insured shall not delay to do so, as it may help the insured to receive earlier and better treatment. On the reverse side of the health insurance card there is information for the institution providing medical care.

If the insured receives medical treatment in an emergency at a medical facility other than the designated service provider, or without the management of the designated service provider, the insured is not required to prepay for such medical care.

The following procedure shall be followed to claim the reimbursement of health care service or the reimbursement of the costs of medication or durable medical equipment prepaid by the insured:

- ***Fill in the attached bilingual claim form***
- ***Enclose all medical documentation related to the health care service used (e.g.: outpatient records, hospital discharge summary, examination records, nursing and care documentation, test findings, laboratory records, images made during diagnostic or histology tests, prescriptions, referrals, etc.)***
- ***Enclose original (or a copy) of the invoice issued to your name in connection with the health care service used or the medication or durable medical equipment purchased.***

Please note that the reimbursement can only be transferred to Hungarian bank account number that shall indicated on the claim form.

Please submit the completed claim form with the attachments to the nearest customer service of Generali Biztosító Zrt., or send these documents electronically to generali.hu@generali.com email address.

If the claim is grounded, the insurance company shall reimburse the costs of the medical services prepaid by the insured or by a third party on behalf of the insured, within 15 days upon receipt of all documents necessary for the assessment of the claim, in local legal currency, by wire transfer to a bank account held in a bank in Hungary pursuant to the invoice and subject to the applicable payment conditions and benefit limits.