

This form, prepared in minimum 2 (two) copies, has been prepared in order to provide general information to the insurance provider and other persons, who will benefit from the insurance, within the framework of insurance contract, on the basis of Regulation concerning Provision of Information in Insurance Contracts, published in the Official Gazette, dated October 28, 2007.

EVEN IF ACCEPTED AND RATIFIED BY THE PARTIES, THIS FORM DOES NOT MEAN A CONTRACT BY ITSELF, UNLESS AN INSURANCE CONTRACT IS MADE IN ACCORDANCE WITH THIS FORM.

A- INFORMATION CONCERNING INSURER:

Of the Insurance Agency, Mediating Contract:

Commercial Title - Plaque Nr. :

Address :

Tel No :

Fax No :

Commercial Title of Insurer, Providing Coverage: **DEMİR SAĞLIK VE HAYAT SİGORTA A.Ş.**

Head Office and Address: Büyükdere Cad. Özsezen İş Merkezi 124/B 34394 Şişli / İSTANBUL

Tel No : +90 (212) - 288 68 51 pbx

Fax No : +90 (212) - 274 65 85

Regional Directorate of Central Anatolia : Ehlîbeyt Mahallesi, Ceyhun

Atıf Kansu Caddesi Başkent Plaza No:106 Kat:12/44 06000

Balgat - Çankaya / ANKARA

Tel No : +90 (312) - 466 02 80 pbx

Fax No : +90 (312) - 427 39 82

Mersis No : 0278006738500017

Website : **demirsaglik.com.tr**

e-mail : **musterihizmetleri@demirsaglik.com.tr**

B-COVERAGES AND GENERAL WARNINGS

- Healthcare Tourism Complication Policy comprises different plans and products. From the proposal, given to you and your certificate and your policy special conditions following preparation of your policy, read and check your coverages and if any, exclusions and contribution rates.
- The subject of this insurance, in addition to Travel Health Insurance General Conditions, is the reimbursement of expenses, arising from complications, which may arise from surgeries, procedures and interventions, performed in hospitals and clinics in Turkey, which are accredited for healthcare tourism, for an insured, who is domiciled abroad and who has traveled to Turkey for healthcare tourism.
- This product may be purchased by choosing an advance policy commencement date of up to 180 days. Policy coverage commences on selected commencement date and expires 180 days (360 days in dental implant and plastic surgery plans) thereafter. For validity of coverages, performed surgeries, procedures, interventions and possible complications must occur during the term of this policy.
- This policy is only valid in case the treatments for complications of surgeries, interventions and medical treatments, performed in Türkiye after policy commencement date, are performed within the territory of Republic of Türkiye.
- This insurance provides coverage for persons between the ages of 0 and 75. Age is not

considered in the calculation of policy premium.

- This policy does not include hospital daily indemnification, daily care pay and daily disability pay.
- In this policy, there is no transfer of rights practice for persons, who have health insurance from another company.
- There is no waiting time for revisional procedures of complications, developed secondary to medical procedures and surgeries, conducted after the issuance of policy.
- There is no policy renewal with the same coverages and therefore there is no lifetime renewal guarantee practice.
- Even if the insurance policy is delivered, the coverages commence with the payment of all of the policy premiums and the issuance of policy. Otherwise, the liability of insurer will not commence.
- Change of Plan: Policy plan to be obtained by the insured for medical/plastic surgeries and procedures, is fixed.
- In case a therapy, beyond the medical treatments, given in the purchased plan, will be administered, related plan will be canceled and policy is issued from appropriate plan. There is no interplan transfer.
- After being insured from www.demirsaglik.com.tr website, with the username and password, to be obtained, you may reach more detailed information concerning policy coverages, coverage amounts.

C- CANCELLATION AND WITHDRAWAL RIGHT

In case a medical treatment has been administered in Türkiye after the issuance of policy or in case 30 days have passed after preparation of policy, policy is not canceled and no premiums are refunded. If claims have been reimbursed under the policy, policy cannot be canceled and premiums cannot be refunded.

In case of death of insurance holder/insured, the policy becomes void. In case the insured has passed away before arriving in Türkiye for medical treatment, the policy is canceled and the premium is paid to legal heirs of insured.

In case the insured has passed away following medical treatment in Türkiye, policy cannot be canceled and no premiums may be refunded.

D- CLAIM PAYMENTS

The amount of healthcare expenses, made by the insured, are paid to the credit card or account of the person, to whom hospital invoice is issued, at the end of 10-day examination and assessment period after delivery of the following documents and additional documents, which may be required under the plan, to the Insurer. If the bank account is not within Republic of Türkiye, payment is made by deducting SWIFT fee.

In case of development of complications, the surgery/procedure to be performed must be performed in the institution, which had performed the initial surgery/procedure.

No expenses, related to initial surgery/procedure (early complications, prolongation of hospitalization due to other health problems, removal of stitches), performed during the term of policy, are not covered.

Invoice for the healthcare expenses must have been issued in the name of the insured. The payment is made to the person, in whose name the invoice is issued.

In case the insured requests payment in the name of another person, an instruction letter with physical signature must be delivered to the Insurance Company, together with supporting documents.

In order to consider a deterioration in health status, developed following a surgery or procedure, as a complication, international medical literature is considered. Malpractice is excluded. In suspicious cases, the insurer may request a second opinion (from a academician physician or a physician from TMA professional society) and consider the case.

While additional documents may be requested on the basis of policy plans, in all reimbursement claims for all plans;

- Letter of authorization, to enable insurer to obtain medical documents
- Initial surgery report
- Consent form, signed by the insured/patient before the initial surgery, specifying possible complications,
- Declaration of insured concerning complication (the commencement date, complaints, etc)
- Medical report, explaining complication treatment, if any, surgery report
- Originals of invoices, showing expenses for healthcare institution, hotel and transportation costs, document, showing flight ticket destination and dates.
- The photocopies of stamp page of passport, showing dates of entry to and exit from Türkiye and the first page, showing identity information.

E- COMPLAINTS AND INFORMATION REQUESTS

Both during the negotiation and execution of insurance contract and also during its term you may contact the abovementioned addresses and phones for all kinds of information request and complaints for your insurance policy.

Insurer is obliged to respond to the requests within 15 (fifteen) business days after the receipt of application.

F - OTHER INFORMATION

Insurance company is a member to Arbitration system.