



**Application-accession (Acceptance) № _____ to the Public Agreement (Offer)
voluntary medical expenses insurance**

Place of conclusion:	Kyiv	Date of conclusion:	
This application-accession (Acceptance) is the full and unconditional consent of the Insured to enter into the Voluntary Medical Expenses Insurance Agreement (hereinafter - the "Agreement") with the PRIVATE JOINT STOCK COMPANY "EUROINS UKRAINE INSURANCE COMPANY" (hereinafter - the "Insurer") (EDRPOU code 22868348, location: 102, Velyka Vasylkivska St., Kyiv, 03150, Ukraine, account number UA033802690000026501056200817 with JSC CB "PRIVATBANK") in accordance with the procedure and on the terms and conditions specified in the Public Agreement (offer) for voluntary medical expenses insurance (hereinafter referred to as the "Offer").			
1. INSURED (FULL NAME)			
Address			
Date of birth		e-mail	
Passport			
2. BENEFICIARY	According to the current legislation		
3. Subject of the Agreement	The subject matter of this Contract shall be property interests that do not contradict the laws of Ukraine and are related to health and working capacity of the Insured (if he/she is also the Insured) or a Third Party (the Insured) designated by the Insured in the Insurance Contract with his/her consent.		
4. Страхові випадки	4.1 Insured event shall be the fact of receipt by the Insured (the Insured person) of medical services, namely provision of ambulance and/or urgent (emergency) inpatient medical care, diagnostics and medical treatment, which is necessary as a result of acute illness or accident, as well as (mark "V")		
	4.1.1. injury as a result of military actions or measures in the form of destruction or damage by mines, torpedoes, missiles, bombs, machine guns, grenades, other weapons, combat vehicles, tanks, UAVs, military and other formations, individual militants, soldiers and other instruments of war.	✓	
	4.1.2. damage caused by ionizing radiation and/or radiation contamination of the territory		
	4.2 Indemnity for medical and other services provided by the Offer and rendered to the Insured (the Insured person) during travel in Ukraine in case of events stipulated by this Contract		
5. Insured persons	Last name, first name and patronymic; date of birth and address		
Insured persons №1			
Insured persons №2			
Insured persons №3			
Insured persons №4			
Insured persons №5			
6. Sum insured	UAH 100,000 (one hundred thousand) per Insured person		
7. Insurance rate			
8. Insurance payment		9. Total insurance payment under the Contract	
10. Franchise	0 UAH		
11. Term of the Agreement	from 00 hrs. 00 min. (inclusive)	23 hrs. 59 min. (inclusive)	
The Contract shall enter into force at 00 hrs. 00 min. of the day following the day of receipt of the insurance premium (part of the insurance premium) in full to the current account of the Insurer or its representative, but not earlier than the date specified in Clause 11. Acceptance.			
12. Territory of the Agreement	Ukraine, except for Donetsk and Luhansk regions, as well as territories located closer than 50 kilometers from territories not under the control of the Government of Ukraine on the date of occurrence of the insured event.		
13. Other conditions	Signed using a one-time identifier sent to the phone number: + _____		
The Application for Adherence (Acceptance) (hereinafter referred to as the Acceptance) and the Offer shall constitute the Voluntary Medical Expenses Insurance Agreement (hereinafter referred to as the Insurance Agreement). The terms and conditions of the Offer are publicly available on the website https://euroins.com.ua by the link and shall be communicated to all Insured persons prior to the conclusion of the Insurance Agreement. The Offer contains additional terms and conditions of the Agreement (including the subject matter of the Agreement, the procedure for termination of the Agreement, change in the degree of risk, terms and procedure for payment of insurance indemnity, reasons for refusal to pay insurance indemnity, rights and obligations of the Parties and other terms and conditions), which shall be used by the Parties in the settlement of legal relations arising from the Agreement. In connection with the conclusion of this Insurance Contract, the Insured confirms that - the terms and conditions of the Insurance Contract specified in the Offer and the Rules are familiarized and agreed to; - prior to entering into the said Insurance Contract, the Insurer has provided the information provided for in part two, Article 12 of the Law of Ukraine "On Financial Services and State Regulation of Financial Services Markets"; - information on identification of the Insured is reliable; - In accordance with the Law of Ukraine "On Personal Data Protection" No. 2297-VI dated 01.06.2010, the Insured shall provide irrevocable consent to the processing of personal data of general nature (surname, name, patronymic, date of birth, place of residence, passport series and number, individual tax number, etc.) to the Insurer for the purpose of statutory activities, namely: to ensure the implementation of relations in the field of insurance, reinsurance in accordance with the Law of Ukraine "On Insurance", and shall also refuse to provide written notice of transfer of personal data - agree to the processing of personal data for financial monitoring purposes and undertake to inform the Insurer of any significant changes in its activities; - the Insurer has obtained the consent of the Insured to conclude this Agreement in respect of them, and the terms and conditions of the Agreement are known and understood by the Insured. - The Insured has provided full information about the Insured Item. The Insured has been informed that in case of providing false/incorrect information at the time of insurance, the Insurer has the right to refuse to pay insurance indemnity			
14. SIGNATURES OF THE PARTIES:			
INSURER Chairman of the Management Board Yanko NIKOLOV  Deputy Chairman of the Board Andriy YAKUC  M.II.		INSURED _____ / _____ M.II. Full name, signature	

GENERAL PROVISIONS

- 1.1. This Public Contract-Offer for voluntary medical expenses insurance (hereinafter referred to as the Offer) is an official offer of Private Joint Stock Company "Insurance Company "Euroins Ukraine" (hereinafter referred to as the Insurer) to the Client to conclude a voluntary medical expenses insurance contract with the Insurer in electronic form.
- 1.2. The offer is a standard form within the meaning of Article 634(1) of the Civil Code of Ukraine (hereinafter - the Civil Code of Ukraine), which may be accepted by a person (the Client) by joining it. The Offer shall be signed by the Insurer using an analog of the handwritten signature of the Insurer's authorized person and a facsimile reproduction of the seal in accordance with the terms of the Agreement on the procedure for signing transactions.
- 1.3. The Voluntary Medical Expenses Insurance Agreement (hereinafter referred to as the Agreement/Insurance Contract) shall consist of this Offer, Acceptance and shall be concluded in accordance with:
 - 1.3.1. The current legislation of Ukraine, the Civil Code of Ukraine, the Law of Ukraine "On Insurance" and other regulatory legal acts;
 - 1.3.2. Rules of voluntary insurance of medical expenses dated August 03, 2021 (hereinafter referred to as the "Insurance Rules");
 - 1.3.3. License issued by the National Financial Services Commission on the basis of Order No. 2696 dated 25.10.2016 (hereinafter referred to as the "License").
- 1.4. Unconditional acceptance of the terms and conditions of the Offer by the Client, in accordance with Articles No. 207, 633, 634, 981 of the Civil Code of Ukraine and Articles No. 11, 12, 13 of the Law of Ukraine "On Electronic Commerce", shall be deemed to be filling in the electronic Application for Acceptance (hereinafter referred to as Acceptance) on the Insurer's website <https://euroins.com.ua> or its partner.
- 1.5. Insurance shall be provided on the terms and conditions specified in the Acceptance in case of an Insured Event.
- 1.6. The Insurance contract shall be deemed concluded/signed by the Insurer by using an analog of the Insurer's authorized person's handwritten signature and facsimile reproduction of the seal, in accordance with the terms of the Agreement on the procedure for signing transactions under this Offer.
- 1.7. The Insurance agreement shall be deemed concluded/signed by the Client in a simplified manner, within the meaning of Part 1 of Article 181 of the Commercial Code of Ukraine, from the date of accession of the Client to the terms of this Offer by concluding/signing the Acceptance in electronic form using an electronic signature with a one-time identifier in accordance with the Law of Ukraine "On Electronic Commerce" and crediting the insurance payment (premium) paid by the Client in full to the Insurer's current account.
- 1.8. To conclude Insurance Contract, the Client (Insured) shall:
 - 1.8.1. fill in the Acceptance on the Insurer's website <https://euroins.com.ua> or its partner's website, indicating the desired insurance terms and conditions and all information necessary for identification about the Insured, the object of insurance, as well as information about all circumstances known to him/her that are essential for assessing the insurance risk. Before entering into the Agreement, the Insured shall be obliged to read the terms of the Offer, the Rules, information about the financial service and confirm the consent to the processing of their personal data. All of the above actions shall constitute a declaration of the Insured's intention to enter into the Agreement
 - 1.8.2. The Acceptance shall be drawn up in accordance with the insurance terms and conditions chosen by the Policyholder and the data provided by the Policyholder. Before signing the Acceptance, the Policyholder shall verify the data entered by him/her and the selected insurance terms and conditions and confirm their accuracy. To conclude the Agreement, the Insured shall sign the Acceptance with an electronic signature with a one-time identifier in accordance with the provisions of the Law of Ukraine "On Electronic Commerce". After signing the Acceptance in the manner prescribed by this Agreement, the Insured agrees that all further relations with the Insurer may be conducted through mobile applications, computer authorized systems without an additional one-time identifier, unless expressly provided for by law.
 - 1.8.3. The one-time identifier shall be sent to the Policyholder by electronic message in the form of an SMS short message to the mobile phone number specified by the Policyholder. In order to sign the Acceptance with electronic signature with a one-time identifier, the Insured shall enter the received identifier in the information and telecommunication system and confirm its entry; as a result, the Insured's electronic signature shall be attached to the Acceptance and the Agreement shall be deemed concluded from that moment.
 - 1.8.4. having familiarized themselves with the terms and conditions of this Offer, the Client (the Insured) shall pay insurance premiums in full by bank transfer to the Insurer's current bank account.
- 1.9. Performing the actions specified in clause 1.8. means acceptance by the Client of all the terms of this Offer and is the conclusion of the Insurance Agreement in electronic form, which in accordance with clause 12 of Article 11 of the Law of Ukraine "On Electronic Commerce" is equivalent to the written form.
- 1.10. After concluding the Insurance Contract, the Client acquires the status of the Insured and receives the Contract in electronic form to the e-mail address specified in the Acceptance. These documents certify the right of the Policyholder to demand fulfillment of obligations under the Insurance Contract from the Insurer.
- 1.11. Insurance contract shall contain a unique number corresponding to the number of Acceptance, as well as individual terms and conditions of the Contract specified by the Insured in the Acceptance.
- 1.12. The Insurer undertakes to reproduce the Contract in hard copy if necessary, upon written request of the Insured. The Insurance contract shall be prepared in writing within 5 (five) working days from the date of receipt of such request and shall be signed and stamped (if any) by each of the Parties.
- 1.13. Terms and conditions not regulated by this Offer shall be governed by the Rules specified in clause 1.3. of this Offer, which are posted on the Insurer's website - <https://euroins.com.ua>, and the legislation of Ukraine.

1. RIGHTS AND OBLIGATIONS OF THE PARTIES

- 1.1. The Insured has the right to:
- 1.2. To familiarize themselves with the Terms and Conditions of Insurance.
- 1.3. Receive a duplicate of the Agreement in case of loss of the original upon written application.
- 1.4. Initiate amendments and additions to the Agreement on the terms and conditions stipulated by the Agreement.
- 1.5. To terminate the Agreement early under the terms and conditions stipulated by the Agreement.

- 1.6. Upon occurrence of Insured Event, to receive Insurance indemnity under the terms and conditions stipulated by the Agreement.
- 1.7. To withdraw from concluded Insurance agreement not later than 7 (seven) calendar days from the date of Insurance agreement entry into force by submitting to Insurer application for withdrawal from Insurance agreement and receive paid insurance premium in full.
- 1.7.1. **The Insurer has the right to:**
- 1.7.2. Obtain all necessary information for concluding the Contract and assessing the insurance risk, as well as verify the accuracy of information provided by the Insured by any means not contrary to the legislation of Ukraine (including, but not limited to, results of medical examination of the Insured's injured persons and other documents).
- 1.7.3. To make inquiries to law enforcement agencies, medical institutions, enterprises, institutions, organizations and individuals who have information on essential terms and conditions of the Contract, and to obtain relevant documents and information confirming the fact and causes of the Insured Event.
- 1.8. To amend the terms of the Agreement and terminate it early on the terms provided for herein.
- 1.9. To refuse to pay Insurance indemnity in cases provided for by the current legislation of Ukraine and this Contract.
- 1.10. To demand refund of insurance indemnity already paid and reimbursement of expenses related to loss settlement in appropriate circumstances provided for by the current legislation of Ukraine and this Contract.
- 1.11. Independently find out the causes and circumstances of an event that may be recognized as insured, require the Insured to provide information necessary to establish the fact and circumstances of an insured event or determine the amount of insurance indemnity.
- 1.11.1. **The Insured shall be obliged to:**
- 1.11.2. To fulfill the terms and conditions of Insurance contract.
- 1.11.3. Timely and in full pay the Insurance premium in the amounts and within the terms stipulated in this Contract.
- 1.11.4. Notify the Insurer of occurrence of Insured Event (event having signs of Insured Event) by any means allowing to objectively record the fact of notification (by fax, telegram, mail, etc.) within the period stipulated by this Contract.
- 1.11.5. Upon conclusion of Contract, provide information to Insurer about all circumstances known to Insurer that are essential for assessment of insurance risk and further immediately upon becoming aware of them, but not later than within 3 (three) business days, inform Insurer in writing about any change in insurance risk or change of information specified in Contract.
- 1.11.6. When concluding Insurance Contract, inform the Insurer of other existing Insurance Contracts with respect to this subject matter of Insurance Contract and subsequently notify in writing of conclusion of Insurance Contracts within 3 (three) business days from the date of their conclusion.
- 1.12. Maintain confidentiality in relations with the Insurer, prevent disclosure of information that is a trade secret to third parties.
- 1.13. To fulfill other duties and perform actions stipulated by the current legislation of Ukraine and this Contract.
- 1.14. The Insured shall submit information (official documents) required for identification, verification, examination of the Insured, clarification of information about the Insured, as well as for fulfillment by the Insurer of other requirements of legislation in the field of prevention and counteraction to legalization (laundering) of proceeds from crime, terrorist financing and financing of proliferation of weapons of mass destruction.
- 1.14.1. **The Insurer shall be obliged to:**
- 1.14.2. Familiarize the Insured with the terms and conditions of the Insurance contract and Insurance Terms and Conditions.
- 1.14.3. Pay insurance indemnity upon occurrence of Insured Event within the terms and conditions stipulated by the Contract.
- 1.14.4. At the request of the Insured, in case of measures taken by him/her that have reduced the insurance risk, to amend or renew the Contract with him/her.
- 1.14.5. Not to disclose information about the Insured and his/her property status, except as provided by the current legislation of Ukraine.
- 1.14.6. To refund the payment in case of withdrawal of the Insured from the concluded Contract within 5 (five) banking days from the date of application for withdrawal from the Contract. In case of application for withdrawal from the Contract, the Contract shall be deemed not concluded, the Parties shall not have any obligations under the Contract.

2. PROCEDURE FOR MAKING CHANGES AND ADDITIONS TO THE AGREEMENT. TERMS OF TERMINATION OF THE AGREEMENT

- 2.1.1. Any amendments and additions to the Insurance Contract that do not contradict the legislation of Ukraine and the terms of the Rules shall be made by mutual agreement of the Parties by renegotiating the Contract.
- 2.1.2. The Party initiating such amendments and/or additions to the Contract shall notify the other Party in writing of its intention to make such amendments and/or additions no later than fifteen (15) calendar days before the expected date of such amendments and/or additions.
- 2.1.3. If either Party does not agree to make changes or additions to the Agreement, then within ten (10) business days from the date of receipt of the proposal to amend or add to the Agreement, the issue of its validity on the previous terms or termination of its validity shall be resolved.
- 2.1.4. The Agreement shall be terminated and expire by agreement of the Parties, as well as in the event of:
- 3.1.5. expiration of its validity period;
- 3.1.6. fulfillment of Insurer's obligations to the Insured in full;
- 3.1.7. death of an individual Insured or loss of legal capacity, except as provided by the legislation of Ukraine;
- 3.1.8. adoption of a court decision on invalidation of the Contract;
- 3.1.9. in other cases provided for by the current legislation of Ukraine.
- 3.1.10. requirements of one of the Parties to the Agreement.
- 2.1.5. The Party initiating early termination of Insurance shall notify the other Party in writing of its intention to terminate Insurance no later than 30 (thirty) calendar days prior to the date of termination of Insurance.
- 2.1.6. In case of early termination of Insurance at the Insured's request, the Insurer shall refund the Insurance premium for the period remaining before expiry of Insurance, minus the standard case management expenses and actual amounts of Insurance indemnity paid under the Contract.

2.1.7. If the Insured's request for termination of the Contract is due to the Insurer's breach of the terms and conditions of the Insurance contract, the latter shall refund the Insurance premiums paid by the Insured in full.

2.1.8. In case of early termination of Contract at Insurer's request, the Insurance premiums paid by the Insured shall be refunded in full.

3.1.9. If the Insurer's claim is due to the Insured's failure to comply with the terms and conditions of the Contract, the Insurer shall refund the Insurance Premium for the period remaining before expiry of the Insurance Contract, less the standard case management expenses and actual amounts of insurance indemnities paid under the Contract.

3.2. In case of early termination of the Contract, full days remaining before expiry of the Contract shall be taken into account.

3.3 The Insurer's expenses standard for case management shall be 50% of the insurance tariff.

3.4. The Insurance contract shall be deemed invalid from the moment of its conclusion, in cases provided for by the current legislation of Ukraine. The Insurance contract shall be declared invalid in court.

3. ACTIONS OF THE INSURER IN CASE OF AN INSURED EVENT (event that may be recognized as insured)

4.1. In the event of any deterioration in health, in order to receive medical care, immediately contact +38 044 390 00 05 and inform

4.1.1. surname, name, patronymic

4.1.2. the number of the contract;

4.1.3. reason for application (complaints, problems related to the Insured person's health).

4.2 If the Insured person has independently paid for medical services related to treatment, he/she may apply to the Insurer for reimbursement of expenses incurred, the Insured person shall, within 30 calendar days from the date of confirmation of the disease by a medical document, provide the Insurer with a complete set of documents specified in Section 5 of the Contract.

4.2.1 documents required for insurance payment may be submitted to the Insurer by sending them by mail to 102 Velyka Vasylkivska Street, Kyiv, 03150, Ukraine.

4.3. Strictly follow the doctor's prescriptions received during the medical consultation.

4.4. Provide the Insurer with the opportunity to investigate the circumstances of the insured event, provide complete and accurate information (including confidential or medical secret) related to the insured event.

4. LIST OF DOCUMENTS CONFIRMING THE OCCURRENCE OF THE INSURED EVENT AND THE AMOUNT OF LOSSES

4.1.1. In case of self-payment for medical services, the Insured (the Insured person) shall provide:

4.1.2. Written application for insurance payment in the form established by the Insurer;

4.1.3. Insurance contract (if necessary, at Insurer's request);

4.1.4. certificate of identification number assignment (if any) and a document certifying the person entitled to receive insurance indemnity under the Contract;

4.1.5. an extract from the outpatient/inpatient card (form 027/o, approved by Order of the Ministry of Health of Ukraine No. 110 dated February 14, 2012);

4.1.6. a list and calculation of the cost of medical services and medicines provided, certified by the seal of the doctor and the medical institution;

4.2. a fiscal receipt of a medical or pharmacy institution, a sales receipt (if the fiscal receipt does not contain the names of services or medicines) for payment for medical services and medicines received;

4.3. a doctor's prescription with a personal stamp;

4.4. In case of insufficiency of documents provided by the Insured (the Insured person) to establish the fact, circumstances, causes of occurrence, consequences of the insured event, the Insured (the Insured person) at the Insurer's request shall provide other documents, taking into account the specifics of a particular insured event, necessary to clarify the circumstances and causes of the insured event, determine the amount of losses, pay insurance indemnity and other documents in accordance with the terms of the contract and/or determined by applicable laws and regulations. In this case, the Insurer shall have the right to extend the period for making a decision to pay or refuse to pay insurance indemnity in accordance with the procedure specified in this Contract.

4.5. Documents specified in clause 5.1. of the Offer shall be provided in the form of originals, notarized copies, simple copies (provided that the Insurer has the opportunity to compare these copies with the original documents) and shall be duly executed, contain seals, signatures, incoming (outgoing) numbers, dates, etc.

4.6. If documents required to confirm occurrence of Insured Event and amount of Insurance Indemnity are not provided in full and/or in proper form, or are executed in violation of existing regulations (documents of competent authorities lack number, date, stamp, have text corrections, etc.), the Insurer shall have the right to postpone the decision to pay/refuse to pay Insurance Indemnity until it receives all necessary documents in accordance with the procedure and within the terms specified in this Contract.

5. PROCEDURE AND CONDITIONS FOR PAYMENT OF INSURANCE INDEMNITY

6.1. Procedure and conditions for making Insurance indemnity.

6.1.1. According to this Contract, the Insurer shall pay Insurance indemnity in the following possible ways:

6.1.1.1. To the Assistance Company that organized provision of medical services to the Insured person;

6.1.1.2. to the Insured person who, upon prior agreement with the Insurer, has paid the cost of medical services received independently;

6.1.1.3. To the person who paid the cost of services rendered to the Insured, provided that the event is recognized by the Insurer as an Insured Event. At the same time, the obligation to prove to the Insurer that the expenses for medical services were paid by the said person shall be borne by such person.

6.1.2. When making payments in accordance with Clause 6.1.1.1. of the Contract, settlements between the Insurer and the Assistance Company shall be made in accordance with the cooperation agreement concluded between them.

6.1.3. In case of self-treatment, the insurance indemnity shall be equal to the confirmed cost of medical services and medicines to the medical (pharmacy) institution that provided medical services (medicines) to the Insured and shall be paid to the account specified in the application for insurance indemnity.

6.2. Insurer's decision on insurance payment:

6.2.1. The Insurer shall make a decision on payment of insurance indemnity within 15 (fifteen) calendar days after receipt of the last required document stipulated by the Contract and shall be formalized by an insurance certificate.

6.2.2. The decision to refuse insurance indemnity shall be made by the Insurer within 15 (fifteen) calendar days after receipt of the last required document stipulated by the Contract.

6.2.3. If the Insurer decides to refuse Insurance indemnity, the Insurer shall notify the Insured and the Policyholder in writing within 5 (five) calendar days from the date of such decision, with justification of the reasons for refusal.

6.2.4. The amount of Insurance indemnity shall be determined based on the actual costs of providing Medical services to the Insured person.

6.2.5. After each insurance indemnity is paid, the sum insured for the respective Insured or the Limit (if any) for the services for which the indemnity was paid shall be reduced by the amount of such indemnity.

6.2.6. The total amount of insurance payments made for each insured event with one Insured person provided for in this Contract shall not exceed the total sum insured established by this Contract for the respective Insured person.

6.2.7. Insurance payments shall be made exclusively in the national currency of Ukraine - UAH.

6.3. The Insurer shall have the right to delay payment of insurance indemnity if:

6.3.1. It has reasonable doubts as to the property interest of the person claiming the insurance benefit.

6.3.2. The relevant competent state authorities, in case of damage to life and health of the Insured person specified in the Contract, have brought the Insured person (his/her family member, Insured's official) to criminal liability within the pre-trial investigation. The issue of insurance payment shall be resolved within 15 (fifteen) working days after closure of the relevant criminal proceedings, submission of an indictment to the court, entry into force of a court verdict, etc.

6.3.3. If there are reasonable doubts about the authenticity of the submitted documents or compliance of the circumstances of the event with the signs of the Insured Event, or the existence of other facts that may be grounds for refusal of insurance payment - for the period necessary to establish the truth about the actual circumstances of the event, but not more than 6 (six) months..

6. EXCLUSIONS FROM INSURED EVENTS AND INSURANCE LIMITATIONS

7.1. The Insurer shall not indemnify:

7.1.1. cost of medical services not provided for in this Contract;

7.1.2. cost of medical services received outside the place of validity of the Contract;

7.1.3. the cost of medical services resulting from injuries that occurred outside the place of the Contract;

7.1.4. costs of hospitalization for the purpose of receiving nursing care;

7.1.5. expenses for additional (alternative) consultations and examinations;

7.1.6. costs of treatment of AIDS and HIV infection; drug addiction, substance abuse, alcoholism, including conditions, diseases, injuries, burns and poisoning resulting from these conditions;

7.1.7. expenses for the treatment of diseases for which a disability group (1,2,3) has been established, disabilities from childhood and their complications; congenital anomalies and defects in development, hereditary diseases;

7.1.9. expenses for the treatment of occupational diseases in accordance with the conclusion of the Research Institute of Occupational Pathology of the Ministry of Health of Ukraine (for example: asbestosis, silicosis, vibration sickness, etc.);

7.1.10. expenses for diagnostics and treatment of diabetes mellitus, tuberculosis, oncological diseases (benign and malignant) and their complications at all stages of the disease, except for conditions requiring emergency medical care lasting up to 5 days;

7.1.11. expenses for diagnostics and treatment of Crohn's disease, ulcerative colitis, except for conditions requiring emergency medical care lasting up to 5 days;

7.1.12. expenses for diagnostics and treatment of systemic connective tissue diseases, including rheumatism in the inactive phase; demyelinating diseases; autoimmune and allergic diseases (except for conditions requiring emergency medical care lasting up to 5 days);

7.1.13. expenses for diagnostics and treatment of injuries and/or illnesses sustained by the Insured Person during military service, participation in military training, maneuvers, testing of military equipment or other similar operations as a military or civilian employee.

7.2. The Insurer shall not pay insurance indemnity in case of expenses for:

7.2.1. charitable contributions and any subscription services;

7.2.2. sanatorium and resort treatment, physical therapy; rehabilitation and restorative therapy after injuries and diseases;

7.2.3. medicines intended for prevention, biostimulants, nutritional supplements, biological supplements, general stimulants (Bittner's balm, Biovital, etc.), general enzymes (wobenzyme, phlogensyme, etc.), multivitamins of foreign manufacturers, dietary supplements, chronoprotectors, herbal remedies, immunostimulants, medicinal herbs, preparations that reduce blood lipids, psychotropic, nootropic preparations, cytostatics, etc;

7.2.4. cosmetic services, plastic surgery, all types of prosthetics, implantation and preparation for prosthetics or implantation, coronary angiography (except in cases of elimination of mortal danger), bypass surgery and stenting of vessels, all types of vision correction;

7.2.5. purchase and installation of prostheses of various types and purposes and auxiliary means of medical use (contact lenses, pacemakers, bandages, implants, intrauterine devices, corsets, etc.);

7.2.6. purchase of transplanted organs, their search and delivery, as well as payment for donor services, medical services related to transplantation;

7.2.7. all types of treatment and examination by alternative medicine methods (homeopathy, shamanism, hypnosis, iridodiagnostics, biocorrection, reflexology, Folle diagnostics, etc.), use of extracorporeal treatment methods (plasmapheresis, hemosorption, hemodialysis, ozone therapy, etc.);

7.2.8. provision of blood substitutes and blood products in case of their absence in medical and preventive care facilities;

7.2.9. cosmetic, preventive and health-improving massage, hydrotherapy and procedures, use of baroclave and laser technologies, speleotherapy.

7.3. The Insurer shall not pay insurance indemnities for the Insured's (the Insured person's) expenses related to provision of such medical and other services:

7.3.1. Medical care in case of exacerbation of a disease that was treated or required treatment in the previous 6 (six) months before the date of travel. Exceptions are cases when the exacerbation of this disease is associated with acute mortal danger to the life of the Insured (the Insured person) or may cause permanent disability. In this case, a prerequisite for the Insurer to indemnify medical expenses is confirmation by the Assistance Company of the critical condition of the Insured (the Insured person);

- 7.3.2. Provision of dental care, except for anesthetic treatment and filling of natural teeth only in cases specified in Clause 10.5. of the Agreement;
- 7.3.3. abortion (except in cases when it is necessary due to an accident or sudden illness), as well as provision of medical services related to pregnancy, its complications and childbirth, starting from the 29th week of pregnancy;
- 7.3.4. Injury in sports - regular practice of any sport by the Insured (the Insured person) and/or irregular physical exercises with extreme loads.
- 7.3.5. Scheduled consultations and examinations during pregnancy, regardless of the gestational age;
- 7.3.6. Treatment of nervous and mental diseases and their exacerbations, treatment of congenital anomalies and mental disorders, as well as relaxation and conditions in the presence of which there is a real risk of rapid deterioration of health;
- 7.3.7. Treatment of venereal diseases and diseases transmitted mainly through sexual contact (including AIDS and HIV infection);
- 7.3.8. Treatment and diagnosis of any oncological diseases;
- 7.3.9. Any prosthetics, including dental prosthetics;
- 7.3.10. Medical examination and medical care not related to a sudden illness or accident, and provision of services not provided for in Section 10 of the Agreement;
- 7.3.11. Conducting rehabilitation therapy or physiotherapy, vaccination;
- 7.3.12. Performing surgery related to cosmetic surgery;
- 7.3.13. performing surgery related to plastic surgery;
- 7.3.14. Prosthetics and transplantation of organs;
- 7.3.15. Provision of medical services that are not mandatory for diagnosis and treatment in the event of a sudden illness or accident;
- 7.3.16. Carrying out preventive vaccinations and disinfections, medical examination;
- 7.3.17. Treatment of the Insured (the Insured person) by his/her relatives;
- 7.3.18. Treatment of the Insured (the Insured person) in a sanatorium and/or rest home;
- 7.3.19. Purchase and repair of auxiliary aids (glasses, contact lenses, hearing aids, prostheses, crutches, canes, etc.);
- 7.3.20. Treatment by non-traditional methods;
- 7.3.21. Treatment of diseases of blood and hematopoietic organs;
- 7.3.22. Treatment of fungal and dermatological diseases, allergic dermatitis caused by exposure to ultraviolet radiation, sunburns of the first and second degree;
- 7.3.23. Treatment of epidemic or pandemic diseases (except for COVID-19);
- 7.3.24. Treatment of acute and chronic radiation sickness;
- 7.3.25. Treatment of disease or consequences (complications) of viral hepatitis, tuberculosis;
- 7.3.26. Treatment of diseases and disorders of the hearing organs, except for acute diseases of the hearing organs;
- 7.3.27. Expenses when the trip was made with the intention of receiving treatment;
- 7.3.28. Artificial insemination, infertility treatment, measures to prevent pregnancy;
- 7.3.29. Repatriation organized without the participation of the Assistance Company;
- 7.3.30. Provision of additional comfort facilities and services, namely: radio, air conditioning, TV, as well as hairdresser or cosmetologist services, etc;
- 7.3.31. The Insurer shall not be liable for compensation for moral damages caused to the Insured (the Insured person) during his/her travel in Ukraine;
- 7.3.32. The Contract shall not apply to the territory of the Insured's (the Insured person's) place of permanent residence;
- 7.3.33. The Insurer shall be released from the obligation to pay insurance indemnity if the insured event occurred before the Insurance contract comes into force.
- 7.4. The Insurer shall not be liable if the Insured Event has occurred
- 7.4.1. as a result of exposure to nuclear energy, ionizing radiation, unless the relevant option is specified in the Acceptance.
- 7.4.2. chemical and bacteriological contamination of the area;
- 7.4.3. as a result of and/or during any act or activity defined as a terrorist act by the law enforcement authority of the country or territory where such act/activity took place, unless otherwise provided by the terms and conditions of the Insurance contract;
- 7.4.4. in case of adverse effects of diagnostic, therapeutic and preventive measures (including drug injections) related to treatment provided to eliminate the consequences of an insured event that occurred during the validity period of the Agreement.

7.5. Restrictions in accordance with sanctions and exclusion clause:

Subject to this clause, no insurer shall provide coverage and no insurer shall be liable to pay any loss or indemnity if, in the event of providing such coverage, paying such loss or indemnity, the insurer may be subject to any sanctions, prohibitions or restrictions under United Nations Decisions or trade and economic sanctions under any laws or regulations relating to national and international trade and economic sanctions.

7. REASONS FOR REFUSAL TO PAY INSURANCE INDEMNITY

- 8.1. Failure of the Insured (the Insured person) to fulfill obligations specified in the Contract and terms and conditions of the Contract.
- 8.2. Intentional actions of the Insured (the Insured person) aimed at occurrence of the Insured event. This provision shall not apply to actions related to fulfillment of their civil or official duty, in a state of necessary defense (without exceeding its limits) or protection of property, life, health, honor, dignity and business reputation. The qualification of actions of the Insured (the Insured person) shall be determined in accordance with the current legislation of Ukraine.
- 8.3. Committing an intentional crime by the Insured (the Insured person) that has led to the insured event.
- 8.4. Submission by the Insured (the Insured person) of deliberately false information about the subject matter of the Contract or the fact of occurrence of the Insured Event (regarding time, place, circumstances, etc.) or failure to report circumstances known to him/her that are essential for determining the probability of occurrence of the Insured Event.
- 8.5. Fraud or other actions of the Insured (the Insured person) aimed at obtaining insurance indemnity.
- 8.6. Late notification by the Insured (the Insured person) of the Insured event without good reason or creation of obstacles to the Insurer by the Insured (the Insured person) in determining the circumstances of the Insured event, in determining the nature and extent of damage.
- 8.7. Failure to notify or untimely notification by the Insured to the Insurer of increase in risk degree.

8.8. Failure to provide documents stipulated by this Contract evidencing the fact of occurrence of Insured Event, causes and amount of loss (except as provided for in this Contract); submission of documents required for making decision on payment of insurance indemnity, executed in violation of applicable regulations (missing number, stamp or date, presence of corrections) or these documents contain inaccurate information regarding time, causes, circumstances of Insured Event and amount of loss.

8.9. Other cases stipulated by the current legislation of Ukraine.

8. DISPUTE RESOLUTION PROCEDURE. RESPONSIBILITY OF THE PARTIES.

8.5. All disputes and disagreements arising out of and/or in connection with the Agreement shall be resolved by the Parties through negotiations, and in case of failure to reach an agreement - in court in accordance with the laws of Ukraine.

8.6. The Parties shall be liable for non-fulfillment or improper fulfillment of the terms and conditions of the Insurance Contract as provided for by the Insurance Contract and the laws of Ukraine..

10. LIST OF MEDICAL AND OTHER SERVICES COVERED BY THE AGREEMENT

10.1. Emergency inpatient care - provision of medical services to the Insured person on the territory of a medical institution for a period exceeding 24 (twenty-four) hours as a result of emergency hospitalization.

10.2. Emergency outpatient treatment at the pre-hospital stage and/or in the outpatient department of a medical institution (doctor's visit, examination and consultation, emergency diagnostic tests, outpatient surgical and therapeutic treatment, purchase of medicines) emergency hospitalization - emergency tests, therapeutic treatment in a hospital, services of medical staff;

10.3. Hotel services (cost of staying in a standard room, intensive care unit, intensive care unit, medical care prescribed by a doctor, purchase of medicines);

10.4. Purchase of medicines prescribed by a doctor for emergency care;

10.5. Emergency dental care - dental services provided to the Insured (the Insured person) for medical reasons within the established limits of liability: in case of acute toothache requiring emergency dental care - equivalent to UAH 4000.

10.6. Emergency obstetric care provided to the Insured (the Insured person) on medical grounds in case of threat to life and health of the Insured (the Insured person), provided that the gestation period of the Insured (the Insured person) was up to 29 (twenty-nine) weeks;

10.7. Transportation of the Insured (the Insured person), in case of clinical necessity, for medical reasons to a hospital or doctor located in the immediate vicinity, by ambulance or other vehicle;

10.8. Repatriation of transportation of the Insured (the Insured person), with the necessary medical support (if such support is prescribed by a doctor and agreed with the Assistance Company) from the place of stay of this person to the place of his/her permanent residence. The decision on the necessity and possibility of repatriation, as well as on the choice of the means of its implementation and route shall be made by the Insurer in agreement with the Assistance Company, medical institution and the Insured's (the Insured person's) doctor;

10.9. Repatriation of the body of the Insured (the Insured person) in case of his/her death due to an accident or sudden illness to the place of his/her permanent residence, or burial (cremation) of the body of the Insured (the Insured person) in a place of stay outside the country (place) of permanent residence of the Insured (the Insured person). All activities related to provision of these services shall be organized exclusively by the Assistance Company in agreement with the Insurer;

10.9.1. The final point of the repatriation route shall be determined by agreement of the parties to the Contract. In particular, it may be the airport in the place of permanent residence where the coffin with the body of the deceased arrives, or the customs office in the place of permanent residence closest to its border.

10.9.2. To organize repatriation, the relatives of the deceased shall as soon as possible provide the Insurer with duly executed documents confirming their kinship with the Insured (the Insured person), as well as a statement confirming their readiness to pick up the deceased body after transportation of the coffin to the place of permanent residence of the Insured (the Insured person).

11. TERMS

Insured person means a non-resident of Ukraine or a stateless person aged 0 to 70 years as of the date of completion of the Agreement.

Acute illness means a sudden deterioration of a person's health with pronounced symptoms.

Medicines and materials - medicines, medicinal products, medical consumables (dressings, disposable syringes, cotton swabs, etc.) prescribed by the attending physician or used by the latter during medical procedures/surgeries and aimed at diagnosis or treatment of the diagnosed disease (subject to the presence of an insured event, in accordance with the terms of the Agreement) and provided for by the Standards of Diagnosis and Treatment, Protocols of the Ministry of Health of Ukraine.

Medical services are a set of special measures received in medical institutions and aimed at improving health, prevention of diseases and disability, early diagnosis of diseases, assistance to persons with injuries, acute and chronic diseases, consultations of specialists, diagnostic and treatment procedures, as well as provision of medicines (medical materials) necessary for treatment of the Insured Person.

Accident means a sudden unpredictable event caused by external circumstances, accompanied by damage to human body tissues, with violation of their integrity and functions, deformation and disorders of the musculoskeletal system. Accidents also include accidental ingestion of foreign objects into the human respiratory tract, drowning, heat stroke, burns, bites of animals, poisonous insects, snakes, frostbite, hypothermia, electric shock or lightning, accidental poisoning by toxic substances, gases, medicines, and substandard food.

12. FINAL PROVISIONS

12.1. If any provision of this Agreement becomes invalid, this shall not invalidate the entire Agreement as a whole or its other provisions, the Parties shall have the right to revise its terms.

12.2. In cases not provided for in this Agreement, the Parties shall be governed by the terms and conditions of the Insurance Terms and Conditions and the current legislation of Ukraine.

12.3. In case of discrepancies between the provisions of this Contract and Insurance Terms, the provisions of this Contract shall prevail.

12.4. Notices shall be deemed to be duly submitted if they are sent by registered mail, fax with acknowledgment of receipt or delivered by courier to the addresses specified in this Contract.

12.5. This Agreement is made in two identical copies in the Ukrainian language, each of which has the same legal force, one copy for each of the Parties.

12.6. By signing this Contract the Insured confirms the following

a) the Insured has read and agreed to the terms and conditions of the Contract and the Rules;

b) prior to entering into this Insurance Contract, the Insurer has provided him/her with the information provided for in part two of Article 12 of the Law of Ukraine "On Financial Services and State Regulation of Financial Services Markets"

c) information on identification of the Insured is reliable.

12.7. The Parties confirm that identification and verification of the Insured is carried out by the Insurer in accordance with the requirements of the Law of Ukraine "On Prevention and Counteraction to Legalization (Laundering) of Proceeds of Crime, Terrorist Financing and Financing of Proliferation of Weapons of Mass Destruction".

12.8. In compliance with the requirements of the Law of Ukraine "On Personal Data Protection" No. 2297-VI dated 01.06.2010, the Insured shall give his/her consent by accepting this Offer:

- to the Insurer's processing of his/her personal data (any information related to the Insured, including surname, name, patronymic, year, month of date and place of birth, address, family, social, property status, education, profession, income, etc.) for the purpose of conducting insurance business (including conclusion and performance of this Contract), and/or offering Insurer's services to the Insured, including by means of direct contacts with him/her through means of communication, as well as carrying out related financial and economic activities

- to make decisions by the Insurer based on processing of the Insured's personal data (in whole and/or in part) in the information (automated) system and/or personal data files;

- The Insurer shall have the right to perform actions with personal data related to collection, registration, accumulation, storage, adaptation, modification, updating, use and dissemination (distribution, sale, transfer), depersonalization, destruction of information about the Insured;

- storage of the Insured's personal data by the Insurer during the term of the Contract and three years after its termination;

- realization and regulation of other relations requiring processing of personal data in accordance with the Contract and current legislation of Ukraine;

- processing of the Insured's personal data for financial monitoring purposes and for informing the Insurer of significant changes in its operations;

- the Insurer shall provide access to the Insured's personal data to third parties at the Insurer's discretion; the Insurer shall transfer the Insured's personal data to third parties without notifying the Insured.

12.7. By accepting this Offer, the Insured confirms that he/she has been duly notified of inclusion in the Insurer's personal data base(s), informed of his/her rights, and informed of the purpose of collecting such data.

10.10. The Parties agree that the insurance coverage under the Insurance Contract or any provision of the contract shall not be performed if the provision of such coverage or such provisions violate laws, regulations or governmental orders on economic sanctions adopted, applied or currently being implemented by the United Nations and/or the European Union (hereinafter referred to as the Sanctions Regulations) or any action already taken or planned to be taken with respect to insurance payments violates the Sanctions Regulations (including, without limitation, over

Private Joint Stock Company

"Euroins Ukraine Insurance Company "

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Chairman of the

Management Board Yanko NIKOLOV /



**Deputy Chairman
of the Board**

Andriy YAKOVENKO /

М.П.

підпис