

Health Insurance

Product: Europa Scheme



Insurance Product Information Document

Mapfre Malta p.l.c. | Middle Sea House | Floriana FRN 1442 | Malta

Mapfre Malta p.l.c. (C-5553) is authorised by the Malta Financial Services Authority (MFSA) to carry on both long term and general business under the Insurance Business Act, Cap. 403 of the Laws of Malta. Mapfre Malta p.l.c. is regulated by the MFSA.

This is a summary of the insurance coverage. It is not personalised to your individual needs. Complete pre-contractual and contractual information can be found in the Health Insurance Policy document, Table of Benefits and Schedule of Approved Healthcare Provider Fees available on <https://www.Mapfre.com.mt/individuals/health-insurance/>, and on your schedule, which you will receive after you purchase the policy.

What is this type of insurance?

The health policy covers the approved costs of medically essential in- and out-patient treatment for acute medical conditions, received in Malta or any other country in Europe. Treatment outside Malta is only covered if the same/similar treatment is not available in Malta.



What is insured?

Annual Policy maximum limit of €100,000 per person.

In-patient & day-case treatment

- ✓ Hospital accommodation
- ✓ Operating theatre, drugs, dressings and eligible prosthesis
- ✓ Surgeon & anaesthetist fees
- ✓ Consultant physicians and specialist medical consultations, pathology, radiology, diagnostic tests and physiotherapy
- ✓ CT, MRI and PET scans
- ✓ Mental health treatment

Cancer Treatment

- ✓ In- and out-patient oncologist and hospital fees, chemotherapy and radiotherapy
- ✓ Oncology-related CT, MRI & PET scans
- ✓ Out-patient oncologist-prescribed cancer drugs

Out-patient Treatment

- ✓ Professional fees for specialist consultations, diagnostic procedures including pathology and physiotherapy
- ✓ Alternative treatment provided by an acupuncturist, homeopath, osteopath or chiropractor
- ✓ Mental health treatment
- ✓ CT, MRI & PET scans
- ✓ GP charges
- ✓ Mini minor procedures performed by a GP under local anaesthetic
- ✓ Out-patient surgical procedures

Other Benefits

- ✓ Emergency dental treatment to restore or replace sound medical teeth lost or damaged following accidental injury
- ✓ Emergency road ambulance
- ✓ Funeral expenses



What is not insured?

- ✗ Addiction and abuse of alcohol, drugs & substances
- ✗ Administrative fees
- ✗ Advanced therapy medicinal products
- ✗ Allergy tests
- ✗ AIDS / HIV
- ✗ Aids & appliances
- ✗ Assistant surgeon / anaesthetist fees
- ✗ Birth control
- ✗ Chronic medical conditions
- ✗ Congenital structural or functional anomalies
- ✗ Cosmetic treatment
- ✗ Criminal acts
- ✗ Developmental problems
- ✗ Dental or orthodontic treatment
- ✗ Dialysis
- ✗ Drugs, dressings, surgical or dental appliances
- ✗ Experimental or unproven treatment
- ✗ Eyesight correction
- ✗ Genetic testing
- ✗ Organ transplant treatment if you are the donor
- ✗ Pre-existing medical conditions, unless otherwise specified
- ✗ Pregnancy or childbirth
- ✗ Preventive treatment
- ✗ Sanctions
- ✗ Self-inflicted injury
- ✗ Sexual dysfunction
- ✗ Sexually transmitted infections
- ✗ Sleep disorders
- ✗ Social or domestic fees
- ✗ Sport injuries
- ✗ Unrecognised medical facilities
- ✗ War and like risks
- ✗ Weight Management



Are there any restrictions on cover?

- ! Cover for pre-existing medical conditions
- ! Specific treatments are subject to approved fees, refer to the Schedule of Approved Healthcare Provider Fees
- ! In-patient mental health treatment is limited to 7 days each year
- ! Cancer treatment is limited to €50,000 each policy year
- ! Alternative treatment is limited to 5 sessions each year and must be received on referral and overall control of a specialist
- ! Physiotherapy is limited to 10 sessions each year and must be received on referral and overall control of a GP or specialist
- ! Out-patient mental health treatment is limited to 5 sessions each year and must be received on referral and overall control of a GP or specialist
- ! CT, MRI & PET scans must be specialist referred
- ! Waiting periods:
Pregnancy and childbirth complications: 10 months



Where am I covered?

- ✓ You will be covered in continental Europe, subject to the limits set in your Table of Benefits.



What are my obligations?

- You must pay your premium
- You must provide medical history as required through the honest completion of the proposal form
- You must obtain pre-authorisation prior to in-patient or any surgical treatment, and CT, MRI & PET scans
- You must provide any information we require to assess your claim
- You must tell us if you are moving to a different country
- You must let us know if you have other insurance which also covers the same or similar benefits



When does the cover start and end?

- The contract start and end dates will be shown in the schedule.



When and how do I pay?

- Premium is payable annually in advance by credit/debit card, internet banking, cash or cheque.
- If you purchase your policy through an authorised intermediary, you must settle annual premium with them.



How do I cancel the contract?

This policy is issued for a period of 12 months and cannot be cancelled.