



WELCOMER

INSURANCE FOR INTERNATIONAL VISITORS IN GEORGIA





WELCOMER MEDICAL INSURANCE FOR INTERNATIONAL VISITORS IN GEORGIA

JSC ARDI Insurance insurance policy **WELCOMER** is designed to provide financial cover for emergency medical care or accident to international visitors while travelling/studying/staying in Georgia.

IMPORTANT INFORMATION FOR THE INSURED!

If you have any questions or concerns about your health, please call our Hotline Medical Assistance 24/7 at ☎ **0322101010**, the coverage area of which is the entire territory of Georgia. You can receive the following services:

- Medical advice via phone;
- Information regarding contractor medical facilities;
- Supervision and quality monitoring over treatment process itself, as well as financial documentation;
- Organizing Ambulance crew services;
- Providing urgent out-patient, in-patient or dental care;
- Informing the Insured about vaccination centers in Georgia, if necessary.

INSURANCE COVERAGES	WELCOMER	
24/7 Medical Assistance	100%	Unlimited
Emergency/Ambulance Services	100%	Unlimited
Urgent In-patient Care As a result of accident	100%	10 000 ₾
Urgent In-patient Care	100%	
Urgent Out-patient Care As a result of accident	100%	1 000 ₾
Urgent Out-patient Care	100%	
Non-urgent (planned) Out Patient Care at provider clinics with family doctor's referral	100%	1 000 ₾
Urgent Dental Care	100%	Unlimited
Services related to COVID-19	100%	According to the service rendered
Additional benefits: swimming pool, gym, wellness and etc.	Constantly updated portal https://ardi.ge/ge/account/offers	
POLICY AGGREGATE LIMIT	30 000 ₾	

PLEASE NOTE:

This insurance program is valid up to 70 years
Geographical coverage: Georgia, except occupied territories.

SUBJECT OF INSURANCE

- 1.1 Under the terms of this insurance, the subject of insurance is Georgian citizens or foreign tourists and their health, insurance during a tourist trip on the territory of Georgia, in accordance with the insurance policy and these terms and conditions.



RIGHTS AND OBLIGATIONS OF THE PARTIES

2.1 Based on the payment of the insurance premium by the Policyholder, the Insurer undertakes to indemnify the Policyholder (Insured) for the following basic and additional services:

BASIC INSURANCE COVERAGES:

■ **24-hour information-consulting, organization service**

Provides qualified, unlimited, telephone, information, organization consultation, complete and operative information on insurance programs, organization and coordination of medical services within 24 hours. This includes providing supervision over the process and quality of service, as well as medical and financial documentation, if necessary.

■ **Urgent Out-patient Care**

This coverage includes a set of medical measures related to the deterioration of the Insured's health during the insurance period, rendered to the Insured, which by medical evidence requires staying at the medical facility for **less than 24 hours**, the delay of which will lead to death, disability or significant deterioration of health status of the Insured. Urgent Out-patient Care shall include the following insured events:

- ✓ Traumas: wound suturing and surgical treatment, X-ray examination and mobilization of the fracture.
- ✓ Rabies vaccination and Tetanus vaccination (vaccination and medical care).
- ✓ Poisoning: gastric lavage and infusion therapy.
- ✓ Hyperthermia: therapeutic consultation, antipyretic treatment.
- ✓ Thermal injury – freeze or burn: surgical treatment or bandaging of the damaged area.
- ✓ Bleeding: tamponade, coagulants.
- ✓ Renal, abdominal, and biliary colic: medical consultation, analgesics and antispasmodics.
- ✓ Attacks of Bronchial asthma and cardiac asthma: drug therapy, relief of attack.
- ✓ Allergic reaction: anti-allergic treatment.
- ✓ Pain syndrome: relief of pain, blockade.

■ **Urgent In-patient Care**

Shall be reimbursed in full, within the total limit of the policy. This service includes a set of medical measures related to the sudden deterioration of the Insured's health during the insurance period, rendered to the Insured, which by medical evidence requires staying at the medical facility for **more than 24 hours**, the delay of which will lead to death, disability or significant deterioration of health status of the Insured. Urgent In-patient Care shall include, by medical evidence, a guaranteed volume of medical and diagnostic, laboratory, instrumental examinations and treatment.

■ **Emergency/Ambulance Services**

Shall be reimbursed 100% unlimited. This includes the services and transportation of licensed emergency team and, if necessary, evacuation by land-vehicles across the territory of Georgia.

■ **Planned Out-Patient Care at nominated provider clinics managed by our family doctor's referral:**

Includes consultations of doctors-specialists of various profiles, instrumental-laboratory examinations, medical-diagnostic manipulations based on medical indications. It is possible to receive planned outpatient services only on the basis of a referral issued by the insurer's family doctor, within the limit and co-payment specified in Davit Tatishvili clinics.

■ **Urgent Dental Care**

Provides primary dental care in case of emergency - tooth extraction, related anesthesia and diagnostic measures (dentogram, visio).

■ **COVID 19 related services include:**

Testing – during exposed COVID 19 treatment period within country, reimbursement of the PCR testing charges in accordance with the current governmental protocol based on the medical indication.

Quarantine * - financing of the stay at quarantine living areas, in case of confirmed contact with COVID 19 infected patients, while moving on the territory of Georgia, not exceeding daily limit - 60.00 GEL;* This coverage applies only to foreign or Stateless students.

Treatment (outpatient, inpatient) - in case of confirmed COVID 19 case, treatment in accordance with the guidelines recognized **by Georgia;**

Note: The maximum daily limit of treatment is 150.00 GEL for mild and moderate patients, 350.00 GEL for severe patients.

2.2 If urgent, outpatient, inpatient, or accident-related medical care is required under the insurance policy, and / or if an insured event with additional coverages occurs, the Insured (or his/her representative) shall be obliged to notify the Insurer within 24 hours. On the basis of which the latter makes payments to health care provider or Policyholder. In exceptional cases, in the absence of objective reasons, expenses for services rendered may be reimbursed without notice, if the Insured submits an insurance policy, an identity document of the Insured, a medical form # 100 /A issued by a medical institution and an original document certifying payment for medical care (cash register receipt and check). These documents shall be submitted no later than 30 (thirty) calendar days after receiving medical care. The Insurer shall reimburse the Insured for the cost only if the required documents are fully submitted.

- 2.3 When paying the insurance indemnity, the Insurer has the right to request any additional documentation related to the insured event (for example: a certificate from the law enforcement agencies in case of deterioration of the health caused by a traffic accident, etc.).

INSURANCE PREMIUM

- 3.1 The insurance premium is determined on a daily basis depending on the duration and type of the tour (excursion). The total insurance premium is specified in the insurance policy.
- 3.2 The sum Insurance premium is paid upon purchase of the insurance policy.
- 3.3 In case of unilateral termination of this Agreement by the Insurer, the insurance premium paid is not refundable.
- 3.4 The agent/intermediary is JSC "Bank Credo", which acts within the scope of activities defined by law for an insurance agent in accordance with the contract concluded with the insurer.

WELCOMER POLICY DOES NOT COVER:

- ✓ Pre-existing diseases or physical conditions (including chronic) and exacerbations, except urgent, life-threatening condition;
- ✓ Medical expenses, in case of non-payment and / or incomplete payment of the insurance premium by the Policyholder;
- ✓ Costs of medical care provided without the Insurer's confirmation;
- ✓ Expenses for treatment of diseases caused by intentional self-injury, when the Insured deliberately puts himself/herself in danger, except when s/he acts to save someone else's life, self-treatment costs, non-traditional medicine (Acupuncture, Homeopathy, Manual Therapy, Sujok Therapy, etc.) costs.
- ✓ Costs related to the purchase of biologically active and / or nutritional supplements, personal hygiene and / or care products;
- ✓ The costs of treatment required as a result of participation in professional and extreme sports;
- ✓ Costs related to alcoholism, drug addiction and substance abuse. Costs of treating injuries incurred while driving under the influence of alcoholic, narcotic, toxic or psychotropic substance(s).
- ✓ Costs related to external or endo-prosthesis, as well as corrective medical devices, organ transplantation, surgical and non-surgical interventions.
- ✓ Costs related to vision correction, including excimer-laser costs, costs related to the purchase of glasses, lenses and hearing aids;
- ✓ Congenital and genetic diseases;
- ✓ Costs of cosmetic treatment, plastic surgery, costs related to weight correction.
- ✓ Costs for diagnosis and treatment of infertility, potency disorders, the costs of abortion, contraception, artificial insemination, reproductive medicine;
- ✓ Sexually transmitted diseases;
- ✓ Costs of mental illness, rehabilitation treatment, massage and psychotherapy services;
- ✓ Medical expenses incurred in the treatment of AIDS, viral hepatitis;
- ✓ Treatment costs incurred as a result of participation in war, rebellion, civil unrest, or criminal activity, as well as medical care costs incurred during the period of imprisonment;
- ✓ If the Policyholder or the Insured violates any of the conditions provided for in in this Agreement;
- ✓ The insurer has right to verify the accuracy of the insured event and expenses.

FINAL PROVISIONS

- 5.1 The insurance policy is valid during the travel (excursion) period, which begins on the day specified in the policy and is valid until the day specified in the policy.
- 5.2 If any article, paragraph or provision of these insurance terms and conditions is or becomes illegal or invalid, that shall not affect the validity of any other article, paragraph or provision of this agreement.
- 5.3 In the event of force majeure circumstances, the fulfilment of obligations under this agreement shall be postponed until the liquidation of force majeure.
- 5.4 The Parties shall make every effort to amicably resolve any disagreement and/or dispute between them regarding their cooperation under this Agreement. In case of disagreement, the dispute shall be resolved in the Court of Georgia, in accordance with the legislation of Georgia.