



health program  
**medica**  
supports life

**eurolife**

## We support every moment of your life



Data as of 31/12/2021, for individual and group policies, from the start of Eurolife health schemes.

### Medica health program

Eurolife's medica health program has been developed to cover the needs of a person in the event he / she becomes ill or gets injured, thus protecting his/ her family from financial loss. The program reimburses expenses incurred for in-hospital treatment providing also out-of-hospital Benefits and Allowances.

### Main characteristics

The main characteristics of the program are as follows:

- Global cover including the United States and Canada
- Annual cover up to €2.000.000
- Right of participation of the partner of the insured and their children in the program
- There is no age limit for the termination of the program
- Low premiums
- Choice of country, hospital and doctor for treatment
- Provision of medical advice on a 24 hour basis through a Medical Call Centre
- Provision of Travel Medical Aid abroad
- "Second Medical Opinion" Service
- Quick response to claims
- Direct payment of hospitals for services rendered, if requested
- **medica plus** & **medica comfort** options, covering out-of-hospital benefits
- Participation in the program is permitted for people who live permanently in Cyprus up to the age of 65

### Medica group health program

The **medica** health program is also offered on a group basis, and can include full out-of-hospital cover.

### What are the benefits offered by the medica health program?

The program offers a wide range of Benefits. The following Table provides a brief description of the covers offered by the **medica basic**, **medica comfort** and **medica plus** options.

# TABLE OF BENEFITS

Benefits			Cover Limits	<i>medica basic</i>	<i>medica comfort</i>	<i>medica plus</i>
1.	1.1 Maximum Annual Limit 1.2 Annual Claims Excess Amount	€2.000.000 Depending on your option (€500 or €1.000 or €2.000 or €5.000 or €8.000 or €10.000 or €20.000)	✓ ✓	✓ ✓	✓ ✓	✓ □
2.	In Hospital Treatment 2.1 Hospital Charges 2.2 Doctors' Fees 2.3 Diagnostic Tests	Total Compensation Total Compensation Total Compensation	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓	✓ ✓ ✓
3.	Medica Out-of-Hospital Benefits 3.1 Pre-surgical Diagnostic Tests 3.2 Post-surgical Expenses - Physiotherapy - Diagnostic Tests & Medical Drugs 3.3 Out-patient Surgical Operation 3.4 Out-patient Cancer Therapy 3.5 First Treatment of an Accident	Total Compensation  Total Compensation up to €250 for each operation Total Compensation up to €200 for each operation Total Compensation Total Compensation Total Compensation	✓  ✓ ✓ ✓ ✓ ✓	✓  ✓ ✓ ✓ ✓ ✓	✓  ✓ ✓ ✓ ✓ ✓	✓  ✓ ✓ ✓ ✓ ✓
4.	Other Benefits 4.1 Maternity Allowance - Under GHS - Not under GHS • Normal Delivery • Caesarian Section 4.2 Critical Illness Allowance 4.3 Transportation by Ambulance 4.4 Daily Allowance for Free of Charge Treatment - In Cyprus - Abroad 4.5 Hospitalisation without Treatment 4.6 Stay of Parent (abroad) 4.7 Expenses for Transportation of Corpse Abroad 4.8 Premium Protection	€1.000  €2.000 €2.500 €10.000 Total Compensation up to €600 Maximum limit of 90 days €100 per day €250 per day Total Compensation for Room & Board for 1 day Total Compensation Up to €3.500 Up to 10 Years Premiums	✓  ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	✓  ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	✓  ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	
5.	Travel Medical Aid Abroad (Medical consultation, Evaluation and referrals, Emergency medical evacuation, Medical repatriation, Hospital admission assistance, Medical monitoring, Compassionate visit, Care of minor child(ren), Return of mortal remains, Interpreter and legal referrals, Evacuation transport for family members, Bereavement reunion, Care of elder parent and Early return)	✓	✓	✓	✓	
6.	“Second Medical Opinion” Service	✓	✓	✓	✓	
7.	Medical Call Centre	✓	✓	✓	✓	
8.	Medica comfort Out-of-Hospital Benefits 8.1 Maximum Annual Limit 8.2 Doctor's Fee 8.3 Medicinal Drugs 8.4 Diagnostic Tests 8.5 Physiotherapy 8.6 Psychiatric Disease 8.7 Homeopathy Treatment	€1.000 Depending on your option (Choice 1 or Choice 2) Total Compensation up to €250 Total Compensation up to €250 20 Visits with max €10 per visit 5 Visits with max €40 per visit Total Compensation up to €400	□ □ □ □ □ □ □	✓ ✓ ✓ ✓ ✓ ✓ ✓	□ □ □ □ □ □ □	
9.	Medica plus Out-of-Hospital Benefits 9.1 Maximum Annual Limit 9.2 Doctor's Fee 9.3 Medicinal Drugs 9.4 Diagnostic Tests 9.5 Physiotherapy 9.6 Psychiatric Illness 9.7 Homeopathy Treatment	Depending on your option (€1.000, €2.000, €4.000) Depending on your option (Option 1 or Option 2 or Option 3) Total Compensation Total Compensation Total Compensation Total Compensation Total Compensation Total Compensation up to €600	□ □ □ □ □ □ □ □	□ □ □ □ □ □ □ □	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	

Notes: • Where "Total Compensation", is mentioned above, we mean compensation based on Customary and Reasonable charges. Charges beyond the Customary and Reasonable ones will not be compensated.  
 • In case of hospitalization within GHS, we will pay the Hospital Daily Allowance, even if we will additionally cover the cost of upgrading to a single room.

## Choice of Premium for the *medica basic* health program

The *medica basic* health program reimburses expenses for the coverage provided with no initial excess amount (Table A). People who can afford to meet medical expenses without an insurance cover, or have limited cover with another medical health program, can be insured by choosing the annual claims excess amount they wish. In this way they benefit from lower insurance premiums, as these are shown in Tables B, C, D, E, F, G, H.

In particular, for Tables G & H (annual claims excess amounts €10.000 or €20.000), the insured has the right on specified dates, to request the deletion of the initial excess amount without presenting any medical certificates.

## Medica basic Premium Tables

A. WITHOUT ANNUAL CLAIMS EXCESS AMOUNT				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	344	175	90	30
<b>19-25</b>	543	277	140	47
<b>26-30</b>	585	298	152	51
<b>31-35</b>	611	312	158	53
<b>36-40</b>	630	321	164	55
<b>41-45</b>	656	335	170	58
<b>46-50</b>	716	366	186	63
<b>51-55</b>	865	441	225	77
<b>56-60</b>	1083	553	282	95
<b>61-65</b>	1411	719	366	124
<b>66-70</b>	1917	978	498	168
<b>71+</b>	2655	1354	690	232

B. ANNUAL CLAIMS EXCESS AMOUNT €500				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	293	149	76	25
<b>19-25</b>	462	235	119	40
<b>26-30</b>	497	253	129	43
<b>31-35</b>	519	265	135	45
<b>36-40</b>	535	273	139	47
<b>41-45</b>	558	285	144	49
<b>46-50</b>	609	311	158	53
<b>51-55</b>	735	375	191	65
<b>56-60</b>	921	470	240	81
<b>61-65</b>	1199	611	311	105
<b>66-70</b>	1629	831	423	143
<b>71+</b>	2257	1151	587	197

C. ANNUAL CLAIMS EXCESS AMOUNT €1.000				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	258	132	67	22
<b>19-25</b>	408	208	105	35
<b>26-30</b>	439	224	114	39
<b>31-35</b>	458	234	119	40
<b>36-40</b>	473	241	123	42
<b>41-45</b>	492	251	127	43
<b>46-50</b>	537	274	140	47
<b>51-55</b>	649	331	169	58
<b>56-60</b>	812	415	212	71
<b>61-65</b>	1058	539	275	93
<b>66-70</b>	1438	734	374	126
<b>71+</b>	1991	1016	518	174

D. ANNUAL CLAIMS EXCESS AMOUNT €2.000				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	231	117	58	19
<b>19-25</b>	364	185	95	32
<b>26-30</b>	394	200	102	35
<b>31-35</b>	408	208	104	35
<b>36-40</b>	421	214	110	37
<b>41-45</b>	440	225	114	39
<b>46-50</b>	477	243	125	42
<b>51-55</b>	581	296	151	51
<b>56-60</b>	725	371	187	63
<b>61-65</b>	945	481	245	82
<b>66-70</b>	1286	656	334	113
<b>71+</b>	1779	907	462	155

E. ANNUAL CLAIMS EXCESS AMOUNT €5.000				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	168	84	42	14
<b>19-25</b>	273	139	71	24
<b>26-30</b>	294	147	73	25
<b>31-35</b>	306	156	81	27
<b>36-40</b>	315	158	80	28
<b>41-45</b>	327	167	86	29
<b>46-50</b>	358	182	94	32
<b>51-55</b>	432	218	109	37
<b>56-60</b>	542	276	141	48
<b>61-65</b>	705	360	183	62
<b>66-70</b>	959	490	250	84
<b>71+</b>	1328	677	345	116

F. ANNUAL CLAIMS EXCESS AMOUNT €8.000				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	152	77	38	13
<b>19-25</b>	238	121	63	21
<b>26-30</b>	256	130	67	23
<b>31-35</b>	269	138	69	24
<b>36-40</b>	278	142	72	25
<b>41-45</b>	289	145	73	25
<b>46-50</b>	316	160	81	27
<b>51-55</b>	380	194	98	33
<b>56-60</b>	477	243	124	42
<b>61-65</b>	621	316	161	54
<b>66-70</b>	845	431	220	75
<b>71+</b>	1168	596	304	102

G. ANNUAL CLAIMS EXCESS AMOUNT €10.000				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	163	83	42	14
<b>19-25</b>	248	127	65	22
<b>26-30</b>	266	137	69	24
<b>31-35</b>	279	142	73	25
<b>36-40</b>	287	146	74	26
<b>41-45</b>	296	151	76	26
<b>46-50</b>	324	165	84	28
<b>51-55</b>	389	198	101	34
<b>56-60</b>	485	246	127	43
<b>61-65</b>	626	321	163	55
<b>66-70</b>	852	434	221	75
<b>71+</b>	1171	597	304	102

H. ANNUAL CLAIMS EXCESS AMOUNT €20.000				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
<b>-18</b>	133	67	34	12
<b>19-25</b>	200	101	52	18
<b>26-30</b>	216	110	57	19
<b>31-35</b>	225	115	58	19
<b>36-40</b>	231	118	60	20
<b>41-45</b>	242	124	64	21
<b>46-50</b>	262	134	68	23
<b>51-55</b>	315	161	81	28
<b>56-60</b>	391	200	101	34
<b>61-65</b>	506	259	132	45
<b>66-70</b>	683	348	178	60
<b>71+</b>	940	480	245	82

### Annual Claims Excess Amount for hospitalization abroad:

Under Eurolife's medica health program, Annual Claims Excess Amounts up to €2.000 will not apply if hospitalization takes place abroad. Annual Claims Excess Amounts above €2.000 will be reduced by 50%.



### Choice of Premium for the *medica comfort* health program

*Medica comfort* features all the benefits of the medica basic program, while also offering outpatient benefits.

*Medica comfort* is available in two alternative options, with the **ability to choose the Annual Claims Excess Amount of the medica program.**

The following premiums show the cost of the outpatient benefits offered by the *medica comfort* program. The total premium of the *medica comfort* program depends on your chosen option of the medica program.

### *Medica comfort* Premium Tables

#### +01 option

Covers 5 doctors' visits with max €40 per visit

PREMIUM TABLE				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
-18	252	129	66	23
19-25	306	156	80	27
26-30	309	158	81	27
31-35	310	159	81	28
36-40	314	160	82	28
41-45	317	162	83	28
46-50	320	163	83	28
51-55	323	165	84	29
56-60	326	167	85	29
61-65	329	168	86	29
66-70	382	195	100	34
71-75	428	219	112	38
76-80	471	240	123	42
81+	488	249	127	43

#### +02 option

Does not cover doctor's fee

PREMIUM TABLE				
Age	Annual	Half Yearly	Quarterly	Monthly
	€	€	€	€
-18	113	58	30	10
19-25	123	63	32	11
26-30	137	70	36	12
31-35	149	76	39	14
36-40	159	81	42	14
41-45	167	85	44	15
46-50	177	90	46	16
51-55	188	96	49	17
56-60	201	103	53	18
61-65	217	111	57	19
66-70	242	124	63	22
71-75	260	133	68	23
76-80	284	145	74	25
81+	298	152	78	27

#### Example:

##### 30 year old insured

Choice of *medica basic* program, with annual claims excess amount equal to €10.000:  
Monthly Premium €24

Choice of outpatient *medica comfort* benefits, with no doctor's fee:  
Monthly Premium €12

**Total monthly** premium for *medica comfort* €36

Choice of Premium for the medica plus health program

The *medical plus* offers all the benefits of the *medica program*, whilst also covering out-of hospital benefits. The *medica plus* is offered in 3 alternative options.

**Reduction in the medica plus outpatient benefit limit:**  
You have two options to lower your premiums: by lowering your annual cover limit to €2.000 or € 1.000, you will enjoy a discount of 5% and 15% respectively on your Out-patient premium.

Medica plus Premium Tables

+01 option					+02 option				
Full Package					Covers €20 of doctor's fee per visit				
WITHOUT ANNUAL EXCESS AMOUNT					WITHOUT ANNUAL EXCESS AMOUNT				
Age	Annual	Half Yearly	Quarterly	Monthly	Age	Annual	Half Yearly	Quarterly	Monthly
€	€	€	€	€	€	€	€	€	€
-18	773	394	202	68	-18	687	351	179	60
19-25	981	500	255	86	19-25	894	457	233	79
26-30	1074	548	280	94	26-30	977	498	254	86
31-35	1139	581	296	101	31-35	1034	527	269	90
36-40	1173	599	305	104	36-40	1065	543	277	93
41-45	1216	621	318	107	41-45	1104	563	287	97
46-50	1335	681	347	117	46-50	1212	618	315	108
51-55	1659	847	432	146	51-55	1501	765	390	132
56-60	1959	999	508	173	56-60	1792	914	466	157
61-65	2379	1214	619	210	61-65	2186	1115	569	191
66-70	3020	1540	785	265	66-70	2760	1408	719	243
71+	4084	2083	1061	358	71+	3759	1917	978	329

+03 option				
Does not cover doctor's fee				
WITHOUT ANNUAL EXCESS AMOUNT				
Age	Annual	Half Yearly	Quarterly	Monthly
€	€	€	€	€
-18	517	264	135	45
19-25	720	367	187	64
26-30	782	398	204	69
31-35	824	420	214	73
36-40	848	434	221	74
41-45	882	450	229	79
46-50	966	493	252	86
51-55	1186	605	308	104
56-60	1438	733	374	127
61-65	1799	917	468	158
66-70	2339	1193	608	205
71+	3209	1635	835	281



## Important Information

### 1. How can I join the medica health program?

With the completion of your application form in collaboration with your Insurance Intermediary, and upon acceptance by the Company of this application form, you can join the program immediately.

### 2. Who should I contact to find out about the submission of the claims?

For a prompt response, you can contact MedNet. MedNet is an independent third party claims administrator which specializes in the claims administration of medical incidents and with which Eurolife collaborates. The phone number of MedNet is 22463033.

### 3. What is the claim procedure?

- In case of a scheduled hospitalization, you should inform MedNet by phone before your admission to the hospital and in case of an urgent hospitalization, following your admission to the hospital. Thereafter, you should submit the claim form together with all the supporting documents to MedNet for settlement.
- In case of a scheduled hospital treatment, you may submit your claim to MedNet for investigation prior to the treatment taking place so that you would know, where possible, whether the treatment is covered by your insurance policy.
- In case of an urgent hospital treatment, you should inform MedNet immediately following your admission and in any case before your discharge from the hospital. You should also inform the hospital about your insurance cover.
- In case of out-of-hospital treatment, you should submit the claim form together with all the supporting documents to MedNet for settlement.

### 4. If I am abroad and a certain incident occurs to me, what should I do?

In case you need to be hospitalised due to an accident or sudden illness during your travel abroad, Eurolife, in collaboration with the medical aid company Assist America Asia Ltd, undertakes to help you. Please contact MedNet at number 22463033 so they can refer you to the medical aid company.

### 5. In case of critical illness, are there any other expenses covered in addition to the hospital expenses?

In case of a critical illness, the medica health program provides the insured with an allowance of €10.000. Critical illnesses include: Stroke (cerebrovascular incident), Cancer, Kidney Failure, Major Organ Transplant, Multiple Sclerosis and Coma.

### 6. Are there any specific exclusions I should know of?

Like all health insurance programs there are cases where no cover is provided.

Briefly, the **main exclusions** are:

- Pre-existing Medical Conditions
- Genetic and congenital deformities and / or diseases
- Routine Medical Examinations and preventive medicine
- Optical Treatment
- Dental Treatment, unless required because of an accident which has been covered by the program
- Pregnancy / sterility / conception / contraception
- Sexual Conditions
- Plastic / Cosmetic Therapies, unless required because of an accident which has been covered by the program
- Addiction to or abuse of drugs and / or other substances
- Self Inflicted Injury/ suicide attempt
- Dangerous Activities / conditions
- Haemodialysis for chronic kidney failure
- Treatment which is not recognized as medical practice
- H.I.V., A.I.D.S
- The value of grafts, medical aids, artificial limbs and devices
- Illegal action by the insured
- There are specific medical conditions which are covered after the 12th month from your registration in the program

For further information about all the exclusions and their full description, you should refer to the Regulations of the Program.

### 7. Will there be any changes in the premium or the Benefits provided by the program?

The premiums charged are based on the increase in the cost of medical services and the products related to health care. We assure you however, that whenever the program is reviewed we shall aim to achieve a balance between the Benefits provided and the cost of their provision, at the same time maintaining the premium at affordable levels.

### 8. What do we mean by the term «Total Compensation based on Customary and Reasonable charges»?

Eurolife reimburses you for all the expenses which are covered by the program, in line with customary and reasonable charges. By this term, we mean the charges the majority of suppliers (hospital, doctors, e.t.c.) charge for similar incidents. In this way, uncontrolled increases in the premiums of the program are avoided, giving us the capability to continue keeping the premiums at affordable levels. We therefore encourage you before any scheduled hospital treatment is undertaken, to ask for the estimated cost and then inform us accordingly so that we can let you know whether this amount is within the customary and reasonable charges.

#### Head Office

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**This print contains summary information. For further information contact Eurolife on 8000-8880 or your Insurance Advisor.**

The program falls under the Accident and Sickness Line of Business.

Eurolife Ltd

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