

PRIVATE HEALTH INSURANCE POLICY

MediCare Premium Plus

Policy Name: MediCare Premium Plus

Policy Number: MEDICARE_PREMIUM_2024

Insurance Company: MediCare Insurance GmbH

Policy Type: Private Health Insurance (Outpatient & Inpatient Coverage)

Issue Date: January 1, 2024

Policy Period: 12 months from issue date

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This policy is governed by German insurance law and regulations. MediCare Insurance GmbH reserves all rights under applicable law.

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§1 COVERAGE BENEFITS

§1.1 OUTPATIENT MEDICAL SERVICES

§1.1.1 General Practitioner Services

The insured person is entitled to coverage for general practitioner consultations and examinations under the following terms:

- **Coverage Rate:** 90% of approved charges
- **Annual Deductible:** €25 per policy year
- **Covered Services:** Routine examinations, preventive care, minor procedures, vaccinations, health screenings
- **Network Requirements:** Services must be provided by licensed physicians within the MediCare network

§1.1.2 Specialist Consultations

Coverage for specialist medical consultations is provided as follows:

- **Coverage Rate:** 85% of approved charges
- **Annual Deductible:** €50 per policy year
- **Referral Requirements:** Referral from general practitioner required except for gynecological and ophthalmological services
- **Covered Specialties:** All medical specialties recognized by the German Medical Association

§1.1.3 Diagnostic Testing and Laboratory Services

- **Coverage Rate:** 80% of approved charges
- **Covered Services:** Blood work, urine analysis, X-rays, ultrasounds, CT scans, MRI scans, electrocardiograms
- **Pre-authorization:** Required for imaging studies exceeding €500 in cost
- **Laboratory Networks:** Services must be performed by accredited laboratories

§1.1.4 Physical Therapy and Rehabilitation

- **Coverage Rate:** 70% of approved charges
- **Annual Limitation:** Maximum 20 sessions per policy year
- **Prescription Requirement:** Must be prescribed by attending physician
- **Provider Requirements:** Licensed physical therapists and rehabilitation centers only

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§1.2 INPATIENT HOSPITAL SERVICES

§1.2.1 Hospital Room and Board

- **Coverage Rate:** 100% of approved charges
- **Room Type:** Semi-private room (two-bed maximum)
- **Covered Services:** Room charges, nursing care, meals, basic medical equipment
- **Upgrade Options:** Private room upgrade available with additional co-payment of €50 per day

§1.2.2 Surgical Procedures and Operations

- **Coverage Rate:** 95% of approved charges
- **Covered Procedures:** All medically necessary surgical interventions
- **Anesthesia:** 100% coverage for anesthesia services
- **Pre-authorization:** Required for elective procedures exceeding €2,000

§1.2.3 Post-Operative Care and Recovery

- **Coverage Rate:** 90% of approved charges
- **Covered Services:** Post-surgical monitoring, wound care, rehabilitation services
- **Duration:** Coverage extends for necessary recovery period as determined by attending physician

§1.3 PRESCRIPTION MEDICATIONS

§1.3.1 Generic Medications

- **Coverage Rate:** 80% of approved charges
- **Pharmacy Networks:** Available at all participating pharmacies
- **Generic Substitution:** Encouraged when therapeutically equivalent

§1.3.2 Brand-Name Medications

- **Coverage Rate:** 70% of approved charges
- **Brand Preference:** Available when generic alternative not suitable
- **Prior Authorization:** May be required for high-cost brand medications

§1.3.3 Specialty Medications

- **Coverage Rate:** 60% of approved charges
- **Pre-authorization:** Required for all specialty medications
- **Specialty Pharmacy:** Must be obtained through designated specialty pharmacy network
- **Clinical Review:** Subject to medical necessity review

§1.4 ANNUAL AND LIFETIME LIMITS

§1.4.1 Maximum Annual Benefit

- **Annual Limit:** €50,000 per policy year
- **Reset Date:** January 1st of each policy year
- **Calculation:** Includes all covered services and benefits under this policy

§1.4.2 Lifetime Maximum Benefit

- **Lifetime Limit:** €1,000,000 per insured person
- **Accumulation:** Cumulative total of all benefits paid throughout policy duration
- **Reinstatement:** Not applicable once lifetime maximum is reached

§2 EXCLUSIONS AND LIMITATIONS

§2.1 EXCLUDED SERVICES AND TREATMENTS

§2.1.1 Cosmetic and Aesthetic Procedures

The following services are excluded from coverage:

- Cosmetic surgery for aesthetic purposes
- Non-medically necessary plastic surgery
- Dental cosmetic procedures
- **Exception:** Reconstructive surgery following accident or medically necessary procedures

§2.1.2 Experimental and Investigational Treatments

- Clinical trial treatments
- Experimental medications not approved by regulatory authorities
- Alternative medicine treatments not recognized by conventional medical practice
- **Exception:** Compassionate use programs approved by insurance medical director

§2.1.3 Out-of-Network Services

- Services provided by non-participating providers
- **Exception:** Emergency services and urgent care when in-network providers unavailable
- **Geographic Limitation:** Coverage limited to providers within Germany unless prior authorization obtained

§2.1.4 Pre-Existing Conditions

- Medical conditions diagnosed or treated within 6 months prior to policy effective date
- **Waiting Period:** 6-month waiting period applies to pre-existing conditions
- **Documentation:** Medical records may be required to determine pre-existing status

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§2.2 ADDITIONAL LIMITATIONS

§2.2.1 Service Limitations

- Fertility treatments limited to 3 cycles per lifetime
- Hearing aids limited to one pair every 5 years
- Durable medical equipment subject to rental vs. purchase determination

§2.2.2 Geographic Limitations

- Coverage primarily applies within German territory
- Emergency coverage available during temporary travel abroad (maximum 90 days)
- Planned treatment abroad requires pre-authorization

§3 DEDUCTIBLES AND CO-PAYMENTS

§3.1 ANNUAL DEDUCTIBLE STRUCTURE

§3.1.1 Individual Deductible

- **Amount:** €500 per insured person per policy year
- **Application:** Applies to all covered services before insurance benefits begin
- **Reset:** Deductible resets January 1st of each policy year
- **Accumulation:** All covered expenses count toward deductible regardless of service type

§3.1.2 Family Deductible

- **Amount:** €1,000 per family per policy year (maximum 2 individual deductibles)
- **Application:** No single family member pays more than individual deductible amount
- **Calculation:** Combined family expenses applied to family deductible limit

§3.2 OUT-OF-POCKET MAXIMUM

§3.2.1 Individual Out-of-Pocket Maximum

- **Amount:** €2,500 per insured person per policy year
- **Inclusion:** Deductibles, co-payments, and co-insurance amounts
- **Exclusion:** Premium payments and non-covered services
- **100% Coverage:** All covered services paid at 100% once maximum reached

§3.3 SPECIFIC CO-PAYMENTS

§3.3.1 Emergency Room Services

- **Co-payment:** €100 per emergency room visit
- **Waiver:** Co-payment waived if admitted to hospital
- **Definition:** Emergency defined as immediate medical attention required to prevent serious health consequences

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§4 GENERAL TERMS AND CONDITIONS

§4.1 ELIGIBILITY REQUIREMENTS

§4.1.1 Initial Eligibility

To be eligible for coverage under this policy, the applicant must:

- Be a legal resident of Germany
- Be between ages 18-65 at time of application
- Complete medical underwriting process
- Pay required premiums when due
- Provide accurate health information during application process

§4.1.2 Dependent Coverage

- Spouse coverage available with additional premium
- Dependent children covered until age 25 if in full-time education
- Newborn children covered from birth if added within 30 days

- Step-children and adopted children eligible under same terms

§4.2 CLAIMS SUBMISSION PROCESS

§4.2.1 Claims Filing Requirements

All claims must be submitted according to the following procedures:

- **Time Limit:** Claims must be filed within 90 days of service date
- **Documentation:** Original receipts and medical reports required
- **Forms:** Official MediCare claim forms must be used
- **Electronic Submission:** Available through MediCare online portal

§4.2.2 Claims Processing Timeline

- **Standard Processing:** 15 business days from receipt of complete claim
- **Complex Claims:** Up to 30 business days for claims requiring medical review
- **Payment Method:** Direct bank transfer or check payment available
- **Status Updates:** Available through online portal or customer service

§4.3 NETWORK PROVIDERS

§4.3.1 Provider Network

- **Network Directory:** Updated quarterly and available online
- **Provider Types:** Hospitals, physicians, specialists, laboratories, pharmacies
- **Quality Standards:** All providers meet MediCare quality and credentialing requirements
- **Geographic Coverage:** Comprehensive network throughout Germany

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§4.3.2 Out-of-Network Provisions

- **Emergency Services:** Covered at in-network benefit levels
- **Non-Emergency Services:** Covered at reduced benefit levels
- **Balance Billing:** Insured responsible for charges above covered amounts
- **Pre-authorization:** Required for non-emergency out-of-network services

§4.4 RENEWAL AND MODIFICATION TERMS

§4.4.1 Policy Renewal

- **Automatic Renewal:** Policy renews annually unless cancelled
- **Premium Adjustments:** Premiums may be adjusted annually with 60 days notice
- **Coverage Changes:** Benefit modifications require written notice
- **Age-based Adjustments:** Premium rates may increase based on age brackets

§4.4.2 Cancellation Provisions

By Insured:

- 30 days written notice required
- Pro-rated premium refund for unused coverage period
- Cancellation effective at end of notice period

By Insurance Company:

- 60 days written notice required for non-payment
- 90 days notice required for other reasons
- Must comply with German insurance law regarding cancellation

§4.5 APPEALS AND GRIEVANCE PROCEDURES

§4.5.1 Internal Appeals Process

- **First Level:** Administrative review within 30 days
- **Second Level:** Medical director review for clinical decisions
- **Timeline:** Decision rendered within 15 business days
- **Documentation:** Written decision with explanation provided

§4.5.2 External Review Rights

- **Independent Review:** Available after internal appeals exhausted
- **Regulatory Complaints:** German insurance regulatory authority
- **Legal Rights:** Right to pursue legal action under German law
- **Ombudsman:** Insurance ombudsman services available

§4.6 REGULATORY COMPLIANCE AND LEGAL PROVISIONS

§4.6.1 Governing Law

- This policy is governed by German insurance law (Versicherungsvertragsgesetz)
- Disputes resolved under German jurisdiction
- Consumer protection laws applicable
- Privacy regulations (GDPR) compliance maintained

§4.6.2 Policy Interpretation

- German language version supersedes all translations
- Ambiguous terms interpreted in favor of insured
- Severability clause applies to invalid provisions
- Contract modifications require written agreement

§4.7 CUSTOMER SERVICE AND CONTACT INFORMATION

§4.7.1 Customer Service

- **Phone:** +49 (0) 30 1234-5678
- **Email:** service@medicare-insurance.de
- **Online Portal:** www.medicare-insurance.de/portal
- **Business Hours:** Monday-Friday 8:00-18:00, Saturday 9:00-14:00

§4.7.2 Emergency Contact

- **24/7 Emergency Line:** +49 (0) 30 1234-9999
- **Emergency Authorization:** Available 24/7 for urgent care approval
- **Travel Assistance:** International emergency medical assistance

IMPORTANT DISCLAIMERS:

1. This policy document contains a summary of benefits. Complete terms and conditions are contained in the master policy document.
2. Benefits are subject to all policy terms, conditions, limitations, and exclusions.
3. This policy complies with German private health insurance regulations as of the issue date.
4. Medical necessity determinations are made according to accepted medical standards and practices.
5. Provider network and coverage areas subject to change with appropriate notice.

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END OF POLICY DOCUMENT

MediCare Insurance GmbH

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Insurance License: DE-2024-HEALTH-001

Regulatory Authority: Bundesanstalt für Finanzdienstleistungsaufsicht (BaFin)