

Key information document

on conditions of the voluntary medical Insurance contract
for foreign citizens and stateless persons

Based on **Rules of voluntary medical insurance for foreign citizens and stateless persons on the territory of the Russian Federation with a view to the employment, as well as for foreign citizens and stateless persons who are family members of the said persons**, in the edition valid at the moment of signing the Insurance contract



Insurer:

LEXGARANT Insurance Company LTD.

Legal address:

10, bld. 2, Maly Zlatoustinsky Pereulok, Moscow, 101000

Contact telephone number:

+7 (495) 933-80-80

e-mail:

dms@lexgarant.ru

Insurance rules are available on: https://lexgarant.ru/userfiles/files/Pravila/Pravila_migrant.pdf

Section I. WHAT IS COVERED?

The insured event is:

The insured event on the voluntary medical insurance contract based on conditions of the Rules is a visit of the Insured person to a medical institution on the territory and within the VMI program stipulated by the insurance contract for the primary health care and/or specialized medical care in emergency form due to health problems (illness, injury, another health condition of the Insured) which require such a medical treatment minding exclusions from the insurance program mentioned in the insurance contract (Rules).

Full list of risks is mentioned in the Insurance contract /Voluntary medical insurance program / Insurance rules (section 4)
This section may be supplemented/reduced in accordance with the Insurance rules/Voluntary medical insurance program.

Section II. WHAT IS NOT COVERED?

Following the voluntary medical insurance contract based on the Rules the following **is not recognized as the insured event** for which organization of medical assistance and payment for medical services cannot be provided:

- treatment not assigned by a doctor who provides medical assistance in accordance with the insurance program;
- extremely dangerous infectious diseases (smallpox, poliomyelitis, SARS malaria), diseases included in the list of diseases approved by the Government of the Russian Federation that are dangerous to others, in particular disease caused by human immunodeficiency virus (HIV), viral fevers, transmitted by arthropods and viral hemorrhagic fevers, helminthiasis, hepatitis B, hepatitis C, diphtheria, sexually transmitted infections, leprosy, malaria, pediculosis, acarias and other infestations, glanders and melio idoz, anthrax, tuberculosis, cholera, plague;
- malignant neoplasms, diabetes mellitus, mental disorders and behavioral disorders;
- high-tech medical care;
- pathological conditions, poisoning and injuries incurred by the Insured in condition of any form of alcohol intoxication or under the influence of other psychoactive substances and (or) medicines used without a doctor's prescription;
- traumatic injuries or other impairment of health resulting from the deliberate unlawful actions of the Insured;
- attempt of the Insured person to commit suicide, except in cases when the Insured person has been brought to such a condition by unlawful actions of third parties;
- intentional infliction of bodily self-harm by the Insured;
- problems associated with pregnancy, childbirth, the postpartum period and abortions unless otherwise provided by the Insurance contract.

Full list of exclusions is mentioned in the Voluntary medical insurance program.

This section may be supplemented/reduced in accordance with the Insurance rules/Voluntary medical insurance program.

Section III. SCOPE OF THE INSURANCE

The Insurance contract is valid throughout the territory of the Russian Federation unless otherwise is provided by it.

If the Insurance contract provides the insurance territory other than the Russian Federation, the insurance territory is to be mentioned in the section Scope of the Insurance contract.

Section IV. HOW TO GET THE INSURANCE PAYMENT?

In case of insurance event before going to the doctor, the Insured (its representative) should contact the Insurer (its representative with functions of assistance) by phones mentioned in the insurance policy (appendices to it) and inform on the event happened providing the following information: family name, name, patronymic name (if available) of the Insured, number of the Insurance contract (insurance policy), type of the assistance required, location and contact telephone number.

Full list of conditions is mentioned in the Voluntary medical insurance program / Insurance Rules (section 10).

Insurance payment is made by organization of rendering medical services to the Insured. Payment for services is made by the Insurer directly to a medical institution.

In emergency cases if the Insurer (its representative with functions of assistance) cannot provide the required medical services, the Insured pays for medical services rendered himself/herself upon prior agreement with the Insurer.

In this case application for getting the insurance payment (insurance indemnity) is to be provided within 33 (thirty three) days from the day of the insurance event.

To get the insurance payment (insurance indemnity) original copies of the following documents are to be supplied:

- written application on the event with bank details (for non-cash payments);
- Insurance contract (insurance policy);
- medical documents with information on diagnosis, date and health condition of the Insured when he/she came for medical assistance, medical manipulations performed and terms of treatment;
- directions of laboratory studies with dates, types and cost of services;
- invoices from medical institutions (on a letterhead and with a stamp) with a patient's name, date of visit, diagnosis, terms of treatment, list of services broken down by dates and costs, and total amount to be paid;
- documents confirming payment of invoices supplied.

Insurance payment (insurance indemnity) is made within 20 (twenty) days from the date of submitting the above mentioned documents.

Section V. HOW TO GET THE INSURANCE PREMIUM BACK?

Reasons for the refund of the insurance premium	Amount of the insurance premium refund
1. Withdrawal from the voluntary insurance contract within 14 calendar days from its signing in accordance with the Order of the Bank of Russia of the 20 th November 2015 N3854-Y "About minimum (standard) requirements for conditions and procedures of implementing certain types of voluntary insurance". ¹	Requirements of the Order are not applicable to voluntary medical insurance for foreign citizens and stateless persons on the territory of the Russian Federation with a view to the employment.
2. Withdrawal from the voluntary insurance contract in case of improper informing on insurance conditions.	100% of the insurance premium minus the part of the insurance premium calculated in proportion to the time over the course of which the insurance was valid.

In other cases the insurance premium cannot be refunded.

Refund of the insurance premium is performed within 7 (seven) business days from the date of submitting a proper application (in accordance with clause 2 of this section).

Section VI. HOW TO SETTLE DISPUTES BEFORE TRIAL?

Supply a written application (claim) to the Insurer.

If the Insurer doesn't satisfy the application (claim) and the amount of claims is less than 500,000 rubles (the amount established by the [Federal Law](#) of the 4th June 2018 N123-FZ "About a Commissioner for consumer rights of financial services"²), before going to the court it is necessary to contact a Commissioner for consumer rights of financial services (web-site: www.finombudsman.ru; address: 3, Staromonetny Pereulok, Moscow, 119017). The Commissioner for consumer rights of financial services considers appeals of consumers of financial services free of charge.

¹ Registered by the Ministry of Justice of Russia on the 12th February 2016, registration number 41072, with amendments made by Orders of the Bank of Russia of the 1st June 2016 N4032-Y (registered by the Ministry of Justice of Russia on the 27th June 2016, registration number 42648) of the 21st August 2017 N4500-Y (registered by the Ministry of Justice of Russia on the 8th September 2017, registration number 48112).

² Collection of laws of the Russian Federation, 2018, N24, art. 3390, 2022, N1, art. 40.