

**Voluntary Medical Insurance Program  
for Foreign Nationals and Stateless Persons “UNIVER”**

The **insured event** is the treatment of the Insured person in a medical organization in the direction of the Insurer or the assistance company during the term of the Insurance contract, on the territory or in the framework of VMI program provided by the contract of insurance to receive primary health care, ambulance, specialized medical care in the emergency form in connection with the occurrence of health disorders (disease, trauma, other health state of the Insured person), resulting in the need for the provision of such assistance, taking into account the exclusions under paragraph 2 of the VMI Program; occurrence of the need of the organization and coverage of expenses for repatriation of the remains of the body.

Description of VMI Program “UNIVER”	Insurance Coverage (aggregated) 350,000.00 roubles	Insurance premium (for 12 months)
Primary health care and specialized medical care in the emergency form	100,000.00 roubles	5,000.00 roubles
Dental care for acute dental pain	10,000.00 roubles	
Repatriation of remains	240,000.00 roubles	

**1. Services covered by the Insurance Program:**

- 1.1.** The Program provides the organization and payment for medical services and payments for prescribed drugs, approved by the Government of the Russian Federation, included in the list of vital and essential medicinal products for medical use and medical products, included in approved by the Government of the Russian Federation the list of medical devices implanted in the human body when providing medical care within program of state guarantees of free rendering medical aid to citizens, including payment of medical nutrition in patient and donor blood and its components.
- 1.2.** If an insured event takes place, insurance proceeds shall be paid for medical services rendered in the framework of primary health care, emergency and specialized medical care in the emergency form on medical grounds covered by a basic state-funded medical insurance programme, pursuant to Section 6, Article 35 of the Federal Law No. 326-FZ dated November 29, 2010 “On Compulsory Medical Insurance in the Russian Federation”, with respect to the particular details defined by Section 2 of the Insurance Plan, including:
- 1.2.1. Primary health care in an emergency form:**
- initial and follow-up visits, as well as consultations, conducted by doctors of different specialties (including dentists) , and temporary disability assessments;
  - diagnostic services, rendered on medical grounds, including: X-ray examinations, functional diagnostics, ultrasound examinations, endoscopic tests, and laboratory diagnostics (e.g., clinical, biochemical and bacteriological tests, serological testing, etc.);
  - medical manipulations, performed as part of first aid and basic medical assistance on medical grounds;
  - therapeutic dentistry: treatment of caries; pulpitis and periodontitis, and abscessed inflammatory diseases; inflammatory infiltrate, periodontal abscess, periostitis, exacerbation of chronic periodontal diseases; appointments and consultations with dental care specialists: general practitioner and surgeon (one visit);
  - dental services (medical, surgical) for relief of acute pain during dental treatment (temporary filling), purulent-inflammatory diseases of the mouth – opening and drainage of abscesses, removal of teeth for medical reasons, the implementation of laxative incisions);
  - dental panoramic X-ray examinations;
  - application of local anaesthesia (infiltration and conduction anaesthesia);
  - dental surgery services, including tooth extraction (when indicated), abscess incision and drainage, periostitis treatment incisions;
  - home care, as provided by a general practitioner at the Insured Person’s place of residence.
- 1.2.2. Dental treatment for acute dental pain** (acute dental pain is brief pain, the source of which can be easily identified): surgical dentistry (including teeth extraction (when indicated) and abscess incision and drainage);

local anaesthesia (e.g., topical, infiltration and conduction anaesthesia); X-ray examinations.

### **1.2.3. Ambulance:**

1.2.3.1 The Insurer shall organize emergency medical services pursuant to an agreement with a medical institution possessing a license for the provision of emergency medical services on a commercial basis.

1.2.3.2 If such medical institutions are not available at the place of the Insured Person's residence, emergency medical services shall be provided to the Insured Person by a municipal emergency medical service. The contact phone number for municipal emergency medical services in Russia is "112".

Emergency medical service includes:

- dispatch of an ambulance team;
- patient examination;
- express diagnostics, as required on medical grounds;
- acute care;
- emergency transportation and hospital admission if necessary.

Emergency medical services shall be provided 24/7 on the territory covered by the insurance contract.

### **1.2.4. Specialized medical care in the emergency form:**

- consultations by physicians;
- laboratory and instrumental examinations;
- surgery and conservative treatment, including time in an intensive therapy ward;
- prescribed drugs and medical products allowed for installation in the human body for medical purposes, pursuant to the list provided in p. 1.1. of this Plan;
- admission to a standard hospital ward;
- initial and follow-up examinations by a general practitioner;
- different types of medical documents/certificates.

### **1.3. Repatriation of remains:**

- payment for repatriation of the body remains, organized by the service provider or the Insurer;
- preparation of the body;
- acquisition of a casket for international transportation of human remains;
- necessary documentation;
- transportation costs.

## **2. Exclusions from the Insurance Program:**

2.1. Medical services, provided with respect to the following diseases/conditions and related aggravations shall not be considered as an Insured Event and, therefore, shall not be covered by the Insurance Company:

- particularly dangerous infectious diseases (e.g., smallpox, polio, malaria and SARS), diseases included in the list of diseases that present a general public danger, approved by the Russian Government (e.g., HIV, viral fevers transmitted by arthropods, viral haemorrhagic fever, helminth infections, viral hepatitis of B and C type, diphtheria, sexually transmitted diseases, leprosy, malaria, lice, acariasis and other infestations, glanders and melioidosis, anthrax, tuberculosis, cholera, and plague); malignant tumours, diabetes mellitus, mental and behavioural disorders;
- high-tech medical care;
- pathological conditions, poisoning, and/or injuries arising as the result of any form of intoxication or the influence of other psychoactive substances and/or drugs consumed without prescription;
- traumas or other health conditions arising as a consequence of the Insured Person's deliberate illegal actions;
- a suicide attempt by the Insured Person, except in cases when the attempt was the result of illegal actions on the part of third party;
- deliberate self-harm committed by the Insured Person;
- any events relating to the Insured Person's pregnancy, childbirth, postpartum period or abortion;
- non-acute dental services, all types of prosthetics and related preparations, and dental treatment, including: dental treatment for patients who are not currently in pain; all types of prosthesis and prosthesis preparation; therapeutic dentistry; treatment procedures including the following: tooth fillings with any types of materials (except for temporary fillings); root canal treatment; preventive procedures, such as filling replacements; "termofil", parapulpal and anchor dental pins; applying fluoride varnish, tooth implants; cosmetic reconstruction and teeth whitening, orthodontic treatment; treatment of non-carious lesions (erosion, wedge-shaped tooth defects, etc.); fissure sealing, dental inlays, extraction of impacted and misplaced teeth; treating teeth fitted with orthopaedic appliances; fixing previously treated teeth (except patients presenting with acute pain); endodontic therapy using calcium hydroxide, physical therapy, panoramic dental radiography, lingual frenectomy, lip augmentation, vestibuloplasty, dental splinting, periodontal treatment, treatment of gingivitis, congenital anomalies (developmental defects); and removal of cysts on the jaw (once acute inflammation is under control);
- medical services provided in cases not relating to insured events;
- medical services that were not appointed by a physician under this Insurance Plan and/or not covered therein;
- medical services provided by a medical institution without the Insurer's or service provider's recommendation and/or approval;
- medical services, received by the Insured Person within a territory not covered by the insurance policy;
- services relating to extra benefits for the Insured Person (e.g., admission to a more comfortable ward in the

hospital; nursery care; home delivery of drugs or other appliances to the Insured Person's place of residence), and transportation to a medical institution or pharmacy, in case medical care is provided on an outpatient basis.

2.2. The insurance contract shall not cover expenses incurred by the Insurer (Insured Person) relating to the payment for drugs and medical appliances, including first aid, except for first aid and basic medical assistance, as covered by this Insurance Plan.

**3. Procedure of Insured Person request for medical assistance:**

3.1. Medical services shall be provided within the territory covered by the insurance policy when Insured Person contacts "Express Assist Center" service company,

**Hotline: + 7 (495) 539 3071 (24 hours / 7 days a week),**

and provide the details of his/her policy and ID.

3.2. If the Insured Person addresses a medical institution without the Insurer's or service company's recommendation and/or approval, this instance shall not be considered an insured event.

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Voluntary medical insurance programmes are provided to foreign nationals and stateless persons on the basis of "Rules of Voluntary Medical Insurance for foreign citizens and stateless persons on the territory of Russian Federation with a view to the employment, as well as foreign citizens and stateless persons who are family members of said persons", approved by LEXGARANT Insurance Company LLC on February 10, 2016, and pursuant to License No. CJI 0348 dated October 12, 2015, issued by the Central Bank of Russia.