

STANDARD OF LIVING PROTECTION INSURANCE



Groupama
Biztosító

INSURANCE PRODUCT INFORMATION DOCUMENT

Company:

Groupama Biztosító Zrt.

registered in Hungary, regulated by the National Bank of Hungary

Operational licence number: H-EN-II-130/2016.

Product:

MENTŐÖV STANDARD OF LIVING PROTECTION INSURANCE

Full information about the product is included in the Terms and Conditions of the GB642 Mentőöv ("Life Belt") Standard of Living Protection insurance. In case of divergence between the Hungarian and English text of this document, the Hungarian version shall prevail.

What is this type of insurance?

Mentőöv Standard of Living Protection insurance is an "other financial loss" insurance. The insurance cover is provided by the insurer within the framework of a group contract concluded with OTP Bank, which can be joined by insured persons. The insurance provides financial assistance in the event of the insured person's unemployment or incapacity for work.



What is insured?

- ✓ The insurance includes three different insurance packages with different sums insured as detailed below.

Insurance risks and sums insured	Insurance packages		
	Premium	Comfort	Basic
Unemployment If the insured person becomes unemployed, the insurer will pay the sum insured according to the chosen package every month for up to 6 consecutive months.	✓ HUF 200,000/month	✓ HUF 150,000/month	✓ HUF 100,000/month
Incapacity for work If the insured person becomes incapable of work, the insurer will pay the sum insured according to the chosen package every month for up to 6 consecutive months.	✓ HUF 150,000/month	✓ HUF 100,000/month	✓ HUF 50,000/month

- ✓ Depending on the insured event, for example in the event of unemployment, the insurer will pay the sum insured according to the chosen package.



what is not insured?

The insurer will not provide coverage in case of the following insured events:

- ✗ illness, disease, pathological condition, accident or congenital anomaly existing before the date of joining the group insurance (start of coverage) or events causally related to them
- ✗ parts of the body and organs already damaged, diseased, injured or mutilated for any reason before the date of joining (start of coverage), and the subsequent consequences of such damage
- ✗ the insured event was caused by self-medication, or if the insured event occurred in connection with treatment by a person who is not a qualified medical practitioner
- ✗ insured events occurred during the insured person's competitive sporting activity for remuneration
- ✗ accidents involving spectators at motorcycle, ski jumping, bobsleigh and ski-bob competitions and their training sessions, including test rides and rally competitions
- ✗ accidents due to lifting, frostbite, sunstroke, occupational disease, parachuting, rock climbing, caving, heart attack, stroke, epilepsy, loss of consciousness or loss of insight are not considered accidents for the purposes of this insurance
- ✗ in case of illnesses based on subjective symptoms which cannot be confirmed by objective medical methods

Special exclusions for unemployment:

- ✗ an employment which is NOT for indefinite duration, covered by the Labour Code
- ✗ termination of employment initiated by the insured person
- ✗ employment relationship terminated during a trial period
- ✗ dismissal by the employer due to the insured person's conduct
- ✗ termination of employment due to retirement, entitlement to disability benefits

The insurer shall not provide benefits in the case of incapacity for work which:

- ✗ is related to detoxification, sleep therapy, geriatric or gerontological treatment
- ✗ is related to depression and other mental disorders
- ✗ is related to rehabilitation, after-care
- ✗ is related to special education, speech therapy, physiotherapy
- ✗ is resulting from medically unjustified interventions (e.g. plastic surgery)
- ✗ is incapacity for work due to an abortion, except for abortions ordered by a doctor for health reasons and not for social reasons
- ✗ is incapacity to work in connection with artificial insemination and the management of sterility
- ✗ is not due to the insured person's health status



Are there any restrictions on the cover?

The insurer will not provide any service in respect of the following insured events subject to certain conditions:

- ! In relation to the risk of unemployment, in case of termination of employment by mutual agreement, the insurer shall provide cover only if the termination of employment was due to a reorganisation of the employer, a reduction of the number of employees, a termination of the employer without a legal

successor or the employee's permanent incapacity for work.

- ! The insured event is causally linked to the insured person's attempted suicide or suicide within two years of joining the insurance.
- ! The insured event was caused by the insured person's unlawful, intentional or grossly negligent conduct.



Where am I covered?

- ✓ The cover is limited to Hungary in the case of incapacity to work, and in relation to the risk of unemployment the cover is

limited to the employment relationship with an employer based in Hungary.



What are my obligations?

Obligations at the time of concluding the contract:

Obligation to provide information: All known circumstances relevant for the insurance must be reported to the insurer, such an important circumstance is the retired status.

The policyholder fulfils the obligation to provide information with truthful answers given to the insurer's written questions.

Obligations during the term of the contract:

Change Notification Obligation: The insurer must be informed within 15 days of becoming aware of a change in material insurance circumstances relating to the insurance, e.g. the date of retirement.

Obligations when an insured event occurs and is reported:

Claim reporting obligation: An insured event must be reported – in the case of any hindrance following its termination – within 15 days at any customer service office of the insurer and the insurer should be able to verify the content of the notification and the information provided.

Obligation to pay the premium: OTP Bank must pay the monthly insurance premium. OTP Bank shall levy the proportionate part part of the insurance premium on the insured person. The premium varies according to the package.



When and how do I pay?

The insurance premium is collected monthly (on the 15th day of each calendar month) by OTP Bank from the insured person's

retail current account.



When does the cover start and end?

Inception date or start of the insurance cover: the insurance cover starts on the day after the declaration of joining is registered at OTP Bank.

The cover ends on the dates specified below:

- The date of termination of the related HUF current account.
- At the end of the calendar year in which the insured person reaches the age of 62.
- The insured person's date of retirement or early retirement.

– On the day of the insured person's declaration of a non-rehabilitable health condition between 1 and 30% or between 31 and 50%.

- In case of non-payment of the insurance premium, if the premium is not paid even 30 days after the request for payment, the insurance will terminate on the day of the extended deadline.
- On the day of the insured person's death.



How do I cancel the contract?

The contract with the insured person may be terminated in the following cases, in addition to those set out in the previous section:

- with ordinary termination at the end of the insurance period

- with immediate effect in case of joining the insurance via verbal or electronic channels
- the insurance may also be terminated if the premium is not paid.