



GPI Holding

Travel Insurance Conditions for Tourists on the Territory of Georgia

Policy "Tourist"

1. **Main Statement** – JSC GPI Holding (hereinafter "the Insurer"), in compliance with these conditions, shall provide insurance of the interests related to being in and travelling of an insured person over the territory of Georgia based on the insurance premium paid in his/her favour. The insurance shall be fulfilled in compliance with the legislation of Georgia and the conditions listed below.
2. **Insured** – a traveller, citizen of a foreign country, being temporarily on the territory of Georgia, which is travelling in Georgia with business and/or tourist purposes.
3. **Insurance Policy** – a document confirming conclusion of an insurance, which enables the Insured, upon its obtaining, to require insurance indemnification in the case of an insured event on the conditions and in the amount set forth under the Insurance Agreement.
4. **Effectiveness of the Insurance** – the insurance shall be effective only on the territory of Georgia and for the term indicated in the insurance policy. The insurance period shall commence from **00:00** hrs of the insurance period commencement date indicated in the policy and remain effective till **24:00** hrs of the insurance completion date indicated in the policy. And, the insurance shall become effective not earlier than a week from the date of its conclusion.
5. **Insurance Premium** – the cost of an insurance policy to be paid for insurance by the Insured/Policy Holder. The Insurance Premium shall be paid as a lump-sum payment, at the moment of issuance of the Policy. The Insured can terminate the insurance and take the paid amount back only prior to commencement of the insurance period indicated in the policy. In such case the Insurer shall pay back the paid premium but deduct costs of the policy. In any other case the Insurance Agreement shall not be subject to termination and the Policy Premium shall not be refunded to the Insured.
6. **Insurance amount** – maximal limit of the indemnification indicated in the Insurance Policy in the frameworks of which the Insurer, despite the number and amount of insured events, shall undertake the obligation to indemnify the Insured against the service costs defined under these Insurance conditions and Policy.
7. **Insured Event** – the expenses incurred due to urgent medical out-patient treatment (see The Positive List of Urgent Out-Patient Service) or emergency medical service caused by unexpected illness, medical evacuation, urgent in-patient and/or urgent dental treatment (including removal of acute toothache) or death shall be deemed as the Insured Event and the Insurer shall indemnify the Insured during his/her permanent being on the territory of Georgia. In the case of insuring people over 65, the medical-hospital or/an out-patient treatment caused by an accident, medical evacuation or cost of repatriation as a result of death caused by an accident within the period of their being on the territory of Georgia shall be subject to indemnification only for the accidents happened within the Insurance Period.
8. **Definitions of Medical Services:**
 - 8.1. **Emergency Medical Assistance** - the cost of calling of a crew of emergency medical assistance based on a medical indication, on-site medical service, transportation of the Insured to the nearest medical institution.
 - 8.2. **Urgent out-patient treatment** – means indemnification of the cost of the services necessary for the below listed cases (specialist consultation, instrumental and laboratory tests, out-patient manipulations, medicines), in compliance with the Policy conditions, within the first **24** hours from occurrence of the Insured Event and delaying of which assistance shall cause death or disability of the Insured:
 - **Traumas:** doctor's consultation, x-ray examination, mobilization, reposition, fixation, blockades;
 - **Wound:** doctor's consultation, surgical treatment and suturing; medicines, antirabic and antitetanus serum;
 - **Bleeding:** doctor's consultation, tamponade, coagulants;
 - **Foreign body:** removal of a foreign body;
 - **Thermal, chemical, electric damage** - consultation, surgical treatment of the damaged section, bandaging;
 - **Nasal bleeding:** doctor's consultation, front tamponade;
 - **Cardiac rhythm disturbance:** ECG, rhythm stabilization;
 - **Hypertensive crisis:** doctor's consultation, ECG, blood pressure stabilization;
 - **Allergy with the tendency of anaphylactic state and laryngeal edema:** doctor's consultation, antiallergic treatment;
 - **Acute bronchitis/ acute obstructive laryngitis /epiglottitidis:** doctor's consultation, reduction of broncho-spasms;
 - **Renal, abdominal and gall bladder colica:** doctor's consultation, general blood test, urine common test, one system echoscopy, intravenous infusion, pain reduction;
 - **Urinary retention:** doctor's consultation, catheterization, intravenous infusion, urine common test.

- **Unspecified pain in the chest and abdomen and headache:** doctor's consultation, pain reduction and blockade.
- **Intoxication:** doctor's consultation, gastric lavage, desintoxiation/infusive therapy, laboratory tests.
- **Hyperthermia:** doctor's consultation, antipyretic treatment.

8.3. Urgent Hospital Care - means reimbursement of the costs of urgent medical measures (drugs, diagnostic manipulations, therapeutic and surgical treatment) related to acute urgent cases happened during the Insurance Period in the events listed below, when the Insured is kept in the hospital more than **24** hours and delaying of such service by more than **24** hours causes death of the Insured.

The events financed as the cases of urgent hospital care:

Allergology:

J45 Asthma (stage of attacks). Allergy with the tendency of development of anaphylactic state and laryngeal edema;

L50 Urticaria;

T78.1 Hazardous reaction of food (food allergy);

T78.3 Angioneurotic edema;

T78.4 Allergy, unspecified (allergy on insect bite);

T88.7 Adverse reaction on treatment agent or medication, unspecified (drug) allergy;

T80.6 Serum allergy.

Angiology, operations under general anesthesia and intensive therapy:

I74 Embolism and thrombosis of arterias

I87 Other damages of venas (lung arteria ebolia or its danger);

I71.3 Abdominal aortic aneurysm, ruptured;

I71.5 Thoracoabdominal aortic aneurysm, ruptured;

I72 Other forms of aneurism (ruptured).

Gastroenterology:

K72.0 Acute and sub-acute liver decompensation (encephalopathy);

Endocrinology:

E27.2 Addisonian crisis;

E05.5 Thyroid crisis or attack;

E10.1 Insulin-dependent diabetes with ketoacidosis;

E11.1 Insulin-independent diabetes with ketoacidosis;

E03.5 Mixedematous coma.

Cardiology (without surgical and invasive intervention):

I21 Acute myocardial infarction;

I20.0 Unstable angina

I50.1 Acute ventricular decompensation;

I50.9 Acute cardiac decompensation;

I47 Paroxysmal tachycardia;

I48 Ventricular fibrillation and shivering.

Neurology:

a) Inflammatory diseases of CNS/ episodic and paroxysmal defect/polyneuropathies

G61 Inflammatory polyneuropathy;

G04 Encephalitis, myelitis, encephalomyelitis;

G45 Transitional cerebral-ischemic attacks and related syndrome;

G46 Brain vessel syndromes during cerebrovascular disease;

d) Epilepsy/ myoneural diseases/ other damages of nervous system:

G70 Myasthenia gravis and other myoneural damages;

G40 Epilepsy (serial failures);

G93.6 Cerebral edema

Neurosurgery:

a) Surgical treatment, intensive therapy

I61 Intracerebral hemorrhage;

G93.5 Brain compression;

G93.6 Encephalitic edema;

G91 Hydrocephalus.

Nephrology:

N17 Acute renal failure;

N00 Acute nephritic syndrome;

N10 Acute pyelonephritis.

Otolaryngology:

a) Operations of IV stage complexity:

J01 Acute sinusitis (with intracranial and orbital complications);

G06.0 Intracranial and intraspinal abscess and granuloma;

H83.0 Labyrinthitis;

H66.4 Suppurative inflammation of eardrum unspecified (with complicated mastoid disease);

H66.2 Chronic otitis media with complications (with complicated facialis);

H66.3 Other otitis media with complications (with complicated facialis).

b) Operations of III stage complexity:

J39.0 J39.0 Retropharyngeal and parapharyngeal abscesses

c) Post packing

R04.0 Nasal hemorrhage (with post packing).

Pulmonology:

J44.1 Chronic obstructive disease of lungs, complicated, unspecified.

Rheumatology

a) Connecting tissue system damage (activities of II-III stages with evident damage of viscera):

M30 Junctional polyarthritis and related states;

M31 Other necrotic vasculopathies;

M32 Systemic butterfly disease;

M33 Dermatopolymyositis;

M34 Systemic sclerosis;

M35 Other systemic damages of connecting tissue;

b) Inflammatory polyarthropathy and spondylopathy (activities of II-III stages):

M05 Seropositive rheumatic arthritis;

M06 Other rheumatic arthritis;

M07 Psoriatic enteropathical arthropathy;

M08 Juvenile arthritis;

M10 Arthragra (acute, with complicated arthragra status);

M11 Other crystal arthropathies (caused by pyrophosphate and calcium phosphate)

M12 Other specific arthropathies;

M45 Strumpell-Marie disease;

M46 Other inflammatory spondylopathies.

c) Acute rheumatism and chronic rheumatic heart diseases (active phase (rheumatic fever) post commissurotomy and prosthetics period):

I00-I02 Acute rheumatism;

I05-I09 Chronic rheumatic heart diseases.

Urology:

a) Operations under general anesthesia:

N20 Renal and ureter calculi (obstructive uropathy);

N40 Prostatic hyperplasia (urinary retention, macro-hematuria).

b) Operations under local anesthesia:

N23 Unspecified renal colic (cystoscopy, catheterization, ureteroscopy);

N47 Long foreskin, phimosis, paraphimosis;

N44 Crooked seminal gland;

R33 Urinary retention (epicystostomy).

c) Trocar epicystostomy/ catheterization

R33 Urinary retention.

Surgery:

a) Operations of IV stage complexity:

A48.0 Gas gangrene;

K56 Paralytic ileus and gut obstruction without hernia;

K25 Stomach ulcer (with complicated decompensated pylorostenosis);

K26 Duodenum ulcer (complicated decompensated pylorostenosis);

K27 Peptic ulcer with unspecified localization (with complicated decompensated pylorostenosis);

K85 Acute pancreatitis;

K65.0 Acute pancreatitis (extensive).

b) Operations of III stage complexity:

A48.0 Gas gangrene (with remote local areas);
S36.0 Spleen trauma;
S36.9 Damaging of unspecified abdominal cavity organ;
K43.0 Abdominal front wall hernia with ileus, without gangrene;
K45.0 Other specified abdominal hernia with ileus, without gangrene (of large or huge size);
I70.2 Extremities arteria atherosclerosis (atherosclerotic gangrene);
E10.5 Insulin-dependent diabetes with peripheric circulating complications (diabetic gangrene);
E11.5 Insulin-independent diabetes with peripheric circulating complications (diabetic gangrene);
E12.5 Diabetes related to nutrition disorder with peripheric circulating complications (diabetic gangrene);
E13.5 Other specified diabetes with peripheric circulating complications (diabetic gangrene);
E14.5 Unspecified diabetes with peripheric circulating complications (diabetic gangrene);
K25.1 Stomach peptic ulcer with unspecified localization and acute perforation;
K26.1 Duodenum ulcer with unspecified localization and acute perforation;
K65.0 Acute peritonitis (local);
K80.0 Gall bladder calculi with cholecystitis (suppurative, gangrenosa);
K81.0 Acute cholecystitis (suppurative, gangrenosa);
K40.1 Double-sided groin hernia with gangrene;
K40.4 One-sided or unspecified groin hernia with gangrene;
K41.4 One-sided crural or unspecified hernia with gangrene;
K42.1 Umbilical hernia with gangrene;
K43.1 Abdomen front wall hernia with gangrene;
K45.1 Other specified abdominal hernia with gangrene;
K40.3 One-sided or unspecified constricted hernia without gangrene;
K41.3 One-sided of unspecified crural constricted hernia without gangrene;
K42.0 Umbilical hernia with ileus without gangrene;
K43.0 Ventrical hernia with ileus without gangrene;
K45.0 Abdominal and other specified constricted hernia without gangrene;
K92.0 Hematemesis;
K92.1 Melena;
K92.2 Gastrointestinal bleeding, unspecified.

c) Operations of II stage complexity and conservative treatment

K35.9 Acute appendicitis unspecified (catarrhal, phlegmonous, gangrenosa);
K92.0 Hematemesis (conservative treatment);
K92.1 Melena (conservative treatment);
K92.9 Gastrointestinal bleeding, unspecified (conservative treatment);
K85 Acute pancreatitis (conservative treatment).

Oro-maxillofacial surgery

a) Operations under general anesthesia

K10.2 Inflammatory diseases of jaws (mouth floor, inframaxillary, under jaw, temporal fossa phlegmons, post bulbar and throat abscesses) hematology.

Hematology

a) Surgical treatment – splenectomy

D69.3 Autothatic thermobocytopenic purpura;
D94.7 Other unspecified leukemia;
D55 Anemias caused by enzymatic disorder;
D56 Thalassaemia;
D57 Falcularcellular disorder;
D58 Other hereditary hemolyzed anemia;
D59 Acquired hemolyzed anemia

- 8.4. **Urgent hospital care due to an accident** - means reimbursement (in compliance with the Policy conditions) of the costs of urgent medical measures (drugs, diagnostic manipulations, therapeutic and surgical treatment) related to acute urgent cases happened during the Insurance Period due to impact of external power (physical, mechanical, thermal, chemical) causing keeping of the Insured in the hospital more than 24 hours when delaying of such service by more than 24 hours can cause death of the Insured.
- 8.5. **Urgent dental service** – means reimbursement of the cost of primary dental assistance (extraction of a tooth and related pain removing (local anesthesia), diagnostic measures (dentogramme, visio) in compliance with the Card.

- 8.6. **Medical evacuation:** Urgent transportation of the Insured, based on his/her medical indications, from the accident scene or from a medical institution to other medical institution or Tbilisi International Airport (for foreigners) within the limits indicated in the Insurance Policy.
- 8.7. **Repatriation:** The cost of repatriation of a corps of the Insured as a result of an accident or sudden illness of a foreigner while his/her temporary stay on the territory of Georgia to Tbilisi International Airport within the limits indicated in the Insurance Policy.

9. **Actions in the case of the Insured Event**

9.1. **When calling a crew of urgent medical service, also, when medical evacuation, the Insured can use of the following services:**

- the Insured or any other interested person shall call the company's hot line. Upon submission of the Insurance Policy and ID to the crew of urgent medical service, called with the help of the company's hot line, the Insured shall be exempted from payment of his/her share of the Insurer, set forth under the Insurance conditions;
- the Insured shall contact the crew of urgent medical service, pay the cost of service in full and then appeal to the company's Indemnification Group within 30 days upon accepting the service. The documentation necessary for indemnification: Insurance Card; ID; medical documentation confirming the provided medical service signed and sealed by the doctor of the servicing institution and a financial document confirming payment – a printed document in the form approved by the Ministry of Finance equated with a receipt, giving detailed estimation/calculation and cash voucher.

The cost of medical service obtained without notification is not subject to indemnification.

9.2. To get **urgent hospital/ out-patient service, urgent hospitalization due to an accident, urgent dental service** the Insured or any other interested person shall notify the company through its hot line (2 505 111), except delaying the notification due to objective circumstances, which shall be confirmed with corresponding documentation. The notification shall involve the following information: name and policy of the Insured, Policy number, name of a medical institution, time of referral to the medical institution. The cost of the service got without a notification shall not be subject to indemnification.

- The Insurer fulfills direct settlement with the company provider clinic, based on which the Insured is exempted from payment of the share to be paid by the Insurer according to the Insurance conditions;
- When referring to the company non-provider clinic, the Insured pays full cost of the service and then appeals to the company's Indemnification Group within 30 days. The documentation necessary for indemnification: original of the Insurance Policy, ID; form No. 100 signed and sealed by the doctor and confirmed by the servicing institution (detailed description of the provided service), detailed estimation/calculation of the service, cash voucher; in the case of urgent dental service – a dentogramme taken before and after the service.

9.3. **Repatriation** – an interested person shall notify the company's hot line (2 505 111) on such case. The notification shall involve the following information: the name and surname of the Insured, Policy number, name of a medical institution. The Insurer fulfills direct settlement with the corresponding structures, based on which the Insured is exempted from payment of the share to be paid by the Insurer according to the Insurance conditions; the cost of the service got without agreement with the Insurer shall not be subject to indemnification.

- The Policy Holder/Insured shall provide the Insurer with all the necessary and precise information for acknowledgement of the fact of the Insured Event and determine the Insurance Amount;
- Upon the Insurer's request the Insured shall grant the Insurer the right to obtain the necessary information from the third parties (doctors, any medical institution, transport service, etc.) and release the latter from the obligation of information confidentiality. Upon the Insurer's request the Insured shall undergo medical investigation with the indicated doctor. The Insurer shall be released from the obligation of any indemnification if the Insured incorrectly submits any significant fact, gives incorrect description or suppresses the facts and violates his/her obligations set forth under this paragraph.

10. **The below given events and the costs related with them are not subject to indemnification:**

- 10.1. The events occurred prior to effectiveness of the Insurance;
- 10.2. Illegal activities of the Insurer, the cost of treatment related to self-injury, suicide or their attempt or related illness;
- 10.3. Cost of any injuries caused by epidemic, pollution of the environment or natural calamities;
- 10.4. Costs of injuries sustained when getting on/off or sitting in the plane;
- 10.5. Costs caused by accidents happened in the course of war, military action, intervention of the army of a foreign country (whether the war is declared or not), civil war, riot, civil unrest, military takeover, revolution or power usurpation;

- 10.6. Costs caused by being under influence of alcohol, drugs, toxic substances, medical preparations or other toxic substances;
- 10.7. Chronic illnesses and their causing reasons or the illnesses revealed prior to travelling and their complications except the cases when urgent medical assistance is necessary to save the Insured's life;
- 10.8. Accidents happened due to taking part in dangerous types of professional or amateur sports;
- 10.9. Costs of the services got without agreement with the Insurer;
- 10.10. Costs of treatment provided at unlicensed medical institutions and by people having no right of providing medical assistance;
- 10.11. Services which are not given in terms definition;
- 10.12. Cost of the service financed by other program/insurance.

SERVICE	GPIH-A
Emergency medical aid	100% unlimited
Urgent out-patient service	100% unlimited
Urgent hospital care (applies only to the patients over 65)	100%, GEL 5,000.00
Hospital care due to an accident	100%, GEL 5,000.00
Medical evacuation	100%, GEL 2,000.00
Urgent stomatology	100% unlimited
Repatriation	100%, GEL 2,000.00
Insurance amount	GEL 5,000.00
Franchise*	GEL 100.00
Insurance premium per insured per day	1.5 EUR