

ABOUT THE PRODUCT

What is it?

Healthcare Tourism Complication Insurance provides coverage for any situation, requiring any revisions or repetition of surgery, which may be necessary as a result of the procedures, performed on the patients, who come to Türkiye for healthcare tourism. Other complications, which may occur during procedure or damages, arising from malpractice or interventions or examinations, which may be required due to co-morbidities of the insured, are excluded. The policy is valid for 6 months starting from the date of commencement.

This product covers the following complications:

- Dental Complications
- Dental Implant Plan
- Eye Complications
- Hair Transplantation Complications
- Orthopedy, Gynecology, General Surgery, Plastic Surgery Complications
- Cardiovascular Surgery Complication
- Plastic Surgery Plan
- Organ and Tissue Transplant
- Eco Surgery Plan
- IVF Plan
- Invasive Procedures Plan

Who Can be Insured?

Age limit is 0-85 years of age and persons of 85 years of age and over are excluded from insurance coverage. Policy is issued using the passport number.

What is the Geographical Scope?

This policy is only valid in case the treatments for complications of surgeries, interventions and medical treatments, performed in Türkiye after policy commencement date, are performed **within the territory of Republic of Türkiye.**



OUR PLANS

	Dental Complication Plan	Dental Complication Plan
	(Incl. ICN)	
TERM	(6 months)	6 AY
Inpatient Treatment Coverage	EUR 2,000	EUR 2,000
Accommodation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited
Companion Accommodation Coverage	X	X
Companion Transportation Coverage	X	X
Intervention in Native Country Coverage	EUR 500	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES		
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000
Sales Premium	EUR 146	EUR 121

OUR PLANS

	Dental Implant Plan	Dental Implant Plan
	(Incl. ICN)	
TERM	(12 months)	(12 months)
Inpatient Treatment Coverage	EUR 3,000	EUR 3,000
Accommodation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited
Companion Accommodation Coverage	X	X
Companion Transportation Coverage	X	X
Intervention in Native Country Coverage	EUR 500	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES		
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000
Sales Premium	EUR 234	EUR 193

OUR PLANS

	Hair Transplantation Complication Plan	Hair Transplantation Complication Plan
	(Incl. ICN)	
TERM	(6 months)	6 AY
Inpatient Treatment Coverage	EUR 2,000	EUR 2,000
Accommodation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited
Companion Accommodation Coverage	X	X
Companion Transportation Coverage	X	X
Intervention in Native Country Coverage	EUR 500	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES		
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000
Sales Premium	EUR 102	EUR 40

OUR PLANS

	Eye Complication Plan	Eye Complication Plan
	(Incl. ICN)	
TERM	(6 months)	6 AY
Inpatient Treatment Coverage	EUR 2,000	EUR 2,000
Accommodation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited
Companion Accommodation Coverage	X	X
Companion Transportation Coverage	X	X
Intervention in Native Country Coverage	EUR 500	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES		
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000
Sales Premium	EUR 142	EUR 117

OUR PLANS

	Orthopedy, Gynecology, General Surgery Complication Plan	Orthopedy, Gynecology, General Surgery Complication Plan	Orthopedy, Gynecology, General Surgery Complication Plan	Orthopedy, Gynecology, General Surgery Complication Plan
	(Incl. ICN and Companion)	(Incl. ICN)		(Incl. Companion)
TERM	(6 months)	6 AY	(6 months)	6 AY
Inpatient Treatment Coverage	EUR 5,000	EUR 5,000	EUR 5,000	EUR 5,000
Accommodation Coverage	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited	Unlimited	Unlimited
Companion Accommodation Coverage	EUR 1,000 EUR 200 Deductible	X	X	EUR 1,000 EUR 200 Deductible
Companion Transportation Coverage	EUR 500 EUR 100 Deductible	X	X	EUR 500 EUR 100 Deductible
Intervention in Native Country Coverage	EUR 500	EUR 500	X	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES				
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Sales Premium	EUR 242	EUR 194	EUR 168	EUR 216

OUR PLANS

	Cardiovascular Surgery Complications Plan	Cardiovascular Surgery Complications Plan	Cardiovascular Surgery Complications Plan	Cardiovascular Surgery Complications Plan
	(Incl. ICN and Companion)	(Incl. ICN)		(Incl. Companion)
TERM	(6 months)	6 AY	(6 months)	6 AY
Inpatient Treatment Coverage	EUR 10,000	EUR 10,000	EUR 10,000	EUR 10,000
Accommodation Coverage	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited	Unlimited	Unlimited
Companion Accommodation Coverage	EUR 1,000 EUR 200 Deductible	X	X	EUR 1,000 EUR 200 Deductible
Companion Transportation Coverage	EUR 500 EUR 100 Deductible	X	X	EUR 500 EUR 100 Deductible
Intervention in Native Country Coverage	EUR 500	EUR 500	X	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES				
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Sales Premium	EUR 424	EUR 376	EUR 350	EUR 398

OUR PLANS

	Plastic Surgery Plan	Plastic Surgery Plan	Plastic Surgery Plan	Plastic Surgery Plan
	(Incl. ICN and Companion)	(Incl. ICN)		(Incl. Companion)
DURATION	12 Month	12 Month	12 Month	12 Month
Inpatient Treatment Coverage	5.000 EUR	5.000 EUR	5.000 EUR	5.000 EUR
Accommodation Coverage	1.000 EUR with 200 EUR Exemption	1.000 EUR with 200 EUR Exemption	1.000 EUR with 200 EUR Exemption	1.000 EUR with 200 EUR Exemption
Transportation Coverage	500 EUR with 100 EUR Exemption	500 EUR with 100 EUR Exemption	500 EUR with 100 EUR Exemption	500 EUR with 100 EUR Exemption
Travel Coverage	30.000 EUR	30.000 EUR	30.000 EUR	30.000 EUR
Illness	30.000 EUR	30.000 EUR	30.000 EUR	30.000 EUR
Accident	30.000 EUR	30.000 EUR	30.000 EUR	30.000 EUR
Emergency Medical Transfer	30.000 EUR	30.000 EUR	30.000 EUR	30.000 EUR
Medical Consultancy	Unlimited	Unlimited	Unlimited	Unlimited
Companion Accommodation Coverage	1.000 EUR with 200 EUR Exemption	X	X	1.000 EUR with 200 EUR Exemption
Companion Transportation Coverage	500 EUR with 100 EUR Exemption	X	X	500 EUR with 100 EUR Exemption
Intervention in Native Country Coverage	200 EUR	200 EUR	X	X
3rd Person Financial Liability	3.750 EUR	3.750 EUR	3.750 EUR	3.750 EUR
ADDITIONAL COVERAGES				
Transfer of Remains to Native Country	3.000 EUR	3.000 EUR	3.000 EUR	3.000 EUR
LEGAL PROTECTION	500 EUR	500 EUR	500 EUR	500 EUR
Replacement of Travel Documents on Loss	100 EUR	100 EUR	100 EUR	100 EUR
Personal Accident	2.000 EUR	2.000 EUR	2.000 EUR	2.000 EUR
Death	2.000 EUR	2.000 EUR	2.000 EUR	2.000 EUR
Disability	2.000 EUR	2.000 EUR	2.000 EUR	2.000 EUR
Sales Premium	362 EUR	290 EUR	252 EUR	324 EUR

OUR PLANS

	Organ and Tissue Transplant Plan	Organ and Tissue Transplant Plan	Organ and Tissue Transplant Plan	Organ and Tissue Transplant Plan
	(Incl. ICN and Companion)	(Incl. ICN)		(Incl. Companion)
TERM	(6 months)	(6 months)	(6 months)	(6 months)
Inpatient Treatment Coverage	EUR 15,000	EUR 15,000	EUR 15,000	EUR 15,000
Accommodation Coverage	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible	EUR 1,000 200 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000	EUR 30,000	EUR 30,000
<i>Illness</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>
<i>Accident</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>
<i>Emergency Medical Transfer</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>	<i>EUR 30,000</i>
<i>Medical Consultancy</i>	<i>Unlimited</i>	<i>Unlimited</i>	<i>Unlimited</i>	<i>Unlimited</i>
Companion Accommodation Coverage	EUR 1,000 EUR 200 Deductible	X	X	EUR 1,000 EUR 200 Deductible
Companion Transportation Coverage	EUR 500 EUR 100 Deductible	X	X	EUR 500 EUR 100 Deductible
Intervention in Native Country Coverage	EUR 500	EUR 500	X	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES				
<i>Transfer of Remains to Native Country</i>	EUR 3,000	EUR 3,000	EUR 3,000	EUR 3,000
<i>Legal Protection</i>	EUR 500	EUR 500	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000	EUR 2,000	EUR 2,000
Sales Premium	EUR 742	EUR 658	EUR 613	EUR 697

OUR PLANS

	Eco Surgery Plan	IVF Plan	Invasive Procedures Plan
TERM	(6 months)	(6 months)	(6 months)
Inpatient Treatment Coverage	EUR 2,500	EUR 2,000	EUR 2,000
Accommodation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Transportation Coverage	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible	EUR 500 100 EUR Deductible
Travel Coverage	EUR 30,000	EUR 30,000	EUR 30,000
<i>Illness</i>	EUR 30,000	EUR 30,000	EUR 30,000
<i>Accident</i>	EUR 30,000	EUR 30,000	EUR 30,000
<i>Emergency Medical Transfer</i>	EUR 30,000	EUR 30,000	EUR 30,000
<i>Medical Consultancy</i>	Unlimited	Unlimited	Unlimited
Companion Accommodation Coverage	X	X	X
Companion Transportation Coverage	X	X	X
Intervention in Native Country Coverage	X	X	X
3rd Person Financial Liability	EUR 3,000	EUR 3,000	EUR 3,000
ADDITIONAL COVERAGES			
<i>Transfer of Remains to Native Country</i>	EUR 2,500	EUR 2,500	EUR 2,500
<i>Legal Protection</i>	EUR 500	EUR 500	EUR 500
<i>Replacement of Travel Documents on Loss</i>	EUR 100	EUR 100	EUR 100
Personal Accident	EUR 2,000	EUR 2,000	EUR 2,000
Death	EUR 2,000	EUR 2,000	EUR 2,000
Disability	EUR 2,000	EUR 2,000	EUR 2,000
Sales Premium	EUR 105	EUR 61	EUR 91

Inpatient Treatment Coverage



The medical complications, arising following surgery, intervention and medical applications on insured, performed in a healthcare institution within the territory of Republic of Turkey, which has Healthcare Tourism Accreditation Certificate, reimbursed according to coverage limits for the treatments, specified in the policy and certificates.

Dissatisfactions, arising from personal preferences are excluded in plastic surgeries and dental treatments.

The coverage is only valid for the surgery or intervention, specified in the policy and complication, arising from another medical treatment or application, outside of related policy plan, are excluded from coverage.

The expenses, required for treatment of complication with revision surgery are covered and rehabilitation/physical therapy expenses, which may be required following surgery/intervention, are excluded.

Tests and pharmaceuticals for medical procedure are also reimbursed under this coverage. Diagnostic procedures, beyond diagnosis, required by medical procedure and standard pre-operative tests and pharmaceuticals, which are unrelated to surgery, are excluded.

Pre- and post-surgery/procedure supportive treatments (installation of an IV line, supportive pharmaceutical treatments, blood glucose level and blood pressure regulation) and additional examinations and follow-up tests, planned/required for other health problems, which are not connected to surgery, are excluded from this policy.

Flight Ticket Coverage



The price of economy class flight ticket, paid by the insured for treatment of complication, arising as a result of a treatment, applied to insured in Turkey, or revision of surgery, is reimbursed subject to limit and exclusions in the policy. Flight ticket coverage is available in some plans. Check your certificate. Coverage is indicated on certificate and/or policy. Flight ticket coverage is subject to a deductible of EUR 100 and maximum payable claim may vary depending on plans and coverage limit is specified in the certificate and policy.

Accommodation Coverage



Accommodation expenses, paid by the insured for treatment of complication, arising as a result of a treatment, applied to insured in Turkey, or revision of surgery, before and after the treatment in Turkey, outside of healthcare institution, are reimbursed under this coverage, at a maximum limit of EUR 100 per day and a maximum limit, specified in policy and certificate. Accommodation expenses are subject to a deductible of EUR 200/2 days and EUR 100/1 day in other plans and coverage will be applicable to further accommodation expenses after the expiry of this time period in the policy. Optional accommodation without medical necessity, is excluded from coverage. Necessity of accommodation is determined by a physician report.

Intervention in Native Country Coverage



May be obtained optionally.

Minor procedures and medical treatments, related to early complications, which develop following the return of the insured to the country of residence and which do not require the return of the insured, such as discharge in wound, infection, are reimbursed subject to limits, specified in the policy and certificate.

For reimbursement of these expenses in the country of origin of the insured, the original copies of medical report and invoice and bank account information (SWIFT, IBAN) must be mailed.

Following evaluation, payment for covered expenses, will be made to the bank account of the insured, subject to coverage limits. In claim payments, transfer expenses are deducted from coverage limits.

Companion Expenses Coverage



This may only be obtained optionally in Cardiovascular Surgery plans. Related coverages and limits are not valid for the first procedure/ surgery to be performed in Türkiye.

On trigger of policy coverages for the secondary procedure to be performed on the insured, travel and accommodation expenses for a companion, who will

travel to Türkiye with the insured, will be reimbursed subject to coverage limits and deductibles, given in policy and certificate.

Companion expenses in hospital invoice during the term of hospitalization, are excluded.

Travel Insurance Coverage



This is included in all plans. Health, ambulance, medical consultancy and transfer of remains expenses, specified in the certificate and policy, are considered within the framework of coverage limits and travel health insurance special conditions (furnished separately in the annex).

Personal Accident Coverage



This is included in all plans. Coverage limit, specified on certificate and/or policy, is paid to legal heirs or if specified on policy, beneficiaries in case of death of insured as a result of accident. Personal Accident General Conditions are applicable to claim and indemnification practices.

Legal Protection Coverage



This is included in all plans. In case the insured requires to obtain legal consultancy for any reason during his/her stay within the territory of Republic of Türkiye, legal consultancy fee is covered within the framework of the coverage limit, specified in policy and/or certificate.

Replacement of Travel Documents Coverage



This is included in all plans. Provided that the loss or theft of passport or equivalent travel documents within the territory of Republic of Turkey, is proven with a record, prepared by competent authorities, the expenses for replacement of lost/stolen documents, are covered subject to the coverage limits, specified in policy and/or certificate.

3rd Person Financial Liability Coverage



This is included in all plans. Subject to the following conditions, the insurance company shall pay indemnification up to the coverage upper limit, specified in policy, for accidental death, injury or damage to property, caused by the insured during his/her stay within they territory of Republic of Türkiye.

- The insured shall promptly file a written application before the insurance company, detailing the accident, which may possibly yield a claim.
- The insured must promptly notify all kinds of letters, correspondences and legal notifications immediately on receipt.
- Insured must not make any payments or promises of payment without knowledge of the insurance company and must not even hold negotiations for payment of damages.
- If it deems necessary, the insurance company is entitled to replace the insured and to respond to the indemnification claims and to legally defend the same.

Dental Plan

Reimbursable complications under dental plan are the expenses subsequent to tooth extraction, surgical tooth extraction, root canal operation, implant operation, prosthetic tooth application and periodontology applications. Orthodontic treatments are excluded from coverage.

In prosthetic tooth application, problems, such as undesired color or form of prosthesis, will not be deemed as complication and no reimbursement will be made.

In surgical tooth extraction, complications, such as delayed hemorrhage, gingiva infection, leaving a part of tooth; in implant applications, ill-fitting implant, loose implant, dislodged implant and inflicting damage on jaw bone, are excluded from coverage.

No claims will be paid in the absence of a treatment plan and panoramic X-ray, prepared before the treatment and a recent panoramic X-ray, taken at the end of the treatment and on development of complications.

In case the dental plan involves a treatment process, which, according to treatment plan, will last for more than 6 months, the second policy, which will be issued 6 months later, must be obtained within the 30 days after the date of initial policy. In this case, the coverage term is considered as 12 months. In long-term treatment planning in case a second policy is issued more than 30 days after the date of initial policy, they are not considered as complementary policies.



Dental Implant Plan

In this plan, coverage limits and policy term have been amended compared to standard dental plan. Other conditions and practices are identical to standard dental plan. Policy covers complications, which may emerge within 12 months after the date of issue.



Eye Plan

Eye plan covers complications, related to corrective procedures, such as excimer laser and lasik, cataract surgery, ptosis surgery, glaucoma surgery and retina detachment surgery.

Flap dislocation in excimer laser surgeries, keratitis, development of epithelia under flap, more than 0.75 degrees visual impairment in the examination, performed 60 days after surgery;

In cataract surgeries; hemorrhage, perforation of eye, tearing of lens capsule, loss of transparency of cornea layer, burns at incision site, cataract parts remaining in the eye, infection, retina detachment, edema in yellow spot, disturbance and pain in the eye, droopy eyelids, glaucoma and/or double vision; more than 1 degree visual impairment in the examination, performed 60 days after surgery, opacification of rear capsule;

In ptosis surgery, relapse of droopy eyelid,

In retina detachment surgery, relapse of detachment, intraocular hemorrhage, formation of cataract and glaucoma;

In glaucoma surgery, conjunctival tearing, scleral flap damage, loss of vitreus, loss of central visual field, decompression retinopathy, infection, bleb leakage, supracoroidal hemorrhage, uveitis, are included in coverage.



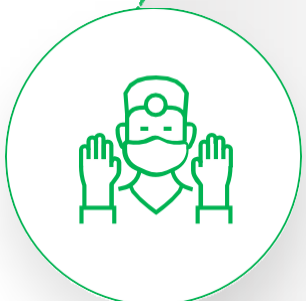


Hair Transplantation Plan

In hair transplantation plan, complications, arising as a result of patient's non-compliance with the recommendations of physician (early hair combined and brushing, failure to comply with hair washing procedure, failure to apply necessary care) and failure of hair transplantation, are excluded from coverage.

Despite compliance with all these recommendations, non-retention of hair follicles or treatments for infection in the skin and repetition of hair transplant, are included in coverage. For reimbursement of claims, it must be determined with a physician report that recommendations were followed following hair transplantation.

In revisional transplant, transplant number, exceeding that of initial transplant, is excluded.



Orthopedy, Gynecology, General Surgery, ENT, Chest Surgery, Pediatric Surgery, Invasive Procedures Plan

In all surgical procedures, the complications, given in informed consent form, signed by patient, are under the coverage. (Except death).

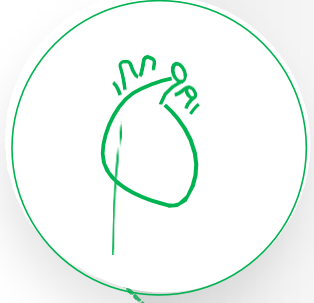
As invasive procedures, coronary angiography, balloon angioplasty, stent application, colonoscopic or gastroscopic removal of polyps, are covered. ERCP applications are excluded.

In coronary invasive procedures, only the restenosis following stent application, stent displacement may be deemed as complications.

Among gynecological procedures, complications following cesarean section (other than early complications, such as hemorrhage and uterus rupture), are covered.

In plastic surgeries revision requests due to failure to comply with personal liking, will not be reimbursed. However, failure of surgery (nasal tip drop after rhinoplasty; remaining deviation; nasal septum perforation; asymmetry in breast surgery, dropping, implant perforation and capsular contracture) are under coverage.

Botox applications are not covered.



Cardiovascular Surgery Plan

Possible complications, mentioned in literature, such as re-stenosis or stent migration, arising from peripheral vascular surgery, varicose surgery, heart valve replacement, valvuloplasty, coronary arterial bypass surgery, coronary stent application, large vessel replacement, performed on the insured in a healthcare institution in Türkiye, are covered.

In all these cases, requiring surgical or medical procedures, accommodation and other expenses for companion in healthcare institution and other expenses and transportation and hotel accommodation expenses, are not reimbursed. (in case an additional companion plan is purchased, transportation (flight) and hotel accommodation expenses for companion are reimbursed, subject to limits).



Plastic Surgery Plan

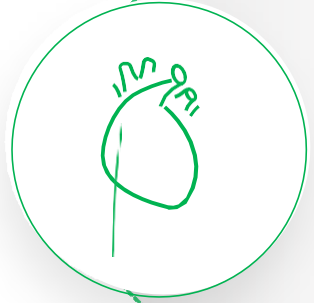
In plastic surgeries revision requests due to failure to comply with personal liking, will not be reimbursed. However, failure of surgery (nasal tip drop after rhinoplasty; remaining deviation; nasal septum perforation; asymmetry in breast surgery, dropping, implant perforation and capsular contracture) are under coverage.

Botox applications are not covered. Secondary procedures due to complications, are covered for a term of 12 months after the date of policy.



Organ and Tissue Transplant Plan

Complications, which may develop following organ and tissue transplants, are covered. Organ and tissue rejection are excluded. Intravascular clotting, suture failure in wound and anastomosis region, infections and scar development are covered. Claim will be processed on provision of a medical explanation for complication and specification of procedure to be conducted.



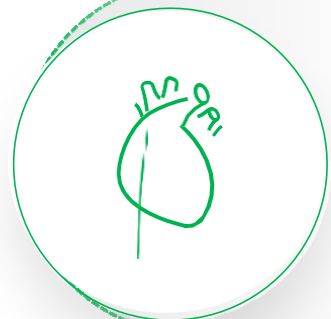
Eco Surgery Plan

In terms of content, it is the same as the Surgical Plan; only the coverage limit differs.



IVF Plan

Under this plan, complications that may arise during IVF procedures (such as oocyte retrieval and IVF application) are covered. Failure of the IVF procedure and the need for a subsequent attempt are not considered complications. This plan covers only early complications under the VIP product.



Invasive Procedures Plan

Under this plan, complications that may arise after all invasive procedures (such as conventional coronary angiography, cardiac catheterization, balloon angioplasty, valvuloplasty, peripheral vascular and cerebral angiography, endoscopic polyp resections, ERCP, thoracoscopy, bone marrow and CSF aspirations, liver biopsies, etc.) are covered. This plan covers only early complications under the VIP product.

CLAIM PAYMENT PRACTICES

Amount of acceptable claim under coverages, granted to insured during the term of policy, will be reimbursed under related coverage, defined in certificate, in line with coverage limit and payment rate. Even in case of multiple complications under the same plan and in case the insured has to travel to Türkiye for several times, total payable reimbursement may not exceed the total coverage limit, written on the policy.

This policy is not subject to preliminary approval with provision.

There are no coverages in this policy for death of natural causes.

The amount of healthcare expenses, made by the insured, are paid to the credit card or account of the insured, at the end of 10-day examination and assessment period after delivery of the following documents and additional documents, which may be required under the plan, to Insurer.

While additional documents may be requested on the basis of policy plans, in all reimbursement claims for all plans;

- Letter of authorization, to enable insurer to obtain medical documents
- Initial surgery report
- Declaration of insured concerning complication (the commencement date, complaints, etc)
- Medical report, explaining complication treatment, if any, surgery report
- Original invoices for healthcare institution, hotel and transportation expenses
- The photocopies of stamp page of passport, showing dates of entry to and exit from Türkiye and the first page, showing identity information.

