



# An overview of the cover – privatEXKLUSIV-PLUS / privatEXKLUSIV

Insured expenses	EXKLUSIV-PLUS	EXKLUSIV
Doctor up to the maximum GOÄ*rate	100 % no tariff limit up to the maximum GOÄ*rate	100 %
Dressings	100 %	
Vaccinations	100 %	
Preventative examinations	100 % for all preventative examinations (exception: diagnostic centre only with prior approval)	
Medication (generic)	100 %	
Medication (original preparations)	100 %	
Alternative practitioners including prescriptions	100 % up to €2,000 per calendar year of the refundable invoice amount	80 % up to €2,000 per calendar year of the refundable invoice amount
Outpatient psychotherapy	100 % max. 50 sessions per calendar year (prior approval required after 31 sessions per calendar year)	80 % max. 50 sessions per calendar year (prior approval required after 31 sessions per calendar year)
Glasses (including lenses) and alternative contact lenses	100 % up to €300, from 8 dioptries €600; always in the event of a change of eyesight by at least 0.5 dioptries in one eye, every 2 calendar years at the latest	
Vision correction	100 % after the expiry of 3 years since the beginning of the tariff, up to €1,500 for both eyes for laser eye surgery (LASIK/LASEK); if this service is requested, there will be no entitlement to vision aids for 5 years	
Assistive devices (open catalogue of assistive devices)	100 % for assistive devices of the same type, up to €1,000 once per calendar year without written approval, more frequently than once per calendar year only with prior approval	
	100 % for assistive devices over a €1,000 invoice amount with prior approval (reduction possible without prior approval)	
Therapeutic products named in the tariff (speech therapy and ergotherapy up to the maximum rates defined by the GOÄ*)	100 % of the refundable invoice amount for medicine that is prescribed for illnesses classed as especially serious in the tariff, otherwise 80 %	
Outpatient transport costs	100 % for emergency or accident transportation as well as journeys for dialysis, radiotherapy and chemotherapy, and in the event of the inability to walk to and from the nearest suitable doctor	
Outpatient operations	100 % and €200 in addition to the refundable outpatient services	

\* GOÄ = Schedule of fees for doctors

Please note: This printout contains nonbinding extracts from part I, II, and III of the applicable general conditions of insurance for the current unisex product line. The underlying insurance conditions of each contract shall be relevant for the contract content.

Insured expenses	EXKLUSIV-PLUS	EXKLUSIV
Inpatient standard services	100 % for general hospital services	
Inpatient optional services	100 % for 1 or 2-bed room, chief physician with no tariff limit up to the maximum GOÄ* rate	
Daily hospital allowance	€ 30 in the event of waiver of preferential doctor cover, €20 in the event of waiver of 1 or 2-bed room (the amounts are halved for under 20s)	
Accommodation/provisions for a parent in the hospital rooming-in	100 % up to max. €25/day for max. 12 days per calendar year <sup>1</sup>	
Allowance for family and household nursing staff	10 € per hour (max. €80/day) for max. 4 weeks per calendar year <sup>2</sup>	
Outpatient transport	100 % to and from the nearest suitable hospital, including medically sensible and reasonable transport from abroad; in the event of death abroad, max. €11,000 for transportation costs or funeral at the place of death	
Dental treatment, dental prophylaxis	100 % <sup>3</sup> no tariff restriction up to the maximum GOÄ*/GOZ* rate; professional dental cleaning twice per calendar year	100 % <sup>3</sup> up to the maximum GOÄ*/GOZ* rate, professional dental cleaning twice per calendar year
Dentures (including inlays and implant dentures)	90 % <sup>3,4</sup> with no tariff restriction up to the maximum GOÄ*/GOZ* rate	90 % <sup>3,4</sup> up to the maximum GOÄ*/GOZ* rate
Orthodontic treatment (beginning of treatment before the age of 22)	80 % upon successful completion with no tariff restriction limited to the maximum GOÄ*/GOZ* rate + 20 % <sup>3</sup>	80 % upon successful completion up to + 20 % <sup>3</sup> maximum GOÄ*/GOZ* rate
Removal procedures	80 % for the first removal measure, unless costs are levied otherwise (prior approval necessary); this does not apply for nicotine removal	
Waiver of contributions in the case of care dependency	50 % in Pflegegrad (care level) 4 100 % in Pflegegrad (care level) 5 (from the 4 <sup>th</sup> month after the occurrence of the care dependency)	
Absolute excess only for outpatient and inpatient treatment	EXKLUSIV-PLUS 0 €0 EXKLUSIV-PLUS 1 €480 (under 20s €240) EXKLUSIV-PLUS 2 €960 (under 20s €480)	EXKLUSIV 0 €0 EXKLUSIV 1 €480 (under 20s €240) EXKLUSIV 2 €960 (under 20s €480)
Premium refund, health bonus, behaviour bonus	3 monthly contributions <sup>7</sup> worth of success-dependent premium refund plus up to €900 health bonus <sup>5</sup> plus up to €300 behaviour bonus <sup>6</sup>	3 monthly contributions <sup>7</sup> worth of success-dependent premium refund
Right of choice	without a new health check after 36 or 72 months after the beginning of the first insurance policy in the respective tariff	
* GOÄ = Schedule of fees for doctors GOZ = Schedule of fees for dentists		

<sup>1</sup> The child (under 10 years) must be insured under the EXKLUSIV or EXKLUSIV-PLUS tariff. A parent must also be insured under a health insurance policy of SIGNAL Krankenversicherung a.G.

<sup>2</sup> The requirement is that the head of the household undergoes inpatient treatment for medically necessary reasons and has insurance cover under the EXKLUSIV or EXKLUSIV-PLUS tariff. The care or health of the person left in the household is not guaranteed and nobody else living in the household may continue it.

<sup>3</sup> Maximum contributions for dental treatment per insurance year: 1<sup>st</sup> year – € 750, 1<sup>st</sup> to 2<sup>nd</sup> year – € 1,500, 1<sup>st</sup> to 3<sup>rd</sup> year – € 3,000, 1<sup>st</sup> to 4<sup>th</sup> year – € 4,500, from 5 years – no limit. The named limits do not apply in the event of an accident. In the event of an expected invoice amount of over €2,500, a treatment and cost plan must be submitted before the start of the treatment.

<sup>4</sup> Always 90 % if a dental check-up is carried out annually. Otherwise the reimbursement rate for dentures will reduce from the 3<sup>rd</sup> calendar year by 10 % per year to a maximum of 75 %; corresponding increases due to check-ups with negative results are possible.

<sup>5</sup> The health bonus for unused cover (except preventative examinations in the tariff, preventative dentistry and vaccinations) is €600, €750 or €900 after 1, 2 or 3 and more consecutive calendar years; half for under-20s and those on training tariffs. Times prior to the insurance policy with no use of private or state insurance cover are taken into consideration.

<sup>6</sup> The behaviour bonus for health-conscious behaviour is €200, €250 or €300 after 1, 2 or 3 and more consecutive calendar years; half for under 20s and those on training tariffs. Payment once a year if four of the following five examinations are carried out each year: BMI (body mass index) measurement, blood pressure level, blood sugar level and cholesterol level, as well as preventative dental examination. The resulting BMI, blood pressure and cholesterol values must be within the normal range and demonstrated accordingly.