Platinum Individual insurance package*	
Services covered by insurance	Platinum
Appointment booking, 24-hour telephone health counselling, service organisation	●
Preventive examinations once per year of insurance, with a content defined by package, gender and age-related risks, **Manager screening** with Premium laboratory panel directly at Medicare Zrt.: internal medicine specialist examination, 12-lead resting ECG, ophthalmology specialist examination, abdominal and pelvic US, native chest CT (low dose), CT calcium score, cardiology specialist examination, cardiac US, 10-year cardiovascular disease risk assessment, melanoma screening, ENT specialist examination, thyroid US, ODM bone density examination, for women: gynaecological specialist examination with cancer screening (bimanual examination, colposcopy, cytology, physical breast examination), LB (liquid-based) cytology, HPV screening, breast tomosynthesis from the age of 40, for men: PSA test at the age of 40 and over	●
Broadened comprehensive outpatient treatment in the following specialties: internal medicine and paediatrics, otorhinolaryngology, ophthalmology, gynaecology, urology, dermatology, allergology, cardiology, rheumatology, orthopaedics, pulmonology, neurology, gastroenterology, endocrinology, infectology, diabetology, angiology, dietetics, electrotherapy (physiotherapy), vaccination against the seasonal flu once per year of insurance in medically justified cases	●
Broadened comprehensive laboratory: blood, urine and stool tests, stool bacteriological tests, blood coagulation test, erythrocyte sedimentation rate (We), basic infection tests (excluding STD tests and HIV test) and hormone tests (TSH, FT3, FT4), haematology, PCR, immunological tests – serology, infection tests (excluding STD tests, but HIV test covered for non-screening purposes), hormone tests, tumour and cancer markers, genetic tests, toxicology tests, for men: prostate cancer screening (PSA)	●
Broadened comprehensive diagnostics: gynaecological cytology, ECG (resting, stress, Holter), ABPM, ultrasound (US), X-ray (enterography, swallow examination), mammography, Doppler or arteriographic vascular examination, screening audiometry, audiological examination, dermatoscopy, central bone density examination (ODM), visual field test, allergy tests (Epicutan test, depending on age: skin test (Prick test) or blood test, 20-item nutritive and inhalant panel), aspiration cytology, detection of allergens by blood test, biopsy and examinations of cells and histological examinations, endoscopic examinations (gastroscopy, colonoscopy, cystoscopy for diagnostic purposes only, does not include therapeutic endoscopic interventional procedures), respiratory pulseoximetry, MRI, Cardio MRI (viability), CT, cardio-CT[1], 18F-FDG PET-CT, examination of the electrical activity of the brain, muscles and nerves (EEG, EMG, ENG), vascular system examinations, angiography, enterography, radioisotopic examinations (scintigraphy), articular puncture, spirometry	●
Outpatient surgery	●
Therapeutic exercise and therapeutic massage max. 10-10 times per insurance year and per Insured	●
Psychiatric specialist examination, max. 4 times per insurance year and per Insured	●
Hospital inpatient care at VIP level, patient transport, wide range of one-day surgical procedures	●
Medicare Hospital Plus Oncology[2]	●
Medicare Emergency[3]	●
Medicare Urgent Care Centre[4]	●
Medicare WhiteD[5]	●
Life1 Fitness**	●

* Among the services covered by the Platinum insurance package, the limited ones only include inpatient hospital care, patient transport and one-day surgery, for which the Insurer shall reimburse up to a combined annual limit of HUF 3,500,000 per insured person per year of insurance. The limit is available for each year of insurance. The Insurer shall finance up to 60 days of hospitalisation per insured person per year of insurance. The Insurer also applies a limit of HUF 75,000 per patient transport.

An unlimited number of additional health services covered by the Platinum package can be used organised by Medicare Zrt. if no limit is indicated for the service.

** **Life1 Fitness:** In addition to the package content, as part of the package purchase, Medicare Biztosító Zrt. provides the Insured or a family member designated by the Insured with free fitness entry and use, for rehabilitation purposes, at the fitness centres of Life1 Fitness and Fitness Vision Hungary Kft., for as long as this package is in force for the Insured.

1 Not covered for PTP (pre-test probability) between 6-15%.

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2. Medicare Hospital Plus Oncology

Medicare Hospital Plus Oncologyindividual health insurance rider package[1]	
Services covered by insurance	**Coverage**
Inpatient surgeries (one-day surgeries as well)	●
General surgeries	●
Ophthalmological surgeries	●
Orthopaedic surgeries	●
Gynaecological surgeries	●
Otolaryngological surgeries	●
Urological surgeries	●
Oncological surgeries[2]	●

[1] The services covered by the insurance package are selected from the healthcare services directly available at Medicare Hospital. The Insurer applies no limit, either in the number of services or in amount, to the services that the Insured can use under and at the expense of the Medicare Hospital Plus Oncology package, organised by Medicare Zrt. Among the healthcare services available at Medicare Hospital, the healthcare services covered by this insurance (surgical inpatient care, types of surgeries) are included in a separate document, the "Medicare Hospital Plus Oncology Package List of Covered Surgeries and Services"; their medical professional rules and conditions of use – independent of coverage – including health and medical conditions, are determined in detail by the healthcare provider Medicare Zrt. Medicare Hospital Plus Oncology only provides coverage for scheduled one-day surgery, surgical and elective inpatient care; rescue, emergency and acute cases are not covered. Further, risk bearing by the Insurer does not cover the reimbursement of the costs of artificial and corrective devices, prostheses, implants and other devices implanted or special surgical or medical devices used during surgical operations.

Medicare Zrt., as the healthcare provider, is entitled to pass on the costs of any additional services required due to the higher risk arising from the underlying illnesses of the patient concerned to the Client receiving such care.

[2] Within the framework of the package, only the care of patients belonging to the ASA I and ASA II physical condition classification levels, based on the examinations of Specialists and Anaesthesiologists, according to the ASA (Physical Status Classification System), is covered by the insurance.

The care of patients with ASA III and ASA IV classifications and above is excluded from the insurance.

The Insurer imposes a 6-month waiting period for oncological surgeries, based on which oncological surgeries are covered if the cause is a malignant tumour diagnosed after the first 6 months of the Insured's risk coverage.

Advanced hospital care and stay at Medicare Hospital

- modern, air-conditioned single rooms with a pleasant atmosphere
- private bathroom
- customised diet supervised by a dietitian to further quick recovery
- assistance by a nurse: escort from admission until occupation of the room, and to inpatient tests and procedures during the stay
- unlimited WIFI and TV use

The process of using a health service

1. Appointment booking via the Call Centre for a specialist examination (on weekdays between 7 a.m. and 8 p.m.) »
2. At the pre-operative consultation, it is determined whether the surgery is medically justified »
3. The Insurer informs the service organiser about the coverage of the surgery recommended by the specialist »
4. The service organiser contacts the patient to arrange the surgery »
5. Attendance by appointment at the service point arranged by the service organiser »
6. Identification by presenting a photo ID document at the healthcare provider's service point »
7. Use of the health service.

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3. Medicare Emergency

	Scope of insurance
Entitled to insurance services	Insured and one Immediate Family Member[1]
Discount on the per-event additional fee for a Registered Family Member[2]	44%
Availability (days/hours)	every day of the week 24 hours a day
Service provision from the dispatch of the ambulance unit / in an emergency rescue situation	within 2 hours / within 15 minutes
Location	Budapest and its surroundings[3]
Case limit for care within 2–6 hours (occasions/year/Insured)	8
Case limit for care within 2 hours (occasions/year/Insured)	unlimited
Discount from the list price of services provided by Medicare Zrt. ambulance units not covered by the Emergency insurance	44%

1: **Immediate Family Member:** a child, spouse/domestic partner or parent (age limit: from 12 to 75 years) living in the same household as the Insured, as an Insured person, who was reported to the Insurer when the insurance was concluded. One Immediate Family Member may be designated, who is also covered by this package as an Insured.
2: **Registered Family Member:** a child, spouse/domestic partner or parent (minimum age: 12 years) who was reported to the Insurer when the insurance was concluded.
3: The territorial scope of this insurance is Budapest and its surroundings, where the service(s) can be used:

Alsónémedi	Dunakeszi	Gyömrő	Nagytarcsa	Szentendre
Biatorbágy	Dunavarsány	Halásztelek	Páty	Szigetszentmiklós
Budakalász	Ecser	Isaszeg	Pécel	Sződ
Budakeszi	Érd	Kerepes	Pilisborosjenő	Sződliget
Budaörs	Erdőkertes	Kistarcsa	Pilisvörösvár	Taksony
Budapest	Felsőpakony	Leányfalu	Pilisszentiván	Törökbálint
Csomád	Fót	Maglód	Pomáz	Üllő
Csömör	Göd	Mogyoród	Remeteszőlős	Üröm
Diósd	Gödöllő	Monor	Solymár	Vác
Dunaharaszti	Gyál	Nagykovácsi	Szada	Vecsés

1. Insurance services

1.1 It includes insured events and medical conditions that require prompt (within 2–6 hours) but not immediate care, in particular:

- Persistent febrile conditions below 40°C that cannot be brought down
  - Severe urinary tract infections (persistent urination complaints, without impaired consciousness and complete urinary obstruction)
  - Respiratory infections (persistent cough, sputum production, fever, without impaired consciousness)
- General illnesses causing a weakened condition of the patient
  - Persistent vomiting
  - Persistent diarrhoea
  - Dehydration
- Post-operative conditions
  - Wound inflammation
  - Febrile condition
- Conditions of presumably peripheral origin involving dizziness and/or hearing loss (tilting vertigo, general feeling of unsteadiness, with severe nausea and vomiting)
- Tolerable abdominal pain (pain intensity of 1 to 5 on a scale of 10)
  - Biliary colic
  - Renal colic
  - Menstrual cramps
  - Pancreatitis
  - Pelvic inflammatory processes
  - Urinary obstruction
- Persistent mild chest complaints without vegetative symptoms (nausea, vomiting, sweating, fainting, shortness of breath) (pain intensity of 1 to 5 on a scale of 10)

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- Metabolic disorders (without loss of consciousness or impaired consciousness)
  - Low blood glucose levels(hypoglycaemia)
  - High blood glucose levels (hyperglycaemia)
- Acute flare-up of chronic pain (pain intensity of 1 to 5 on a scale of 10)
  - Sudden-onset low back pain, lumbago (except with accompanying urinary retention, movement disorder, sensory disturbance, paralysis)
  - Gout
- Blood pressure disorders
  - Hypertension with mild or no symptoms (headache (pain intensity of 1 to 5 on a scale of 10), general feeling of weakness)
  - Hypotension with mild or no symptoms (general feeling of weakness, where the hypotension is proven not to be caused by bleeding)
- Inflammatory diseases of the stomach and intestinal tract (mild abdominal pain, without massive bloody stools)
- Foreign body in the ear or nose (except in childhood, when it requires immediate care)
- Urological disorders
  - Blood in the urine
  - Painful urination
- Jaundice
- Hernia (strangulated or not)
- Mild nosebleed (bleeding not causing breathing difficulty, without taking anticoagulants and without accompanying severely elevated blood pressure)
- Minor closed limb injuries sustained at home, with mild bleeding and pain that can be relieved (in particular bruises, strains)

1.2. In addition to those set out in point 1.1, it includes insured events and medical conditions that require immediate care, in particular:

- Conditions involving abdominal pain
  - Appendicitis with suspected perforation
  - Large and small bowel obstruction with severe complaints and fever
- Strong, uncontrollable pain that is hardly bearable for the patient (pain intensity of 6 to 10 on a scale of 10)
  - Renal colic
  - Biliary colic
  - Menstrual cramps
  - Pancreatitis
  - Inflammatory processes of the pelvis
  - Urinary obstruction
- Conditions involving chest pain with pronounced vegetative symptoms (sweating, nausea, vomiting, loss of consciousness, shortness of breath)
  - Suspected heart attack
  - Suspected pneumothorax
  - Angina complaints
  - Suspected pulmonary embolism
- Conditions involving breathlessness, typically with sudden onset
  - Serious asthma attacks (serious breathing difficulty, impaired consciousness, pale, sweaty skin)
  - Pneumonia (rapid breathing, high fever, severe breathing difficulty, impaired consciousness, pale, sweaty skin)
  - Acute exacerbation of chronic obstructive pulmonary disease (COPD)
  - Acute left cardiac insufficiency
  - Foreign body in the airways
- Sudden-onset disturbances of consciousness
  - Diabetic coma (pale, sweaty skin, confusion, history of diabetes)
  - Unconsciousness
- Sudden-onset bleeding that is life-threatening or poses a risk of damage to health
  - Arterial bleeding (pulsating, bright red bleeding)
  - Venous bleeding (massive, steady, dark red bleeding from the wound)
  - Gastrointestinal bleeding (coffee-ground, dark red or large amounts of bloody vomit)
- Seizures
  - Epileptic seizures
  - Epileptiform seizures (e.g. febrile seizure)
- Thermoregulation disorders:
  - Severe fever (above 40°C, regardless of medical history, impaired consciousness, sweaty skin)
  - Severe hypothermia (below 34°C)
- Sudden-onset cardiac arrhythmias

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  - Abnormal rapid heartbeat(tachycardia) with alarming symptoms (loss of consciousness, confusion, pallor, sweating, chest pain)
  - Abnormal slow heartbeat (bradycardia) with alarming symptoms (loss of consciousness, confusion, pallor, sweating, chest pain)
- Serious allergic reactions with severe, generalised symptoms (hoarseness, difficulty swallowing and breathing, swelling localised to the face, especially the mouth and tongue, loss of consciousness)
  - Insect bites and stings
  - Food allergy
  - Allergic conditions caused by chemicals
  - Drug allergy
- Electric shock (especially electric shock causing an electrical burn mark)
- Limb monotrauma sustained at home (isolated open injury of one limb, e.g. hand, forearm, elbow, upper arm, foot, ankle, lower leg, knee, femur, accompanied by bleeding and unbearable pain)
- Cerebrovascular accidents (sudden-onset, typically unilateral symptoms on the face and limbs (numbness, weakness, paralysis), speech disorder, visual disturbance, loss of consciousness, dizziness)
  - Stroke
  - Sudden thunderclap headache
- Severe nosebleed (bleeding causing breathing difficulty, taking anticoagulants, accompanying severely elevated blood pressure)
- Blood pressure disorders
  - Hypertension with serious symptoms (severe headache (pain intensity of 6 to 10 on a scale of 10), difficulty speaking, dizziness, one-sided weakness, nosebleed)
  - Hypotension with serious symptoms (dizziness, weakness, loss of consciousness, pallor, sweating, suspected underlying bleeding)

The health services are provided by Medicare Zrt.

Medicare Zrt. accepts service requests for the Medicare Emergency ambulance service exclusively via the dedicated telephone number – 06-1/611-2000 – and undertakes to provide services only in response to calls received on this number.

When a service request is made by telephone, Medicare Zrt. only checks with the person intending to use the service whether the case constitutes an excluded risk or whether grounds for exemption apply. Based on the information obtained during the call and in accordance with the rules, the dispatcher decides whether the ambulance is dispatched immediately or at a later time. Consequently, the dispatcher cannot and is not authorised to provide the caller with information about coverage. Depending on the insurance coverage of the person requiring care and the insurance package available to the patient, the ambulance care may be used at the expense of the insurance, or the ambulance care of Medicare Zrt. may become a discounted service subject to a separate payment obligation.
If the patient requires further care beyond on-site treatment, the Medicare ambulance transports the Client to the nearest suitable healthcare institution able to admit them for the provision of the further necessary services.

The official language of the Emergency Ambulance service is Hungarian.

The service may only be requested in cases that justifiably require ambulance care. If the telephone number 06-1/611-2000 is used, intentionally or through grossly negligent conduct, other than for its intended purpose or in accordance with the insurance conditions, Medicare Zrt. is entitled to charge the amount specified for such cases in its price list for the care provided.

Advanced-level care
For the insured events listed in this information section, Medicare Zrt. ensures the availability of highly equipped, modern ambulance vehicles at advanced life support (ALS) unit level, which are suitable both for treating clients at their place of stay and for transporting them to a hospital appropriate to their condition, and also enable ambulance care in the most severe cases.

Two staff members serve on each Medicare ambulance: a paramedic and an emergency medical technician. The paramedic is a university-qualified professional specialising in emergency ambulance care, who independently decides on the justification of a number of emergency interventions and also performs them. The emergency medical technician, who holds a specialist nursing qualification, assists during care: they prepare the necessary medical equipment and medicines and also act as the driver. During home care, ambulance transport and emergency situations, highly qualified medical staff attend to the patient and monitor their condition throughout.

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The process of using the service

1. When an insured event or need for ambulance care corresponding to the chosen insurance package occurs, call 06-1/611-2000 >> In the cases listed in the Exclusions section of the list of insured events, call the Unified Emergency Call System on 112.
2. Answer the dispatcher's questions and follow the dispatcher's instructions >> If, based on the information provided, the dispatcher considers that the case is an ambulance case not covered by the insurance and falling within the competence of the National Ambulance Service (OMSZ), or that the involvement of OMSZ is otherwise necessary, the dispatcher will contact OMSZ and the ambulance care will begin as agreed.
3. Based on the health complaints and the guidelines and principles of emergency medical services, consultation on the health service to be provided, on starting the ambulance care or, if necessary, telephone-guided resuscitation, and, depending on the person using the service and the given case, possibly on its costs >>
4. After the arrival of the ambulance, use of the health service.

Exclusions

The following events, medical conditions and types of care are excluded from the Medicare Emergency Ambulance service, as they are tasks primarily requiring the resources of and falling within the competence of the National Ambulance Service (OMSZ) and, in certain cases, tasks requiring other outpatient care resources, which do not form part of the Medicare Emergency services:

- Sudden illness in public places, in particular road traffic accidents, for example
  - Femoral neck fracture
  - Polytrauma (severe injury to several body regions, any one of which is life-threatening)
  - Being hit by a vehicle
  - Crash
  - Fall from height
  - Foreign body in the abdomen, chest, limbs, neck, rectum and vagina
- Obstetric and gynaecological events, for example
  - Labor that has started
  - Abortion
  - Other gynaecological bleeding
  - Care of newborns/premature infants
- Care of children under 12 years of age
- Known and exclusive influence of alcohol or drugs, poisonings, intentional self-harm, for example
  - Alcohol intoxication
  - Drug intoxication
  - Influence of other psychoactive substances
  - Drug intoxication
  - Suicide attempts
  - Chemical intoxication
  - Gas intoxication
- Confirmation of death
- Criminal events, for example
  - Gunshot wound
  - Cut and stab wounds
  - Suicide/homicide and attempts thereof
  - Physical abuse
  - Sexual abuse
- Acute psychiatric conditions
- Conditions requiring home nursing care
- Prescription writing
- Ophthalmological conditions
- Dermatological diseases

Exemption of the Insurer and Medicare Zrt.

The Insurer and Medicare Zrt. are exempt from providing ambulance services as described in this service description and from the payment obligation if:

- Medicare Zrt. cannot be reached by telephone due to force majeure or any other reason not attributable to Medicare Zrt.

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4. Medicare Urgent Care Centre

Individual health insurance package[1]	
Entitled to insurance services:	Insured
Availability of the Medicare Urgent Care Centre[1] (days/hours)	Monday to Saturday between 8 a.m. and 8 p.m., Sunday between 10 a.m. and 6 p.m. [2]
Services covered by insurance	Physical examination by a specialist
	Laboratory
	ECG
	X-ray
	Bedside orientational US[3]
	Native CT

The covered services can be used by the Insured as part of the urgent care provided at the Medicare Urgent Care Centre, organised by Medicare Zrt. Services at the Medicare Urgent Care Centre can only be used either by paying according to the itemised price list or at the expense of this package, and not at the expense of any other Medicare insurance or any package for which Medicare Zrt. is the care organiser or primary healthcare provider.

[1]: Incoming patients are examined, diagnosed, given primary care and, if necessary, referred on at Medicare Hospital.

[2]: With the proviso that, in order to ensure the comprehensive care of patients, patients are admitted until 7 p.m. from Monday to Saturday and until 5 p.m. on Sunday, except on public holidays.

[3]: Orientational bedside ultrasound examination performed by an emergency physician at the Medicare Urgent Care Centre.

1. Insurance services

1.1 The package includes insured events and medical conditions that, from an emergency perspective, require prompt but not immediate care, in particular:

- Persistent febrile conditions below 40°C that cannot be brought down
  - Urinary tract infections (urination complaints)
  - Respiratory infections (cough, sputum production)
- General illnesses causing a weakened condition of the patient
  - Vomiting
  - Diarrhoea
  - Dehydration
- Post-operative conditions
  - Wound inflammation
  - Febrile condition
- Conditions of presumably peripheral origin involving dizziness and/or hearing loss (tilting vertigo, general feeling of unsteadiness, with severe nausea and vomiting)
- Tolerable abdominal pain (pain intensity of 1 to 5 on a scale of 10)
  - Biliary colic
  - Renal colic
  - Menstrual cramps
  - Gastroenteritis
  - Pelvic inflammatory processes
  - Urination complaints
- Mild chest complaints without vegetative symptoms (nausea, vomiting, sweating, fainting, shortness of breath) (pain intensity of 1 to 5 on a scale of 10), palpitations
- Breathing difficulties, e.g. mild or moderate asthma
- Metabolic disorders (without loss of consciousness or impaired consciousness)
  - Low blood glucose levels (hypoglycaemia) – without loss of consciousness
  - High blood glucose leveles (hyperglycaemia) – without vomiting/diarrhoea/loss of consciousness
- Acute flare-up of chronic pain (pain intensity of 1 to 5 on a scale of 10)
  - Sudden-onset low back pain, lumbago (except with accompanying urinary retention, faecal incontinence, one-sided paralysis, sensory loss)
  - Gout
- Blood pressure disorders

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  - Hypertension with mild or no symptoms (headache (pain intensity of 1 to 5 on a scale of 10), general feeling of weakness)
  - Hypotension with mild or no symptoms (general feeling of weakness, where the hypotension is proven not to be caused by bleeding)
- Mild or moderately severe allergic reaction (rash, itching all over the body, swelling not extending to the tongue and pharynx)
- Inflammatory diseases of the stomach and intestinal tract (mild abdominal pain (pain intensity of 1 to 5 on a scale of 10), without bloody stools or vomiting blood)
- Urination complaints
  - Blood in the urine
  - Painful urination
  - Urinary blockage
- Jaundice (except conditions related to alcohol-related disease)
- Mild nosebleed (bleeding not causing breathing difficulty, without taking anticoagulants)
- Closed limb injuries
- Limb injuries with mild bleeding and pain that can be relieved
- Mild, blunt chest injuries not involving shortness of breath
- Head injuries not involving confusion, loss of consciousness or vomiting

2. Scope of care provided by the Medicare Urgent Care Centre

All persons using the service first undergo triage (initial assessment) performed by a nurse, during which blood sampling and a 12-lead ECG are also carried out if necessary. The patient then undergoes a physical examination by a physician in the patient reception unit. In the event of alarming symptoms, the patient's condition is stabilised and, in parallel, an ambulance unit is alerted.
From the patient reception area, depending on their condition and care needs, the patient may be directed to the waiting room or the observation room, where we can administer medication and analgesic infusions and provide non-invasive monitoring. Even with the most thorough pre-screening, it may happen that a patient whose condition requires a higher level of care arrives at the facility; such patients are transferred without delay to a healthcare institution with the appropriate competence.

Following the physical examination, imaging and laboratory tests can be performed. Imaging diagnostics can take place at the Advanced Diagnostic Centre of Medicare Hospital, where X-ray and computed tomography (CT) can be performed immediately and in-house, and the results are also reported in-house without delay. At the Medicare Urgent Care Centre, a targeted, orientational bedside ultrasound examination can also be performed (based on the POCUS guidelines of the Department of Emergency Medicine).

If specialist outpatient examinations are required as part of secondary care, these are carried out at an elective appointment in the dedicated specialist clinics of Medicare Hospital.

3. Conditions of urgent care at the Medicare Urgent Care Centre

The health services related to urgent care at the Medicare Urgent Care Centre are also provided by Medicare Zrt.

Medicare Zrt. accepts service requests for the Medicare Urgent Care Centre exclusively via the dedicated telephone number (06-1/465 3112) and undertakes to provide services only in response to calls received on this number.

The health advisor can provide the caller with information on coverage, but not on any additional fees that may arise. Depending on the insurance coverage of the person requiring care and the insurance package available to the patient, the care may be used at the expense of the insurance, or the care at the Medicare Urgent Care Centre may become a service subject to a separate payment obligation.
Care that is included in the package's List of Benefits but whose recommended use falls into the scheduled or acute (outpatient) care category cannot be used at the Medicare Urgent Care Centre at the expense of the package.
The official language of the Medicare Urgent Care Centre service is Hungarian.
For services at the Medicare Urgent Care Centre not covered by the insurance, Medicare Zrt. invoices the person using the service for the separate fee set out in the price list in force at any given time. The fee can be paid at the reception:

- by bank card,
- in cash, or
- by health fund card.

If the separate fee is not settled, Medicare is entitled to (temporarily) suspend further services, starting from the day following the expiry of the payment deadline, in respect of the Insured person(s) whose invoice for care has not been paid.

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The process of using the service

1. If an insured event or medical condition corresponding to the insurance package occurs, call 06-1/465 3112 >>
   If the care is not covered by the package (it is not part of the package content and/or the risk is excluded) and the need is urgent, go to the competent Emergency Department or call the Unified Emergency Call System on 112.
2. Answer the dispatcher's questions and follow the dispatcher's instructions >>
   If, based on the information provided, the dispatcher considers that the case falls within the competence of the competent Emergency Department or that the involvement of the National Ambulance Service (OMSZ) is otherwise necessary, the dispatcher will inform the client accordingly.
3. If necessary, a specific time slot can be arranged for the same day or for a later day.
4. Arrival and identification of the Insured, followed by use of the health service.

Exclusions

The following events, medical conditions and types of care are excluded from the urgent care service of the Medicare Urgent Care Centre, as they are tasks primarily falling within the competence of the competent Emergency Department and, in certain cases, tasks requiring other outpatient care resources, which do not form part of the services of the Medicare Urgent Care Centre:

- Road traffic accidents and the following traumas
  - Neck and cervical spine, femur, hip, pelvis and blunt abdominal trauma
  - Polytrauma (severe injury to several body regions, any one of which is life-threatening)
  - Monotraumas with deformity
  - Being hit by a vehicle
  - Fall from height (from a height greater than one's own body height)
  - Foreign body in the abdomen, chest, neck
- Obstetric and gynaecological events, for example
  - Onset of labour
  - Abortion
  - Other gynaecological bleeding
  - Care of newborns/premature infants
- Known and exclusive influence of alcohol or drugs, poisonings, intentional self-harm, for example
  - Alcohol intoxication
  - Drug intoxication
  - Influence of other psychoactive substances
  - Drug poisoning
  - Suicide attempts
  - Chemical poisoning
  - Gas poisoning
- Certification of death
- Criminal events, for example
  - Gunshot wound
  - Cut and stab wounds
  - Suicide/homicide and attempts thereof
  - Physical abuse
  - Sexual abuse
- Acute psychiatric conditions
- Conditions requiring home nursing care
- Penetrating eye injuries and/or conditions involving loss of vision
- Chronic dermatological conditions
- Respiratory and cardiac arrest, post-resuscitation condition
- Ictal (sudden-onset), unilateral (one-sided) limb weakness/paralysis, speech impairment
- Conditions involving disturbances of consciousness
- Conditions with cumulative spasmodic activity
- Foreign body in the airways
- Extensive burns, or burns affecting the airways or body regions that significantly affect quality of life
- Major bleeding
- Paediatric care (children under 16 years of age)
- Acute inability to walk
- Events related to the care of dialysis patients
- Care during oncological treatment or within the first 6 months following active oncological treatment, palliative care
- Care during acute biological therapy (immunocompromised patients)
- Conditions involving impaired consciousness and care requiring oxygen therapy
- Bloody stools, vomiting blood, coffee-ground vomit, melaena (digested blood)
- Maintenance infusion therapies

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5. Medicare White D

Services covered by insurance	Coverage	Limit	
Appointment booking through Call Centre, healthcare organisation	●	Unlimited[1]	
Annual dental screening, as part of this, foci search, Panoramic X-ray and compilation of a treatment plan	●	One occasion / person per insurance period[2]	
Dental hygiene treatment with tartar removal	●	Max. HUF 50,000 / person per insurance period and annually[3]	Max. HUF 150,000 / person per insurance period and annually[3]
Scheduled (non-acute) dental care: dental filling and root canal treatment within the framework of tooth preservation (specialist) care	●		
Dental care in acute cases: in the case of acute toothache or facial swelling, medically justified tooth extraction or tooth removal, and of the tooth preservation (specialist) services listed below, those medically necessary, for the first time: ✓ tooth replacement (if possible), splinting, medicated bonding, temporary repair of a broken front tooth; ✓ root canal treatment, opening of the tooth or tooth cavity, cleaning of an inflamed tooth and (antibiotic) treatment of inflammation, medicated tooth filling, application of medicated solution, pocket treatment, prescription of medicine; ✓ treatment of inflamed soft tissue around the wisdom tooth ✓ opening of an abscess within the oral cavity, treatment of gum swelling, ulcers, bleeding gums; ✓ medication for acute inflammatory diseases of the oral mucosa and the lips; ✓ relief of bleeding in or around the mouth (surgical tampon, dressing, suture); ✓ fixing by screw of broken denture, fallen temporary crown, bridge, loose implant crown, re-gluing of fallen front crown; ✓ re-gluing of fallen orthodontic bracket, smoothing out the sharp edges of an orthodontic device that causes ulcers.	●	●	

1 Unlimited: in the case of services provided by Medicare Dental Kft., if no limit is specified for the service.

2 At least 10 months must elapse between two dental screenings used by the Insured as part of the insurance. This service can be used once per insurance period (per year) by the Insured as part of the package.

3 The limit applies to and governs each insurance period as well as each one-year period.

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Special rules:

The services covered by the insurance package are available exclusively at and directly from Medicare Dental Kft.

Tooth preservation care means only dental care that is medically justified, is not for aesthetic purposes and serves to stabilise or restore condition, as well as professional dental and oral surgery care in accordance with professional standards (in particular: tooth preservation (specialist) care: dental filling and root canal treatment, abscess treatment, foci search, cleaning of inflamed teeth and treatment of inflammation).

Acute dental care includes exclusively dental and oral surgical treatment that is medically justified, is not for aesthetic purposes, complies with the applicable laws and professional standards, and serves to stabilise or restore condition in the case of a toothache, facial swelling or dental inflammation, arising from an acute care case.

Medicare Dental Kft. is entitled to pass on the costs of any additional services required due to the higher risk arising from the Clients' underlying illnesses to the Client treated.

Further, risk bearing by the Insurer does not cover artificial and corrective devices, prostheses, implants and other devices implanted or special surgical or medical devices used during surgical operations.

Risk bearing by the Insurer does not cover the following events: non-medically justified dental care, rescue and emergency cases, aesthetic dental care, teeth whitening, dental care related to dental jewellery, gold teeth and medically unjustified substances, airflow (salt polishing), fluoride treatment, APF gel treatment, treatment for reducing tooth sensitivity, inlay, onlay, curettage, dental implants, dental veneers, dental prosthetics, orthodontics, preparation of false teeth and dentures, and the related dental examinations and treatments.

The process of using a health service

1. Appointment booking via the Call Centre (between 7 a.m. and 8 p.m. on weekdays), in case of emergency (no appointment booking), the health service provider can be contacted at any time via the 24-hour health advice line for health advice »
2. Coverage checks are carried out on the basis of the MRN ID number and personal data (prepare an ID card) and, if necessary, by requesting additional documents to establish whether the healthcare claimed is for an illness or accident or for preventive purposes. »
3. Based on health complaints and health service needs, consultation on the health service to be provided, its time, place and financing method »
4. By appointment, in acute cases within 48 hours, attendance at a service point organised by Medicare Zrt. »
5. Identification by presenting a photo document at a Medicare Zrt. service point »
6. Use of the health service.

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