

'SAĞLIĞIM MİSAFİR' HEALTH INSURANCES INFORMATION FORM

Issued in minimum two original copies, this Form is drawn up pursuant to the Directive on Providing Information regarding Insurance Agreements, effective as of 28.10.2007 through promulgation in Turkish Official Journal No. 26684, with the purpose of providing general information on various significant issues to the Insurant and other insurance beneficiaries about the insurance agreement to be executed.

A. WARNINGS:

- 1-Please read carefully the Health Insurance General Conditions to be provided by the Insurer upon your request to learn more about the Insurance.
- 2- Pursuant to Article 8 of Health Insurance General Conditions, Insured is liable to pay the entire Insurance Premium amount or the first Premium Installment amount at Policy delivery; in case of risk realization, Insurer's liability shall not commence unless the payment of the foregoing is realized
- 3- Health Insurance Premiums paid can be deducted from income tax base. Please refer to your Insurance Company to get Information on this issue.
- 4- Pursuant to Article 8 of Health Insurance General Conditions,, in case of default in payments of premium obligations for short term health insurance policies, provisions of Turkish Commercial Code shall apply.
- 5- Unless agreed as otherwise, Insurance Agreement starts at 12:00 PM on the inception date and ends at 12:00 PM on the end date, and in any event upon risk realization.
- 6- Please do not forget to get a payment receipt in return for your premium payments (for prepayments or installments) to prevent any potential future disputes which may arise.
- 7- At policy renewal, exceptions and disease/sickness upper limits can be applied to the policies, additional premium amounts can be requested for such risks opr participation protocol can be applied, according to the health conditions of the candidate regarding current health issues.
- 8- Premium specified in the relevant policy is applicable only to the Insured and no new policy shall be issued to any person without additional premium payment.
- 9- By signing the relevant documents, persons insured or to be insured are considered to have given their consent that their health information, coverage records and other data can be obtained from Insurance Information and Monitoring Center (SBM), Social Security Institution (SSI), Ministry of Health, healthcare institutions and insurance companies with the purpose of performing risk assessments and finalizing indemnity claims and information in the Company's possession can also be shared with SBM, insurance companies and other institutions and authorities specified in the relevant legislation.

B. GENERAL INFORMATION:

Insurer guarantees to cover the expenses to be incurred by the Insured person(s) specified in the Policy/Endorsement, for diagnosis and treatment of diseases, sickness and/or accidents specified in the Policy/Endorsement, which may occur between the Insurance Inception and Expiration dates, within the insurance coverage amount, limits, participation rates and implementations as specified in the Policy/Endorsement and certificates attached thereto, pursuant to the General Provisions of Turkish Commercial Code and General and Special Conditions of Health and Personal Accident Insurance.

Inpatient Treatment Coverage: Health expenses incurred where inpatient treatment is

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required for the Insured are included here according to the specified coverage amount, limits, implementations and participation shares. Chemotherapy, Radiotherapy and Dialysis are considered under Inpatient Treatment coverage.

Intensive Care : Health expenses incurred where inpatient treatment is required to be performed in intensive care unit are included here according to the specified coverage amount, limits, implementations and participation shares.

Minor Intervention : Health expenses incurred where surgical interventions specified in Minimum Wage Tariff of Turkish Medical Association (MWT) are required shall be included here according to the specified coverage amount, limits, implementations and participation shares.

Auxiliary Medical Materials : Health expenses which may be incurred to support the Insured's treatment (auxiliary medical materials, crutches, wrist straps, support bandages, orthopedic supports, wheel chairs, corsets, orthopedic shoes, arch supports, boots, slippers, ice packs, any other orthopedic supports of all kinds, etc.) are included here according to the specified coverage amount, limits, implementations and participation shares.

Ambulance Services: Includes ambulance services coverage within Turkey 24hr/365 days in accordance with Insurance General & Special Conditions.

Outpatient Treatment Expenses: Covers expenses for medical exam, medication, lab services, imaging & diagnosis methods and physiotherapy.

Delivery coverage is not included in the relevant price list/Policy.

Expenses for Spectacle Glasses & Frames / Lenses : Covers expenses incurred for spectacle glasses & frames and contact lenses provided that these are prescribed by an ophthalmologist and supported by invoices. **Spectacle Glasses & Frame / Lense coverage is not included in the relevant price list/Policy.**

Dental Expenses : Covers dental expenses incurred for dental treatments performed at hospitals and clinics licensed by Turkish Ministry of Health and/or at private offices of permitted dentists. For the purposes of this coverage "dental expense" includes the expenses made for dentist examinations, dental treatments, dentures, x-rays and dental surgeries. **Dental Expenses coverage is not included in the relevant price list/Policy.**

Rehabilitation Expenses: This coverage includes all costs and expenses incurred during the functional trainings provided to the Insured to ensure them to restore their functional ability & quality of life (walking with or without clutches, eating, drinking, dressing/undressing, using the bathroom, using the stairs, etc.) the they lost after neurological diseases, severe trauma, limb amputation etc. (rehabilitation) and health expenses made during hospitalization.

Rehabilitation Expenses coverage is not included in the relevant price list/Policy.

Hearing Aids : This coverage includes costs & expenses for hearing aid devices obtained by doctor's prescription. **Hearing Aid coverage is not included in the relevant price list/Policy.**

Your product does not include the following coverages:

- Delivery Coverage,
- Newborn Coverage,
- Expenses for spectacles glasses & frame, all types of contact lenses, lens solutions,
- Examination, diagnosis, treatment expenses and expenses for relevant complications of dental, gum, jaw bone, temporomandibular joint and maxillofacial surgery,
- Rehabilitation Expenses,
- Hearing Aid Expenses,

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- Prosthesis Expenses,
- Air Ambulance,
- Dental Treatment due to Traffic Accident,
- Personal Accident Coverage
- Physiotherapy after Hospitalization,
- Mammography and Mammary PSA,
- Check-up Expenses,
- Daily incapacity wage amounts which the Insured is not able to earn due to sickness,
- Care costs & expenses in case the Insured becomes in need of care or daily care costs or the agreed daily care fee (except for expenses included in Home Care Coverage specified in the Policy),

C.PREMIUM ASSESSMENT

Criteria regarding Premium Assessment - What is Product Table Price?

Product Table Price is defined as the premium amounts determined and revised from time to time by the Insurer for the products on sale, based on the assumption that each candidate is completely healthy and resides in Istanbul, and according to an advance payment plan based on candidate's age & gender.

Which Criteria Are Used for Assessment of Table Price?

Medical inflation rate (changes in implementation and annual pricing of Minimum Wage Tariff of Turkish Medical Association (MWT), changes in current prices of private hospitals, medication prices, surgical disposal material prices, costs of newly introduced diagnose and treatment methods in line with technological developments), product's profit/loss status, overhead costs & expenses, commission rates, aging of relevant portfolio, changes in risk distribution for (seemingly) age & gender dependent diseases and associated treatments, changes in FX rates, etc. are the criteria considered for assessment & determination of product table prices. Insurer can recalculate and change the product table prices in line with the foregoing criteria at times when the Insurer may deem as necessary.

Premium Related Arrangements

Premiums of Insured persons are determined through discounts and additional premiums applied on Table Prices.

Table Prices shall be used for premium assessment of newcomers.

Table Prices shall also be the basis for assessment of renewal premiums. However, renewal premiums shall be calculated through considering the following circumstances affecting the Table Price.

Circumstances Affecting Table Prices: Disease additional premiums specific to Insured person, frequency of coverage use can cause increases or decreases in Table Prices. Additional premium rates to be applied during renewal periods are specified in Policy Special Conditions.

Products and prices provided to the Insured are subject to advance payment.

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D. EXCEPTIONS

Please see the "Exceptions" section in Health Insurance General Conditions, Personal Accident Insurance General Conditions and Sağlıkım Misafir Health Insurance Policy Special Conditions for items out of coverage.

E. RENEWAL WARRANTY

'Sağlıkım Misafir' Product does not provide renewal warranty. All policies are issued as new business even if the Insured used to have a renewal warranty in their previous policy and this right cannot be continued.

F. INDEMNITY CLAIM PAYMENTS

- 1- beneficiaries shall be liable to provide all required documents to the Insurer to be able to claim their rights arising from the Policy. Documents required for Indemnity claim payments may be different for all claims depending on the coverages purchased with the Policy. Please ask your Insurer for a current list of required documents.
- 2- In case of risk realization, inform your Insurer within five (8) business days, contact information of which is indicated on the cover page, together with the required documents and information.
- 3- Insurer shall be liable to pay indemnity in case of risk realization.
- 4- Insurer shall perform the required examinations and complete indemnity procedures within maximum 10 days following the receipt of full required information and documentation.

G. COMPLAINTS AND INFORMATION REQUESTS

The address and phone numbers stated below may be used for all information requests and complaints regarding the insurance. Insurer has to reply all requests within 15 days upon receipt of application.

H. ARBITRATION PROCEDURE:

Axa Sigorta A.Ş. is an insurance firm that is a party to the insurance arbitration organization. You can contact the insurance arbitration committee by visiting the web site www.sigortatahkim.org, sending an e-mail to the address bilgi@sigortatahkim.org, or calling 0216 651 65 65 (pbx).

() I herewith declare that I have read the information provided to me, I am informed regarding the product and covers I have chosen, I have received sufficient information regarding my rights (as Data Subject) and processes regarding personal data processing per 6698-Turkish Data

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Protection Law and furthermore I also confirm that I could reach necessary The relevant payment options and applicable discount and extra premium rates can be changed by the Insurer.

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