



**GENERAL CONDITIONS
TIQUICIA SELF-EXTENDABLE INSURANCE**

INSURER'S COMMITMENT

The INSTITUTO NACIONAL DE SEGUROS, holding legal identification number 40000-1902-22 hereinafter referred to as "INSTITUTO", compromises with the INSURED AND/OR POLICYHOLDER, to the issuance of this policy pursuant to the General Conditions to be stipulated further and based on the statements made in the offer causing this contract.

INSTITUO hereby declares the contractual commitment to comply with the terms and conditions of the present policy.

INSTITUTO NACIONAL DE SEGUROS



MBA. Luis Fernando Monge Salas
Gerente General
Cédula Jurídica 4-000-001902

Legal representative's signature



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A. DEFINITIONS

The definitions hereunder are defined as they should be understood in this policy:

1. **ASSISTANCE SERVICE:** group of technical and/or professional services that are intended to support the INSURED in case of adverse events covered by these conditions.
2. **DEDUCTIBLE:** fixed amount that represents the economic participation of the INSURED in the compensation under the coverages in which it applies.
3. **HOSPITAL:** public or private establishment legally authorized for medical service of sick or injured people that provides nursing assistance twenty-four (24) hours a day, which has the resources and proficiency to carry out diagnoses and surgical interventions, meaning, that it has and regularly uses laboratories, radiography equipment and operating rooms staffed by specialized professional personnel.
4. **INSURANCE OFFER:** document with the offer made by the INSTITUTO and the acceptance of which by the policyholder perfects the insurance contract.
5. **INSURED:** natural person who is exposed to the insured risks. Also becomes the policyholder when he hires this insurance on his own or on behalf of a third party.
6. **LOSS/ EVENT:** precise manifestation of the insured risk that makes the insurer's obligation enforceable.
7. **PHYSICIAN:** enabled and legally authorized professional to practice human medicine in Costa Rica and qualified to carry out the required treatment and/or diagnosis.
8. **PLAN:** insurance alternative described and chosen by the INSURED in the Insurance Offer.
9. **R.A.:** reasonable and customary cost in force in the national territory, where the medical service or treatment described in the General Conditions is required.

B. DOCUMENTS THAT MAKE UP THE POLICY AND THEIR PRIORITY ORDER

According to their order of priority, this policy is constituted by the Insurance Offer and the General Conditions.

C. COVERAGE

Covers accommodation, medical expenses and assistance services that arise because of COVID-19 during the duration of the policy, while the INSURED is in national territory,



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as a tourist, executive or student, provided that he has complied with all the requirements to enter the country.

D. COVERED RISKS

1. BASIC COVERAGE FOR ACCOMODATION COSTS AND TRAVEL ASSISTANCE

1.1. ACCOMODATIONS COSTS COVERAGE

The necessary expenses incurred by the INSURED will be reimbursed through R.A., for the use of a standard room in a hotel during the time they must stay in the country for a period greater than the established in the initial travel itinerary when declared positive of COVID-19 or suspected transmission by nexus, as well in case of official border closure declared by the Costa Rican Government.

1.2. TRAVEL ASSISTANCE SERVICE

a. PHONE MEDICAL GUIDANCE

The INSURED will be in contacted by telephone to receive medical guidance on: the use of medications, symptoms or discomforts that are afflicting him, interpretation of laboratory tests, as well as medical and pharmaceutical recommendations.

This service is provided without limit of events and does not replace the on-site visit, meaning, the physician will not diagnose or prescribe medications over the phone.

b. ADMISSION TO HOSPITAL FOR COVID-19 SUPPORT

If the INSURED is diagnosed as positive for COVID-19, they will be advised by telephone about different location recommendations, requirements, documents, etc., which they should consider prior to entering the corresponding hospital.

The benefit is limited to advise and does not include the expenses that may be generated by said hospitalization.

c. REPATRIATION OF REMAINS TO THE COUNTRY-OF-ORIGIN ASSISTANCE

This service consists of providing the relocation of the urn with ashes, to the country of origin at request of relatives or acquaintances due to the death of the INSURED in Costa Rican territory because of COVID-19 during the duration of the policy. The following services will be provided:

- i. Supply the urn to deposit the ashes of the deceased. Cremation will not be granted by the INSTITUTO.
- ii. Provide guidance in carrying out the legal, customs and consular procedures for the transfer and delivery of the urn to its country of origin.
- iii. Provide and cover the transfer of the urn by air transportation, from Costa Rica's airport to the INSURED's country-of-origin airport.

2. ADDITIONAL COVERAGE | MEDICAL EXPENSES FOR COVID-19



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The medical expenses incurred by the INSURED will be reimbursed for the services and medical supplies required to restore health, in accordance with the R.A., and as a result of a positive diagnosis of COVID-19 during the duration of the policy and until the insured sum is exhausted.

The medical expenses covered are:

- i. Medical fees.
- ii. Hospitalization in a standard private room.
- iii. Anesthetists, radiological examinations or treatments and laboratory analysis, essential for medical treatment.
- iv. Nurse, for a maximum of three (3) shifts per day, up to thirty (30) days.
- v. Ambulance services, up to a maximum of twenty five percent (25%) of the contracted insured sum.
- vi. Intensive care units, if required by a specialist doctor.
- vii. Consultations with specialists deemed necessary to treat the disease.
- viii. Medications prescribed by the treating physician.

The coverage is limited to the insured sum indicated in the Insurance Offer.

E. INSURED SUM

The maximum insured sums for each coverage are established in the Insurance Offer, according with the contracted plan.

F. TERRITORIAL SCOPE

The policy covers the INSURED for events that occur within Costa Rica.

G. COVERAGE PERIOD

The insurance will only cover claims for losses that occur during the term of the policy, even if the claim is filed after the term has expired. The latter does not apply to assistance services.

H. EXCLUSIONS

Specific exclusions applicable for the ADDITIONAL COVERAGE | MEDICAL EXPENSES FOR COVID-19

1. Negative diagnostic tests.
2. Additional expenses incurred if hospitals in Costa Rica do not have Intensive Care Units available, and those incurred due to the lack of medications or medical equipment required for the care of diseases resulting from COVID-19.
3. Medical expenses incurred when the attending physician is the INSURED, insurance intermediary, self-extending insurance operator, partner, employee of the INSURED or family member of the INSURED up to the third degree of affinity or blood relationship are excluded.



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I. DEDUCTIBLE

Deductibles apply per event, as outlined in the Insurance Offer.

J. OBLIGATIONS OF THE INSURED, POLICYHOLDER O BENEFICIARY

1. Provide the INSTITUTO with all required information in a complete and truthful manner.
2. Payment of the premium.
3. Undertake the deductible stipulated in the Insurance Offer.

K. PREMIUM

This policy is based on the advance payment of the premium established in the Insurance Offer.

L. PREMIUM PAYMENT

The payment of the premium will be made to the INSTITUTO in a single tract and in anticipation of the contract. It may be in cash or any other form of payment, conditioned to the INSTITUTO receiving the money in satisfaction.

M. PROCEDURE FOR NOTIFICATION AND HANDLING OF CLAIMS AND ASSISTANCE CLAIMS

The Institute shall be notified of the occurrence of the event prior to incurring in any expenses. The notification shall be made through the Customer Service Call Center **(+506) 4404-1560**. The same number will be available for the INSURED to request assistance and consult updated reports from the Institute's assistance suppliers. The INSURED should consider that the assistance services will be authorized by the INSTITUTO, provided that the requested information and documentation is submitted, and the orders of the competent authorities are not violated.

The INSURED authorizes the INSTITUTO and gives his express consent to record and use the telephone calls which are made to the service lines for the report of the event, as well as for request of assistance services, as evidence for the administrative and judicial processes in which its use is necessary, both for the insurance procedures and for the attention of requests for compensation and assistance.

The INSURED shall consider the following:

- The INSURED is entitled to free medical choice, so it can choose to receive care at the hospital or clinic of their choice.
- Only expenses incurred in the territory of Costa Rica will be covered.
- The INSURED will assume all the expenses derived from any international bank transfer that must be made.



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- The INSURED must provide bank account number, name and address of the receiving bank, SWIFT code (supplied the receiving bank).

Requirements that must be submitted:

1. For all claims, copy of the INSURED'S passport.
2. In case of reimbursement for medical expenses:
 - a. "Benefit Request" form filled out with the diagnosis and daily evolution, this form will be provided at the INSTITUTO'S offices.
 - b. Electronic invoices for the expenses incurred, duly detailed.
 - c. Prescription for medications, exams and others.
 - d. Authorization ballot signed by the INSURED for examination of clinical records.
 - e. Positive COVID-19 diagnostic test, issued by a private laboratory or the "Caja Costarricense del Seguro Social".
3. In case of reimbursement of expenses for accommodation:
 - a. Positive COVID-19 diagnostic test issued by a private laboratory or the "Caja Costarricense del Seguro Social". (when it is not a suspected case or by nexus).
 - b. Electronic invoice of the accommodations, with the detail of the days and the cost of the accommodation in a standard room.
 - c. Health order issued by the Ministry of Health, when it is a positive case of COVID-19, suspected or by nexus.

N. CLAIM RESOLUTION DEADLINE

The INSTITUTO will provide a response within ten (10) working days, counted from the presentation of the claim containing all the requirements established for each case. The same period of time shall run from the acceptance of the claim to make the corresponding payment.

For inquiries about the processing of the claims presented: **(+506) 4404-1560**.

O. VALIDITY AND RENEWAL

This policy is issued as an individual insurance policy under the modality of self-extendable ("*autoexpedible*"), the validity of the coverage is limited to what is established in the Insurance Offer and is not renewable or extendable.

P. TERMINATION POLICY

This policy will terminate when any of the following occurs:

1. Failure to pay the premium in accordance with article 37 of Law No. 8956.
2. If the INSURED and/or policyholder fails to comply with Law No. 8956.



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3. If the INSURED and/or policyholder is included in any of the economic sanctions lists issued by the Office of Foreign Assets Control (OFAC) of the United States Departments of the Treasury and/or the United Nations.
4. Death of the INSURED.

Q. ADDITIONAL CONDITIONS

1. CURRENCY

All payment related to this policy, which are made between the INSURED and the INSTITUTE, will be made in U.S. dollars, as designated in the Insurance Offer.

For any conversion to be made in relation to the amounts indicated in the insurance, the reference exchange rate for the sale fixed by the Central Bank of Costa Rica shall be applied.

2. APPLICABLE LEGISLATION

The applicable legislation shall be that of the Republic of Costa Rica. In everything that is not provided for in this insurance contract, the stipulations contained in the Insurance Market Regulatory Law No. 8653, the Insurance Contract Regulatory Law No. 8956 and its Regulations, Law No.8204 on narcotic drugs, psychotropic substances, drugs for unauthorized use, related activities, money laundering and financing of terrorism and its amendments and the regulations that complement it, the Commercial Code and the Civil Code will apply.

3. LANGUAGE AND POLICY TERMS

If there are to be discrepancies between the English and Spanish version of this general conditions or in other policy terms, pursuant to Costa Rican legislation, the Spanish version of the policy should prevail.

4. DISPUTE RESOLUTION

In the event of disagreement of the insured and/or policyholder because his/her rights as a consumer are affected or there is a claim regarding the interpretation of the insurance contract, he/she may file a complaint before the instance called Comptroller of Services: 2287-6161 / 800INSContraloria / cservicios@ins-cr.com. This instance shall resolve within ten (10) working days from the filing of the complaint. Once this instance has been exhausted, the complaint may be filed before the General Superintendence of Insurance at sugese@sugese.fi.cr or at the telephone number 2243-5108 of the call center.

The Courts of Justice of the Republic of Costa Rica shall be competent to resolve the discrepancies; or, when so agreed by the parties, they may be resolved through the mechanisms established in the Law on Alternative Dispute Resolution and Promotion of Social Peace, in any of the centers established in the country created for the management and control of this type of processes.



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5. COMMUNICATIONS BETWEEN PARTIES

The INSURED and/or policy holder may at any moment contact the INSTITUTO at the Customer Service Call Center described in these conditions. The INSTITUTO will issue the necessary communications to the email address reported by the INSURED in the Insurance Offer.

Registration at SUGESE number P20-76-A01-898 dated April 23, 2021.