



Sickness Insurance Program for those entering (non-resident) the territory of the Republic of Kazakhstan "Migrant"

Insurance Class:	Voluntary health insurance.	
Policyholder:	An adult individual.	
Beneficiary:	Medical providers of the Insurer's Representative (hereinafter referred to as Assistance) - in case of providing services through Assistance. Insured - in case of self-payment for services determined by the insurance program.	
Insured:	Non-resident individuals (foreign citizens) aged 18 to 65 years.	
Insurance restrictions:	The following are not accepted for insurance: ✓ individuals under 18 years of age and over 65 years of age; ✓ disabled people of any group; ✓ residents of the Republic of Kazakhstan.	
Object of insurance:	Property interests of the Insured/Insured related to the payment of expenses caused by the Insured's application to the Assistance for the provision of medical services in the amount and on the terms specified in the Insurance Policy.	
Insured event:	The Insured Person's application during the term of the Insurance Policy to the Assistance (medical service provider) to receive the services provided for by the selected insurance program.	
Sum insured:	12 months - 60,000 tenge; 3 months - 15,000 tenge.	
Insurance premium and tariff:	12 months - 1,800 tenge; 12 months - 3% of the insured amount; 3 months - 700 tenge. 3 months - 4.666% of the insured amount.	
Procedure and terms of payment of the insurance premium:	By a one-time cash/non-cash payment to the bank account or cash desk of the Insurer on the day of conclusion of the Insurance Policy.	
Franchise:	Not provided	
Insurance payment:	 The insurance indemnity shall be made by the Insurer to the Beneficiary within the insured amount established by the Insurance Policy. The insurance payment cannot exceed the insurance amount established by the Insurance Policy 	
Information about the insurance agent/broker:	The program provides for the issuance of Insurance Policies through the partners of Basel Insurance Company JSC.	
The amount of the agent's fee in % gross:	It is approved by the decision of the authorized body of the Insurer, within the framework of internal policy.	
Validity period of the Insurance Policy:	3 months, 12 months.	
Insurance area:	Kazakhstan.	
Duration of insurance coverage:	24 hours a day.	
Insurance conditions for the 3- month program:	Types of medical care	Coverage limit
	Round-the-clock Call Center Services: Service Consulting	Full coverage
	Medical support: organization of inpatient treatment, control over the quality of medical services for the Insured.	Full coverage
	Inpatient treatment in case of detection of an acute disease, injury as a result of an accident (except for COVID-19 disease): Hospital stay, services of doctors and medical staff, diagnostic tests, medical manipulations, medicines necessary for treatment. Physiotherapy for medical reasons.	Full coverage
Insurance conditions for the 12-month program:	Types of medical care	Limit
	Round-the-clock Call Center Services: Service Consulting	Full coverage
	Medical support: organization of inpatient treatment, control over the quality of medical services for the Insured.	Full coverage
	Outpatient care: Consultations with a therapist Consultations and services of narrow specialists - on the referral of a family doctor; Laboratory instrumental minimum (ECG, X-ray, CT/MRI when prescribed for injuries, laboratory minimum (CBC, OAM, BC blood by the decision and referral of the doctor). Exception: Covid 19 disease	10 000 KZT
	Inpatient treatment in case of detection of an acute disease, injury as a result of an accident (except for COVID-19 disease): Hospital stay, services of doctors and medical staff, diagnostic tests, medical manipulations, medicines necessary for treatment. Physiotherapy for medical reasons.	Full coverage
Form of conclusion of the Insurance Policy:	The insurance policy is issued by issuing it on paper or in electronic form.	