RE: <u>Insurance Coverage of Pregnancy and Childbirth under the Platinum Care Policy</u>

Dear Students, Researchers, Guests and Family Members,

1. Please note that under the Platinum Care policy designed for those insured at the Hebrew University, it is possible to purchase coverage for monitoring pregnancy or coverage of pregnancy and childbirth **only by requesting** an addition to the policy, for an additional premium.

The following are the terms:

  a. You must purchase the coverage for pregnancy/pregnancy and childbirth when you purchase the insurance policy.

  b. Coverage for pregnancy/pregnancy and childbirth will become effective 3 months from the date of purchasing the insurance policy and the additional coverage.

  Please note:<u>*There is a three-month qualification period from the date of issue of the insurance policy.*</u> A qualification period is a period of time beginning at **the date of issue of the insurance policy**, at the end of which (after 3 months), the policyholder will be entitled to insurance benefits in the case of an insurance event. If the insurance event (pregnancy) occurs before the end of the qualification period, **the policyholder will not be entitled to any insurance benefits related to the insurance event** (pregnancy).

  Important: It is not possible to obtain any medical care related to pregnancy/pregnancy and childbirth if you do not purchase the additional coverage <u>at the time of purchasing the insurance policy</u>.

  c. Purchase of one of the above-mentioned additions to the insurance coverage will be at the following insurance costs:

  Coverage of pregnancy: 200 shekels/month

  Coverage of pregnancy and childbirth: 400 shekels/month

2. I have read the explanation provided in this document and I request as follows (please mark your choice with an x)

  ☐   I am interested in purchasing coverage of pregnancy.

  ☐   I am interested in purchasing coverage of pregnancy and childbirth.

  ☐   I am not interested in purchasing either of the above.

_____   _____   _____   _____   _____   _____

Last Name   First Name   Passport No.   Student No.   Signature   Date