

If you are a client of Eurobank Bulgaria AD with an active debit or credit card, we at BULSTRAD VIENNA INSURANCE GROUP are there to help you as your insurer in case of an insured event and we provide the following information in this regard:

RELATIONS IN CASE OF OCCURRENCE OF AN INSURED EVENT

1. In case of an insured event, the CARDHOLDER or their representative is obliged, as soon as possible but within three days, and in case of a theft within 24 hours, to call the 24/7 Call Center of the Assistance company Global Services Bulgaria EAD at the following number:
+359 2 8197 197, or send an email to: assistance@globalservices.bg
and
 - state his/her name, personal ID number, the bank card's number (the first six and the last four digits), the type of card and its validity period;
 - provide an address and telephone number for contact;
 - provide a brief description of the problem and the nature of assistance needed.
2. Regardless of any other condition of the insurance, in the event of a life-threatening situation the Insured or their representative should arrange, in the most appropriate and fast manner, emergency transport to a hospital close to the event location.
3. In case of a bodily injury resulting from an accident which requires hospitalization, the Insured or a person acting on their behalf must notify the Assistance Company within three days after the event. If the above condition is not fulfilled, the Assistance Company shall be entitled to invoice to the Insured any additional costs incurred by the company, which could have been avoided if this requirement had been fulfilled by the Insured.
4. In case the Insured needs medical transport or repatriation, the following should be observed:
 - 4.1. The Insured or a person acting on their behalf needs to inform the Assistance Company as soon as possible of the following:
 - name, address and telephone number of the hospital where the Insured is taken;
 - name, address and telephone number of the attending physician, and, if necessary, of the personal physician of the Insured.
 - 4.2. The medical team or the representatives of the Assistance Company should be provided access to the Insured in order to ascertain his/her health condition.
 - 4.3. In all cases, upon agreement with the attending physician, the Assistance Company shall organize the transportation and determine its date and manner of realization.

CLAIM SUBMISSION AND SETTLEMENT

1. All claims under this insurance shall be submitted by the Insured directly to the Assistance company or to the Insurer, not later than 7 (seven) days from the date of return on the territory of the Republic of Bulgaria, with submission of the relevant original copies of documents evidencing the expenditures.
2. In order to register a claim for the payment of insurance indemnity, it is mandatory to present the following documents:
 - 2.1. Request about an occurred insured event, as per template of the Insurer, with a brief written statement of the circumstances of the event;
 - 2.2. Filled in and signed medical form from the attending physician;
 - 2.3. In case of death: death certificate, certificate of heirs;

- 2.4. Original copies of proof-of-cost documents about the incurred costs, or a written request from the medical establishment for direct payment of the costs.
- 2.5. The documents under it. 2.2 and 2.4 above shall be presented to the Assistance Company or the Insurer, accompanied by a certified translation into Bulgarian by a licensed translator. Translation costs shall be reimbursed by the Insurer.
- 2.6. The Assistance Company or the Insurer is entitled to request other documents for establishing the event.
3. The Insurer shall pay the indemnity within 15 (fifteen) working days after the submission of all necessary documents.
4. The insurance indemnity shall be paid in the official currency of the Republic of Bulgaria, whereas prior to the date of euro adoption, the due indemnity will be calculated using the official fixed exchange rate of the Bulgarian National Bank at the date of incurred expenses, except in cases when the Insurer makes a direct payment to the medical establishment.
5. If the Insured has another insurance covering medical expenses for travel and stay abroad, the liability of the Insurer shall be proportional, in accordance with the ratio between the limits of liability for the two insurances.

PAYMENT OF INSURANCE INDEMNITY

1. For the payment of insurance indemnity, the Insured or his/her legal heirs:
 - have fulfilled the obligations set in the General and the Special Conditions of the insurance contract, with priority given to the Special Conditions;
 - should present a written claim on a template of the Insurer, for payment of insurance indemnity.
2. The total amount of all payments may not exceed the sum insured for the liability of the INSURER specified in the insurance cover certificate, depending on the type of bank card and cover.
3. In case of death of the Insured, the insurance indemnity shall be paid to his/her legal heirs.
4. In case a personal accident has resulted in permanent disablement, the Insured shall be paid a portion of the sum insured which corresponds to the percentage of permanent disablement assessed by the competent authority for medical expertise on work capacity (National/Territorial Medical Expert Commission) or the Insurance Medical Commission (ZEK).
5. The percentage of permanent disablement as a result of a personal accident shall be determined not earlier than 3 (three) months and not later than 12 (twelve) months from the date of the accident, irrespective of whether the medical treatment is completed or not at that time.
6. The Insurer shall not be liable to pay to the Insured insurance indemnity for the loss of the capacity to carry a professional activity as a result of a personal accident or acute sickness.
7. The Insurer shall have the right to conduct a medical assessment about the health status of the Insured in connection with an occurred insured event.

For correspondence: claims_gi@bulstrad.bg, or at the address: Sofia, 1A Hashove St.