




SUMMARY OF HEALTH SERVICES

This table has been provided to offer concise information only. For further details and information on the correct use of services, we recommend consulting the **Health Plan Guide** that is valid for the insurance year 1 October 2022 - 30 September 2023.

PERFORMANCE	LIMITS/QUOTAS CHARGED	IF PRESENT IN COVERAGE	
		THE HOLDER	THE OWNER + FAMILY NUCLEUS
HOSPITALIZATION FOR MAJOR SURGERY (as listed, including transplants)	Network: direct UniSalute payment Out-of-network: only in the absence of affiliated facilities within 15 km from the member's domicile/residence SSN: substitute allowance	Annual ceiling €90.000	Annual ceiling €135.000
HOSPITAL STAY	Network: direct UniSalute payment Out-of-network: only in the absence of affiliated facilities within 15 km from the member's domicile/residence SSN: maximum reimbursement €300/day as an alternative to the substitution allowance for hospitalization		
ACCOMPANIST	Fee for the board and overnight stay for the accompanying person in the nursing home or in a hotel		
PRE/POST EXPENSES	PRE: 50 days before admission; advance payment at affiliated structure reimbursement of up to €1.000 shared with POST POST: 50 days after admission; direct UniSalute payment up to €1.000 shared with PRE		
PRIVATE NURSING CARE DURING HOSPITALIZATION	Refund €60 per day for a maximum of 30 days of hospitalization		
MEDICAL TRANSPORT	Maximum refund €500 per hospitalization		
INFANTS	Annual limit €10.000 per infant		
ISUBSTITUTE ALLOWANCE AND PRE/POST EXPENSES	Daily allowance €150 maximum 90 days Within network: direct UniSalute payment Out-of-network: 100% refund	€1.000 per claim	€1.000 per claim
HIGH SPECIALIZATION (as listed)	Within network: €35 deductible Out-of-network: only in the absence of affiliated facilities within a radius of 15 km from the member's domicile/residence. reimbursement with minimum not indemnifiable €35 per performance/cycle SSN: 100% ticket refund Diagnostic and operative endoscopy: sub-ceiling €500 (if holder) - €750 (if household)	Annual ceiling €7.000	Annual ceiling €10.500
SPECIALIST VISITS	Within network: minimum not indemnifiable €25 per service Out-of-network: only in the absence of affiliated facilities within a radius of 15 km from the member's domicile/residence reimbursement with minimum not indemnifiable €25 per service SSN: 100% ticket refund	Annual ceiling €1.050	Annual ceiling €1.575
TICKET FOR DIAGNOSTIC TESTS AND FIRST AID	SSN: 100% ticket refund	Annual ceiling €500	Annual ceiling €750
PHYSIOTHERAPY AND REHABILITATION TREATMENTS for injury and temporarily disabling pathologies	Within network: minimum not indemnifiable €25 per cycle Out-of-network: only in the absence of affiliated facilities within 15 km from the member's domicile/residence Reimbursement with minimum not indemnifiable €25 per cycle SSN: 100% ticket refund	Annual ceiling €350	Annual ceiling €525
ORTHOPEDIC AND ACOUSTIC PROSTHESIS	Out-of-network: overdraft 20%, minimum not indemnifiable €100	Annual ceiling €500	Annual ceiling €750



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 PERFORMANCE	LIMITS/QUOTAS CHARGED	IF PRESENT IN COVERAGE	
		THE HOLDER	THE OWNER + FAMILY NUCLEUS
GLASSES	Out-of-network: minimum not indemnifiable €50 per performance	Annual ceiling €155	Annual ceiling €230
SERIOUS INCAPACITY CAUSED BY PERMANENT DISABILITY DUE TO AN ACCIDENT AT WORK OR SERIOUS ILLNESS	Network: 100% UniSalute direct payment Out-of-Network: 100% reimbursement PAI benefit (care plan for the non-self-sufficient)	Annual ceiling €7.000	-
HEALTH MONITORING BENEFIT	Telemonitoring benefit for chronic diseases: diabetes, hypertension and chronic obstructive pulmonary disease	Additional annual ceiling for examinations and investigations €300	-
SPECIAL DIAGNOSTIC SERVICES	Within network: direct UniSalute payment Cardiovascular prevention maximum authorized expenditure €210 per year Prevention of genital oncological diseases maximum authorized expenditure €170/year Prevention of prostatic oncological diseases maximum expenditure €170/year Out-of-network: only in the absence of affiliated facilities within 15 km from the member's home	Once a year	
MOTHERHOOD PREGNANCY	Within network: direct UniSalute payment Out-of-network: only in the absence of affiliated facilities within 15 km from the member's domicile/residence SSN: 100% ticket refund	Maximum 2 ultrasound scans	
REDUCED RATES	Discounts at affiliated facilities	-	
SPECIAL DENTAL SERVICES	Within network: 25% uncovered Out-of-network: refund of up to €35 per invoice	Ablation of tartar with possible check-up once a year per person	
IMPLANTOLOGY: APPLICATION OF 3 OR MORE IMPLANTS	Within network: direct UniSalute payment Out-of-network: refund of up to €2.400 SSN: 100% ticket refund	Annual ceiling €2.800	
IMPLANTOLOGY: APPLICATION OF 2 OR MORE IMPLANTS	Within network: direct UniSalute payment Out-of-network: refund of up to €1.400 SSN: 100% ticket refund	Annual sub-ceiling €1.750	
IMPLANTOLOGY: APPLICATION OF 1 IMPLANT	Within network: direct UniSalute payment Out-of-network: refund of up to €730 SSN: 100% ticket refund	Annual sub-ceiling €910	
ORTHODONTICS	Within network: 25% uncovered Out-of-network: 50% uncovered per invoice with reimbursement of up to €960 per year SSN: 100% ticket refund	Annual ceiling per household €2.000	
SURGICAL DENTAL INTERVENTIONS for special pathologies	Within network: direct UniSalute payment Out-of-network: with reimbursement of up to €1.600/year SSN: 100% ticket refund	Annual ceiling per household €3.000	
CONSERVATIVE DENTAL TREATMENTS	Within network: 25% uncovered Out-of-network: 40% uncovered per invoice with reimbursement of up to €160/year SSN: 100% ticket refund	Annual ceiling per household €200	
AVULSION	Within network: direct UniSalute payment Out-of-network only if the avulsion is linked to implantology services, with reimbursement of up to €100 per avulsion calculated in the maximum provided for implantology	Up to 4 teeth	
MOBILE PROSTHESIS DENTAL	Within network: 25% uncovered per invoice Out-of-network: 40% uncovered per invoice with reimbursement of up to €400 SSN: 100% ticket refund	Annual ceiling per household €500	




SUMMARY OF INSURANCE COVERAGE FOR ACCIDENTS

The following outline constitutes a summary reference tool for the **guarantees provided following an accident**. For details and the correct use of benefits, we recommend consulting the **Accident Guarantee Guide**.

 BENEFITS	LIMITS/DISCOVERY/DEDUCTIBLES	MAXIMUM	VALID FOR
REIMBURSEMENT OF MEDICAL EXPENSES FROM OCCUPATIONAL AND NON-OCCUPATIONAL ACCIDENTS	Reimbursement Benefit	€ 1.000	The holder
	Excess €30 SSN: co-pay reimbursement 100%		
LUMP-SUM COMPENSATION FOLLOWING AN OCCUPATIONAL ACCIDENT WITH HOSPITALISATION BETWEEN 16 AND 29 DAYS	Compensation Benefit	€ 1.500	
LUMP-SUM COMPENSATION FOLLOWING AN OCCUPATIONAL ACCIDENT WITH HOSPITALISATION LASTING MORE THAN 30 DAYS	Compensation Benefit	€ 2.000	
LUMP-SUM COMPENSATION FOR PERMANENT DISABILITY RESULTING FROM AN OCCUPATIONAL ACCIDENT > 50%.	Compensation Benefit	€ 5.000	
	In the event that the Insurant has already benefited from the compensation referred to in the previous points regarding hospitalisation, under no circumstances shall the Company pay an amount greater than a total of €5.000 per claim		
REIMBURSEMENT OF TREATMENT EXPENSES FOR PROFESSIONAL INJURY WITH NEUROMOTOR REHABILITATION (at a Scientific Hospitalisation and Treatment Institute and Hospital of national importance and high specialisation for neuromotor rehabilitation pursuant to Law no. 833/78 art. 42 and subsequent modifications and integrations - see attention point 4 of the operating instructions for reporting an accident).	Reimbursement Benefit		
	DURATION > 60 days < 181 days	€ 5.000	
	DURATION > 180 days < 361 days	€ 10.000	
	DURATION > 360 days	€ 20.000	
	WITH SEVERE HEAD TRAUMA AND/OR SPINAL CORD INJURY	€ 60.500	
BOARD AND LODGING ALLOWANCE COMPANION FOR REHABILITATION	Indemnity Benefit		
	OUTSIDE THE PROVINCE OF RESIDENCE	Up to €4.500	
	€50 Max. 90 days	Up to €6.750	
REIMBURSEMENT OF AMBULANCE TRANSPORT COSTS FOR REHABILITATION	Reimbursement Benefit		
	OUTSIDE THE PROVINCE OF RESIDENCE	€ 600	
	OUTSIDE THE REGION OF RESIDENCE	€ 1.200	
REIMBURSEMENT OF DENTAL EXPENSES FOLLOWING PROFESSIONAL ACCIDENT	Reimbursement Benefit	€ 2.000	
LUMP SUM DEATH BENEFIT FOR OCCUPATIONAL ACCIDENT	THE SUM IS DOUBLED IF THERE ARE CHILDREN WITH DISABILITIES AND/OR AGED <14 YEARS AT THE TIME OF THE CLAIM	€ 10.000	
FUNERAL ALLOWANCE IN THE EVENT OF DEATH FROM AN OCCUPATIONAL ACCIDENT		€ 1.500	
REIMBURSEMENT OF MEDICAL EXPENSES FOLLOWING AN OCCUPATIONAL DISEASE INCLUDED IN THE LIST IN THE ACCIDENT NOMENCLATURE	Reimbursement Benefit		
	expenses incurred, in the 180 days before and 360 days after recognition of the professional illness, involving a degree of Permanent Disablement equal to or > 55%, for medical benefits indicated in the accident nomenclature, €50 deductible for medical and specialist visits (SSN: 100% reimbursement of co-payments).	€ 1.000	
FUNERAL ALLOWANCE IN THE EVENT OF DEATH FROM OCCUPATIONAL DISEASE	In the event of death as a result of one or more of the pathologies listed in the accident nomenclature.	€ 1.500	



This table only constitutes a brief summary of the main services offered: it is purely informative and not exhaustive. All benefits and reimbursement conditions are reported in the **Health Plan** which, together with the **Statute** and **Regulations** of the **Sanedil Fund**, are the only documents that prevail.

 PERFORMANCE		LIMITS/OVERDRAFTS/DEDUCTIBLES	CEILINGS	VALID FOR
PHYSIOTHERAPY REHABILITATION TREATMENTS		The annual ceiling refers to expenditure documents issued from 1 October 2022 to 30 September 2023, and can be reached by adding requests/no deductible.	€500	Owner
SPECIALIST VISITS		The annual ceiling refers to expenditure documents issued from 1 October 2022 to 30 September 2023 and can be reached within the limits of two total visits/no deductible. Benefit recognized only in the event of non-use of the guarantees provided by the Fund's health plans during the period 1 October 2020 - 30 September 2022.	€200	Owner + fiscally dependent family unit
SPECTACLE FRAMES		The annual ceiling refers to expenditure documents issued from 1 October 2022 to 30 September 2023 and can be reached by adding requests/no deductible.	€150	Owner + family unit
ASSISTIVE PRODUCTS AND PRINCIPALS SANITARY	Crutches, walking sticks, tripods, quadripods, and other Walkers	The annual ceiling refers to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment can be made within the limits of the annual sub-ceiling of €30.	€315	Owner + family unit (Spouse and minor children)
	Wheelchair	The annual ceiling and sub-ceiling refer to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €120.		
	Orthopedic orthotics	The annual ceiling and sub-ceiling refer to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €120.		
	Orthopedic brace	The annual ceiling and sub-ceiling refer to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €80.		
	Orthopedic corset	The annual ceiling and sub-ceiling refer to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €50.		
	Orthopedic braces/orthoses	The annual ceiling and sub-ceiling refer to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €65.		
	Abdominal container	The annual ceiling refers to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €35.		
	Orthopedic footwear	The annual ceiling and sub-ceiling refer to expenditure documents issued from 1 October 2022 to 30 September 2023/no deductible. Repayment may be made within the limits of the annual sub-ceiling of €100.		