

The insured (被保険者用)

## **Medical Insurance “Medi Life” - Important Agreement** (重要事項に関する同意書)

Please make sure to examine the main important notice and only if you agree it, please put your signature in sign blank hereafter. (下記重要事項をお確かめの上、同意される場合は、署名欄にご署名下さい。)

1. When you use this insurance, you never fail to call for WellBe alarm center in advance and reserve the hospital through WellBe. (当保険をご利用の際は、必ず事前にウェルビーアラームセンターに電話をし、ウェルビーを通じて病院の予約を行ってください。) **WellBe alarm center : 024.3682.4280**
2. This insurance will be applied cashless only when receiving treatment at WellBe designated hospital. If you visit a medical institution not covered by insurance, it will not be covered by insurance. (当保険は Medi Life 利用病院で治療を受ける場合のみキャッシュレス適用となります。保険対象外の医療機関で受診した場合は、保険適用外となります。Medi Life 利用病院は病院一覧をご参照ください。)
3. When we discover injustice and injustice in failure in insurance claim, the insurance company notice that fact to the insured company and at the same time have right to decline the renewal and / or terminate it immediately. (この保険の利用に際し、不正な保険利用行為や行為未遂が発見された場合、保険会社はその旨を勤務先に通知するとともに、次回更新の拒否あるいは保険契約の即時解約を行う権利を有します。)
4. When Insurance company judge that your treatment fee in the in-patient exceed USD 10,000 per 1 accident/sickness, and you have Japanese healthcare insurance and/ or Overseas travel insurance attached with Credit Card, you apply to its insurance to recover your treatment fee before you claim for this insurance, then remaining fee is recovered by this insurance. (1 事故/疾病あたりの治療費が USD10,000 を越えると保険会社が判断した場合で、かつ日本の健康保険、クレジットカード付帯海外旅行保険を有する場合、それらの保険から先に治療費分を請求し、残りをこの保険に求償します。)
5. We operate this insurance program as healthy for our all customers. So if your insurance performance result is beyond our rule except for serious sickness, we have possibility to degrade your condition from next renewal. (全てのお客様さまのためにこの保険プログラムの健全な発展を目指します。そのため、もし当社が定める一定以上の過度な利用(重大ケースを除く)の場合に限り、次回更新時に条件付きの引受けとさせていただく場合がございます。)
6. In case that the insured cancels this policy, UIC shall refund the premium calculated by day prorated basis by expiry date. However in case the insured has used this insurance during the contrast period, UIC shall NOT refund anything. (保険金支払い後、契約下での解約に伴う保険料返戻はございません。)
7. In the case of insurance immunity, the medical expenses and other miscellaneous expenses shall be borne by the insured person. (保険免責の場合、掛かった治療費・その他費用については被保険者本人が支払いの義務を負います。)
8. If you exceed the compensation limit of each indemnity item and you receive an exemption notice / invoice from an insurance company or WellBe, you will be required to pay the fee within two weeks. (各補償項目の補償限度額を超過し、保険会社または WellBe より免責通知書・請求書を受領した場合、2 週間以内に費用をお支払いいただきます。)

The insured shall agree with above 08 articles ; (上記 8 項目に同意します。)

Signed Date (署名日)                      /                      /

Sign 署名欄