TRAVEL INSURANCE POLICY

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(To download this policy in Word format, click here)
For any comments, feedback, or query, please contact: policies@aub.edu.lb.
Last updated on: May 24, 2010
**Travel Insurance**

Travel insurance covers up to $150,000 per person for emergency medical care only. To obtain coverage under the Travel Insurance Policy, employees, faculty, and medical staff members of the American University of Beirut must submit a request to the Department of Environmental Health, Safety, and Risk Management (EHSRM). Accompanying family members will also be covered at no extra charge in case of Home and Periodic Paid Research Leaves.

**Geographical scope:** worldwide.

**Remarks**

1. The renewal of the Travel Insurance Policy is subject to periodic review by the University in light of the insurance conditions at the time.

2. For the purpose of insurance, the term "employee" means any and all employees, whether academic or non-academic, as recognized by the University.

3. In order to obtain the Travel Insurance coverage in due time, the employee is required to complete a Leave Request Form, secure the approval of the respective dean, the vice president, or president, and remit forthwith a copy of the said form to EHSRM, including AUB ID number and date of birth. Failing to do so, no insurance coverage will be available.

4. For more information about the HIP coverage, please call the Human Resources Department, Benefits Office, at extensions 2300/2330. For more information about travel insurance, please call the EHSRM Office at extension 2360.

5. Because of the limited coverage currently offered by AUB’s medical insurance plans (HIP and the Insurance Travel Policy), employees may want to purchase additional medical insurance for themselves and/or their family when traveling outside Lebanon. Although AUB cannot endorse any particular insurance, including the travel insurance package, the Benefits Office and EHSRM can provide the contact numbers for such insurers.
# Appendix I

**Frequently Asked Questions About Medical Insurance While Traveling**

<table>
<thead>
<tr>
<th></th>
<th>Does HIP Cover Me When I Am Traveling?</th>
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<tbody>
<tr>
<td>1</td>
<td>HIP provides coverage for emergency medical care when on approved leaves of:</td>
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<tr>
<td></td>
<td>- Official university business leave or special leave with pay.</td>
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<td></td>
<td>- Annual leave or vacation.</td>
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<td></td>
<td>- Research leave with pay and home leave.</td>
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<td></td>
<td>- Leave without pay.</td>
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<tr>
<th></th>
<th>Am I Covered by Any Other Medical Insurance When I Am Traveling?</th>
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<tr>
<td>2</td>
<td>Yes, up to certain limits described in the Travel Insurance Policy.</td>
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<tr>
<th></th>
<th>Am I Insured If It Is Not Official University Business Travel?</th>
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<tbody>
<tr>
<td>3</td>
<td>Yes, you are insured under the HIP regulations for emergency care.</td>
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<thead>
<tr>
<th></th>
<th>How Is “Official University Business” Defined?</th>
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<tbody>
<tr>
<td>4</td>
<td>Official university business is attendance at conferences, other university meetings, or in connection with university business. Travel on official university business must be approved by the University by filling the Request and Authorization for Official University Travel (RAOUT) form No. 10.70.1 (<a href="#">RAOUT - Revised</a>) and the Leave Request and Approval form No. 14.2 (<a href="#">LRA - Revised</a>) and submitting them at least three weeks prior to the date of departure to the Human Resources Department who will forward the LRA to the Office of EHSRM prior to the travel date. Failure to accomplish this formality may result in denying the travel to be considered as official university business.</td>
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<tr>
<th></th>
<th>How Do I Get Insured While Traveling?</th>
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<tbody>
<tr>
<td>5</td>
<td>Once the RAOUT and LRA forms are submitted and approved by the supervisor and you inform EHSRM about your leave as mentioned above, EHSRM will issue the travel insurance.</td>
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<thead>
<tr>
<th></th>
<th>Am I Covered During a Weekend Trip Abroad When No Forms for Approved Leave Are Filled?</th>
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<tbody>
<tr>
<td>6</td>
<td>Yes, you are covered by HIP only</td>
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<table>
<thead>
<tr>
<th></th>
<th>What is Travel Insurance?</th>
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<tr>
<td>7</td>
<td>Travel insurance is an insurance that covers emergency medical care outside Lebanon. The amount of coverage is up to $150,000 per person (explanation: a deductible of $60 is paid by the University).</td>
</tr>
<tr>
<td></td>
<td>How Should I Report a Claim?</td>
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</tr>
<tr>
<td></td>
<td>To report and facilitate your hospitalization, you should contact the Call Center, phone number 00 962 65 00 81 19, fax number 00 962 65 67 88 66.</td>
</tr>
<tr>
<td></td>
<td>How Does the University Purchase Travel Insurance for Me?</td>
</tr>
<tr>
<td></td>
<td>The traveler has to provide the approved Leave Request and Approval (LRA) form, AUB ID number, and date of birth and send them to EHSRM before the planned travel date. Please note that this insurance does not cover medical care resulting from pre-existing conditions or illnesses. This insurance covers emergency medical care only.</td>
</tr>
<tr>
<td></td>
<td>Does the Travel Insurance Settle Directly With Treating Organizations?</td>
</tr>
<tr>
<td></td>
<td>Emergency medical expenses include sickness or accidents, i.e., sudden, serious, unpredictable/unexpected illnesses or accidents which treatment cannot be delayed such as a child has very high fever or serious accident. However, travel insurance does not cover regular check-ups or pre-existing conditions such as tension, diabetes, heart disease, etc.</td>
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<tr>
<td></td>
<td>The American University of Beirut has selected Bankers Assurance SAL to provide travel insurance coverage outside Lebanon, to better meet the emergency medical needs of the faculty and staff when on university business leave, Home Leave, or Periodic Paid Research Leave, excluding any other travel trips that are destined for any other purpose than those stated above. Also, please note that accompanying family members will also be covered in case of Home and Periodic Paid Research leaves. The coverage shall be provided at no extra charge to the employee, faculty, or medical staff member of the American University of Beirut.</td>
</tr>
<tr>
<td></td>
<td>The travel insurance covers emergency medical expenses abroad up to $150,000 per person per period of coverage, including other benefits detailed in the general conditions. This cover is subject to the terms, conditions, limitations, and exclusions stated in the General Conditions available at the following link: Travel Insurance Coverage.</td>
</tr>
<tr>
<td></td>
<td>Any person requiring travel insurance shall contact the Environmental Health, Safety, and Risk Management (EHSRM) Department, either by phone at extension 2360 or by email to: <a href="mailto:ehsc@aub.edu.lb">ehsc@aub.edu.lb</a>, and shall provide a copy of the approved Leave Request, date of birth, ID number, and send all these requirements to EHS&amp;RM before the planned travel date.</td>
</tr>
<tr>
<td></td>
<td>Emergency medical expenses include sickness or accidents, i.e., sudden, serious, unpredictable/unexpected illnesses or accidents for which treatment cannot be delayed such as a very high fever or serious accident. However, travel insurance does not cover regular check-ups or pre-existing conditions such as hypertension, diabetes, heart disease, etc.</td>
</tr>
<tr>
<td></td>
<td>In case of a claim, it is mandatory to call Arab Assist at phone: 00 962 65 00 81 19 or fax: 00962 65 67 88 66 for proper assistance.</td>
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</table>
If your travel was cancelled, or if it will exceed 90 consecutive days period abroad, or in case of any change in the information provided at the time the insurance was granted, you are kindly requested to inform EHS&RM immediately. If more than a 90-consecutive-days stay is planned, please provide a health declaration and the cause of the extended period, as this extension is subject to prior approval of the reinsurer.

Failure to abide by the above shall prevent you from benefiting from travel insurance, and no claims shall be reimbursed whatsoever.

Please do not hesitate to contact EHS&RM at extension 2360 or by email to: ehsc@aub.edu.lb if you need more information.

### 11. Can My Family Benefit From Travel Insurance?

The travel insurance coverage for dependents is provided by the University for Home Leaves and Periodic Paid Research Leaves. The travel insurance coverage can be purchased at the employee’s expense in all other circumstances.

If the family is traveling together, it is sufficient to fill out and submit one application form for all those traveling. However, if the members are traveling at different times, you need to inform EHSRM.

Please note that any person can buy travel insurance or similar insurance on their own from local insurance firms at their own expense.
APPENDIX II

MEDICAL AND TRAVEL ASSISTANCE PACKAGE

SCHEDULE OF COVERS AND ECONOMIC LIMITS

- Insured Person: The policyholder.
- Policyholder: Who is a personnel of AUB / AUH.
- Family members: Insured person, spouse, and unlimited dependent children.
- (*) Period: up to a maximum of 90 consecutive days abroad per trip.
- (*) Annual cover: trips not exceeding 90 consecutive days.
- For any extension after 90 days stay, USD 2 per day will be charged subject to MAPFRE ASISTENCIA prior approval and the health declaration.

<table>
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<tr>
<th>GEOGRAPHICAL COVERAGE</th>
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<td>WORLDWIDE I</td>
<td>Provides worldwide cover except the country of residence.</td>
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<td><strong>Worldwide</strong></td>
<td><strong>I</strong></td>
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<td><strong>A. Medical &amp; Emergency Assistance</strong></td>
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<td>Transport or repatriation in case of illness or accident</td>
<td>Actual Expenses</td>
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<tr>
<td>Hospitalization Emergency Medical Expenses</td>
<td>150,000</td>
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<tr>
<td><strong>Emergency dental care</strong></td>
<td>600</td>
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<td><strong>Repatriation of Mortal Remains</strong></td>
<td>Actual Expenses</td>
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<tr>
<td><strong>Repatriation of family member travelling with the insured</strong></td>
<td>Actual Expenses</td>
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<tr>
<td><strong>Emergency Return Home Following Death Of Close Family Member</strong></td>
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<td><strong>Travel Of One Immediate Family Member</strong></td>
<td>100/-day Max 1000/-</td>
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<td><strong>Escort of Dependent Child</strong></td>
<td>Actual Expenses</td>
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<td><strong>B. Personal Assistance Services</strong></td>
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<td><strong>Delivery of Medicines</strong></td>
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<td><strong>International Assistance</strong></td>
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<td><strong>Advance of Bail Bond</strong></td>
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<td><strong>Loss of Credit Card</strong></td>
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<td><strong>C. Losses &amp; Delays</strong></td>
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<td><strong>Compensation for in-flight loss of checked-in baggage</strong></td>
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<td><strong>Location and forwarding of personal effects</strong></td>
<td>Actual Expenses</td>
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<tr>
<td><strong>Delayed Departure</strong></td>
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</tr>
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<td><strong>D. Cancellations</strong></td>
<td></td>
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<tr>
<td><strong>Trip Cancellation</strong></td>
<td>1,000</td>
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MAPFRE ASISTENCIA AND LOCAL INSURER TRAVEL HEALTH & ASSISTANCE PLAN

DEFINITIONS

"Insured Person" means:

The Policyholder whose name and address are given in the Policy who is AUB/AUH personnel. Maximum age of insured: 80 years old.

"Immediate Family Member" means:

The spouse or fiancé, children (aged 18 or less) or parents accompanying permanently or residing with the Insured Person.

"The Company" means:

LOCAL INSURANCE COMPANY With their Head Office at;

"Usual Country of Residence" means:

The home or residence of the Insured in the Usual Country of Residence, in this case, Lebanon.

"Illness" means:

Any change in health diagnosed and confirmed by a legally recognised doctor during the life of the policy and which is not comprised in either of the following two groups:

- Congenital disease: that exists at the moment of birth as a consequence of hereditary factors or complaints acquired during pregnancy.

- Pre-existing disease: that the Insured suffered prior to the date of taking out this Policy.

"Serious Illness" means:

Any change in health that requires admission to hospital and which, in the opinion of the Company’s medical team, and prevents the Insured from continuing travel on the date planned, or which involves the risk of death.

"Injury" means:

A medical problem caused by a sudden and severe external cause/reason beyond the control of the Insured, within the validity period of this Policy.

"Serious Injury" means:

An injury which, in the opinion of the Company’s medical team, and prevents the Insured from continuing travel on the date planned, or which involves the risk of death.

“Cover” means:

The Company will immediately provide the Insured, the assistance specified under the “Coverage” clause of this Insurance Policy for mishaps that occur due to unforeseen incidents during travels outside his/her Usual Country of Residence, provided that this occurrence does not take place outside the specified geographical boundaries and does not take place out of the prescribed travel duration between the validity dates of this Policy. The scope of this Policy becomes void when the travel...
causing the acquisition of this Policy ends and/or the Insured arrives at his/her Usual Country of Residence, whichever takes place first. Period of Cover granted under this Policy shall not exceed 90 consecutive days each travel.

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TRAVEL ASSISTANCE SERVICES

The Company will provide the following Benefits only when the Insured is traveling outside the Usual Country of Residence for up to a maximum of 90 consecutive days.

SECTION A: MEDICAL & EMERGENCY ASSISTANCE

1. Medical Expenses and hospitalization abroad

In the event of illness or injury of the insured occurring outside the Usual Country of Residence, The Company will meet the usual, customary, necessary and reasonable costs of hospitalization, surgery, medical fees and pharmaceutical products, prescribed by the attending doctor.

The Company's medical team will maintain the telephone contacts necessary with the centre and with the doctors attending to the Insured to supervise the provision of proper health care.

This cover is subject to a limit provided by the referred plan. USD 60 excess is applicable per claim, only for out-patient.

2. Emergency dental care

If and when found necessary, the Company will provide the Insured party with the dental assistance required abroad. However, this coverage is restricted to the treatment of pain, infection and removal of the tooth/teeth affected.

This cover is subject to a limit provided by the referred plan. USD 60 excess is applicable per claim.

3. Repatriation of Mortal Remains

In the event of the death of the Insured, the Company will make the arrangements necessary for his/her transport or repatriation and will meet the cost of the transfer expenses to the place of interment, cremation or funeral ceremony at his/her usual country of residence.

This cover is subject to a limit provided by the referred plan.

Payment of expenses for interment, cremation or funeral ceremony is excluded from this guarantee.

4. Repatriation of family member travelling with the insured

Should the Insured be hospitalized due to sudden illness or accident for more than ten days or deceased, the Company will meet the cost in respect of one immediate family member accompanying the Insured at the moment of the event, having the same country of residence as the Insured, provided this immediate family member is unable to travel by his/her own means of transport or the means of transport used for the initial trip.
This cover is subject to a limit provided by the referred plan.

5. Emergency Return Home Following Death Of Close Family Member

When an Insured's trip/journey is interrupted by the death of a close family member (up to second grade), the Company will meet the cost of travel to the usual country of residence, whenever he/she is unable to travel by his/her own means of transport or the means of transport hired for the trip. However, the Insured shall be required to furnish the evidence, documents or certificates of the event, interrupting the journey (death certificate).

This cover is subject to a limit provided by the referred plan.

6. Travel Of One Immediate Family Member

In the event that the Insured should be admitted to hospital for more than ten days as a result of an accident or illness covered in the policy, the Company will take charge of the transfer of a immediate family member from the usual country of residence of the Insured, at the latter’s choice, including meeting the cost of the outbound and return journey to the place of hospitalisation and the accommodation expenses there, up to a limit provided by the referred plan.

7. Transport or repatriation in case of illness or accident

In the event of an accident or sudden illness, the Company will take charge of transferring or repatriating the Insured to a properly equipped health centre or to his/her usual country of residence.

The Company, through its medical team, will decide which health centre the Insured is transferred to or whether repatriation is necessary, depending on the situation or gravity of the state the latter is in.

Afterwards, the Company’s medical team will maintain the telephone contacts necessary with the medical centre and with the doctors attending to the Insured, and on the basis thereof will decide whether to transfer or repatriate the Insured, and on the most suitable means of transport to use.

For minor or less serious illnesses or accidents, which in the opinion of the medical team do not require repatriation, transfer will be performed in ambulance or another means of transport, to the place where adequate medical assistance can be provided.

This cover is subject to a limit provided by the referred plan.

8. Escort of dependant children

In the event of a dependent child aged less than 17 years old being left unattended further to an insured accident or illness, the Assistance Company will arrange and pay for one way airplane economy transportation or 1st Class Rail ticket for them to their place of residence.

Qualified attendant will be provided without charge, if required.

SECTION B: PERSONAL ASSISTANCE SERVICES

1. Delivery of Medicines

The Insurer will cover the expenses of sending medicines, in case of emergency, which are prescribed by the Doctor of the beneficiary, even if this prescription is previous to the trip, and are not available at the place where she/he is staying.

This cover is subject to a limit provided by the referred plan.
2. **International Assistance**

The company will provide a full range of 24 hours emergency services 365 days of the year. The worldwide based call centers will assist in solving any health and travel related inconveniences which may occur during your trip as long as covered by the product.

This international network is continually monitored by a wide team of MAPFRE ASISTENCIA technicians who also carry out continual recruitment, training and retaining tasks.

3. **Advance of Bail Bond**

The company will advance funds for any legal bond required on behalf of an Insured up to the amount provided by the referred plan.

However, the Insured will be required to repay such sum as may have been advanced within 45 days. The Assistance Company will require valid credit authorisation prior to any such fund advance.

This cover is subject to a limit provided by the referred plan.

4. **Loss of credit card**

If during a trip abroad, the Insured were deprived of cash due to loss of credit card, the Company will advance funds on behalf of an Insured.

The Insured will be required to repay any sum advanced in within 45 days. The assistance company will require valid counter guarantee or deposit prior to any fund advance related to such fund advance.

This cover is subject to a limit provided by the referred plan.

**SECTION C: LOSSES & DELAYS**

1. **Compensation for in-flight loss of checked-in baggage**

The Company will supplement the compensation for which the carrier is liable up to a limit provided by the referred plan, as a sum of both compensation payments, for the collection of baggage and possessions checked in by each Insured, in the event of loss during the carriage by air performed by the carrier company, for the purpose of which the Insured shall furnish a list of the contents including the estimated price and date of purchase of each item, as well as the settlement of the compensation payment by the carrier.

Compensation payment for loss will be calculated according to the procedures recommended by international carriage by air organisations.

The minimum period of time that must elapse for the baggage to be considered to have been lost once and for all will be that stipulated by the carrier company but shall not be less than 21 days.

This cover is subject to a limit provided by the referred plan.

2. **Location and forwarding of personal effects**

The Company will furnish the Insured with advice on reporting the robbery or loss of his/her baggage and personal possessions, and will collaborate in arrangements for locating them. In the event that the aforesaid possessions should be recovered, the Company will take charge of forwarding them to the place of the trip planned by the Insured or to his/her usual country of residence. **In this event, the**
Insured is under an obligation to return the compensation received for the loss in accordance with this Policy.

3. **Delayed Departure**

When the departure of the means of public transport contracted by the Insured for travelling is delayed by at least eight hours, the Company, subject to presentation of the corresponding original invoices, shall reimburse any additional expenses incurred (transport and hotel accommodation, as well as meals) as a result of the said delay, with the following limits in accordance with Figure.

- **Plan PLATINUM: Worldwide I**
  - Up to USD 250, for delays in excess of eight but less than twelve hours,
  - Up to USD 500, for delays in excess of twelve but less than eighteen hours,
  - Up to USD 750, for delays in excess of eighteen but less than twenty four hours,
  - Up to USD 1000, for delays in excess of twenty-four hours.

The maximum limit for all concepts under this cover is USD 1000.

CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION C

1. The Insured Person must obtain written confirmation from the carriers or their agents of the actual date and time of departure and the reasons for delay before a claim is considered under this Section of the Policy.

2. Claims under this Section shall be calculated from the actual time of departure of the conveyance on which the Insured was booked to travel, as specified in the booking confirmation.

SECTION D: CANCELLATIONS

1. **Trip Cancellation**

Insurers shall indemnify the Insured Person in respect of all irrecoverable deposits, advance payments and other charges paid or due to be paid for travel and/or accommodation in the event of the Insured Person's Covered Trip being necessarily cancelled or curtailed due to:

i) the death, accidental bodily injury or illness of the Insured Person or the death, accidental bodily injury or illness of the Insured Person's immediate relative;

ii) the death, accidental bodily injury or illness of any person with whom the Insured Person had arranged to travel, reside or conduct business, or of the immediate relative;

iii) the Insured Person or any person with whom the Insured, Person had arranged to travel, reside or conduct business being:

   a) quarantined or called for witness or jury service;
   b) made redundant provided that such redundancy qualifies for payment under the applicable Usual country of residence legislation;
   c) called for emergency duty as a member of the armed forces, the defence of civil administration, the police force or the fire, rescue, public utility or medical services;
d) required to be present at his home or place of business in the Usual country of residence following burglary or major damage;

iv) the cancellation of scheduled or chartered transport services (including connecting publicly licensed transportation) caused by accident, strike, industrial action, hi jack, terrorist act, criminal act, bomb scare, riot, civil commotion, fire, flood, earthquake, landslide, avalanche, adverse weather conditions or mechanical breakdown, provided that the event giving rise to such cancellation occurs, or is only announced, after the Covered Trip is booked or this Insurance is effected, whichever the later;

v) Major damage rendering uninhabitable the accommodation in which the Insured Person had previously booked to reside during a Covered Trip.

The Insured shall furnish the evidence, documents or certificates of the event, which caused the journey to be cancelled.

This cover is subject to a limit provided by the referred plan.

CONDITIONS AND LIMITATIONS APPLICABLE TO SECTION D

Insurers shall not be liable for claims resulting from:

a) Childbirth, pregnancy or any medical complications resulting there from within 2 months of the estimated date of delivery;

b) any condition or set of circumstances known to an Insured Person at the time the Trip was booked or this Insurance was effected whichever is the latter, where such condition or set of circumstances could reasonably have been expected to give rise to the cancellation or curtailment of the Insured Person's Covered Trip;

c) Lack or reasonable care taken over means of travel, route or departure time.

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LIABILITY CONDITIONS

1) In the event of any claim the liability of the Company shall be conditional on the insured claiming indemnity or benefit having complied with and continuing to comply with the terms of this Policy.

2) In the event of a claim under this Policy the Insured shall:

   a) Take all reasonable precautions to minimize the loss.

   b) As soon as possible telephone the Company to notify the claim stating the Benefits required.

   c) Freely provide the Company with all relevant information.

   d) Make no admission of liability or offer promise or payment of any kind.

3) MAPFRE ASISTENCIA will not reimburse or consider reimbursing any expenses which were not previously approved. Previously approved expenses will have to include the claim number obtained from MAPFRE ASISTENCIA prior to sending the official receipts and/or letter explaining the reason and circumstances of why the Travel Assistance Services for which expenses are claimed were not obtained from MAPFRE ASISTENCIA directly.
GENERAL EXCLUSIONS

1. Loss, damage, illness and/or injury directly or indirectly caused by, arising out of and/or in consequence of the following are excluded from the guarantee/cover granted under this Policy:

   a) The bad faith of the Insured, by his/her participation in criminal acts, or as a result of his/her fraudulent, seriously negligent or reckless actions including those actions of the Insured in a state of derangement or under psychiatric treatment costs for which are themselves excluded;

   b) Extraordinary natural phenomena such as floods, earthquakes, landslides, volcanic eruptions, atypical cyclonic storms, falling objects from space and aerolites, and in general any extraordinary atmospheric, meteorological, seismic or geological phenomenon;

   c) Events arising from terrorism, mutiny or crowd disturbances;

   d) Events or actions of the Armed Forces or Security Forces in peacetime;

   e) Wars, with or without prior declaration, and any conflicts or international interventions using force or duress;

   f) Those caused by or resulting from radioactive materials and nuclear energy;

   g) Those caused when the Insured takes part in bets, challenges or brawls, save in the case of legitimate defence or necessity;

   h) Illness or injuries existing prior to the claim, unless expressly included in the Private or Special Conditions and subject to payment of the relevant surcharge premium;

   i) Those that occur as a result of the participation by the Insured in competitions, sports, and preparatory or training tests;

   j) Engaging in the following sports: motor racing or motorcycle racing in any of its modes, big game hunting outside European territory, underwater diving using artificial lung, navigation in international waters in craft not intended for the public transport of passengers, horse riding, climbing, pot holing, boxing, wrestling in any of its modes, martial arts, parachuting, hot air ballooning, free falling, gliding and, in general, any sport or recreational activity that is known to be dangerous;

   k) Participation in competitions or tournaments organised by sporting federations or similar organisations.

   l) Hazardous winter and/or summer sports such as skiing and/or similar sports.

   m) Permanent resident and students outside of resident country.

   n) The use, as a passenger or crew, of means of air navigation not authorised for the public transport of travellers, as well as helicopters; and,

   o) The accidents deemed legally to be work or labour accidents, consequence of a risk inherent to the work performed by the Insured.
2. In addition to the foregoing General Exclusions, the following benefits are not covered by this insurance:

a) the services arranged by the Insured on his/her own behalf, without prior communication or without the consent of MAPFRE Asistencia, except in the case of an emergency/urgent necessity. In that event, the Insured shall furnish the Company with the vouchers and original copies of the invoices;

b) Illnesses or injuries arising from chronic ailments or from those that existed prior to the inception date of the policy;

c) Death as a result of suicide and the injuries or after-effects brought about by suicide and/or attempted suicide.

d) Illness, injuries or pathological states caused by the voluntary consumption of alcohol, drugs, toxic substances, narcotics or medicines acquired without medical prescription, as well as any kind of mental illness or mental imbalance;

e) Illness or injuries resulting from refusal and/or delay, on the part of the Insured or persons responsible for him/her, in the transfer proposed by the Company and agreed by its medical service;

f) Rehabilitation treatments;

g) Prostheses, orthopaedic material or orthosis and osteosynthesis material, as well as spectacles.

h) Illness or injuries caused by pregnancy and childbirth or any complication therefore or voluntary termination of pregnancy;

i) Costs and/or damages caused by baggage that is not sufficiently well packaged or identified, as well as fragile baggage or perishable products.

j) Assistance or compensation for events that occurred during a trip that had commenced, in any of the following circumstances:
   - Before this insurance comes into force;
   - With the intention of receiving medical treatment;
   - After the diagnosis of a terminal illness;
   - Without prior medical authorisation, after the Insured had been under treatment or medical supervision during the twelve months prior to the start of the trip;

k) Expenses that arise once the Insured is at his/her usual country of residence, those incurred beyond the scope of application of the guarantees of the insurance, and, in any case, after the dates of the travel object of the Agreement have elapsed or after 90 days has elapsed since the start thereof, notwithstanding what is provided for in the Additional Clauses or in the Private or Special Conditions.

3. The Company is exempt from liability when, as a result of force majeure, it is unable to put into effect any of the benefits specifically envisaged in this policy.
**HOW THE INSURED SHOULD SEEK ASSISTANCE?**

<table>
<thead>
<tr>
<th>By dialling our Emergency number, he/she will be prompted to provide:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Passport or Identity card number.</td>
</tr>
<tr>
<td>- Travel Insurance policy number.</td>
</tr>
<tr>
<td>- Full name of the injured and the principal insured.</td>
</tr>
<tr>
<td>- The cause of the call.</td>
</tr>
<tr>
<td>- The place he/she is located (Hotel/City/Address/Phone number)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INTERNATIONAL 24/7 HELPLINE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dial the phone number</strong></td>
</tr>
<tr>
<td>Arab Assist</td>
</tr>
<tr>
<td>00962 6 5008119</td>
</tr>
<tr>
<td>Fax</td>
</tr>
<tr>
<td>00962 65 67 88 66</td>
</tr>
<tr>
<td><strong>24 hours a day and 365 days a year for assistance</strong></td>
</tr>
</tbody>
</table>

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