

Annual travel insurance

General terms and conditions of insurance

Edition 10.2022

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1. Information for customers

The following information for customers provides an overview of the insurer's identity and the main elements of the insurance policy (Art. 3 of the LCA – Swiss insurance policy act). The content and extent of the rights and obligations arising from the insurance policy are determined solely by the insurance policy, the General Terms and Conditions (GTC) and the personal data processing notice (together, the "insurance policy").

Insurance company

Apart from any exceptions indicated below, the insurance company is Europ Assistance (Suisse) Assurances SA (hereinafter "Europ Assistance" or "the insurer"), domiciled at Avenue Perdtemps 23, 1260 Nyon, Switzerland, with the company identification number (IDE/UID) CHE-101.333.746. Through its activity, the insurance company is subject to supervision by the FINMA (Swiss Financial Market Supervisory Authority).

Policyholder

The policyholder is the person named as such in the insurance policy.

Persons insured

Annual travel insurance - individual:

Annual travel insurance covers the person indicated in the policy (hereinafter the "policyholder" or the "insured", as the case may be). Any minor child in the policyholder's care during the trip is also covered when the minor child's parents are not part of the trip.

Annual travel insurance – family:

If a family insurance policy is taken out, the policyholder, the persons living with the policyholder in the same household and his/her children who do not live with the policyholder in the same household are insured, as well as any minor children in his/her care during the trip when the parents of the minor children are not part of the trip.

The policyholder and all the insureds must be domiciled in Switzerland at the time an insured event occurs for which a claim can be made to the insurer.

Insurance period and term

The insurance cover start and end dates are indicated in the policy. The insurance policy may not be terminated before its term date, except in circumstances of just cause provided for in the LCA. Entitlement to insurance

ends at the term date of the insurance policy, or if it is terminated or revoked.

Claims arising during the insurance policy's validity period will become statute-barred after five years from the occurrence of the event giving rise to the obligation.

The policyholder has the right of revocation for policies with a term of one month or more. This communication must be made to the insurer in writing or by any other means that can be proved by a text. The right of revocation allows the insurance buyer to revoke acceptance of the insurance policy within 14 days of this acceptance.

Risks insured and scope of insurance

The risks insured and the scope of the insurance cover stem from the insurance policy. The nature of the insurance is damage insurance as regards all benefits. Annual travel insurance is subsidiary to any other existing insurance cover in favor of the insured and can thus only be activated for any claim where no claims can be made against a third party.

Obligations in the event of a claim

The insured must comply fully with the following legal or contractual obligations to inform and act:

- To promptly notify the insurer in writing of the occurrence of a claim
- To limit the damage as far as possible
- To provide any information that helps to determine the circumstances of the claim and/or assess its consequences
- To transmit to the insurer or its duly appointed representative all relevant documents and information concerning the claim in a comprehensive and accurate manner
- Not to make any changes to insured objects that could complicate the determination of the circumstances of the claim or the assessment of its consequences.

This list only covers the most common obligations. Other obligations are stipulated in the GTC and the LCA.

Main exclusions

The insurance does not cover events:

- That had already occurred when the insurance was taken out or the trip booked, or which were already known, or in the event of an illness which could have been diagnosed during a medical check-up

- Resulting from illnesses and accidents that were not diagnosed by a doctor and supported by a medical certificate at the time they occurred
- Caused by an insured's intentional or grossly negligent act or omission or as a result of a breach of the usual duty of care
- Resulting from a decision taken by the public authorities.

This list only covers the most common exclusions. Other exclusions are stipulated in the GTC.

Premium amount

The premium amount is paid by the policyholder upon signing the insurance policy, and depends on the risks insured and the cover agreed. The premium amount is shown in the insurance policy.

Personal data processing

The insurer processes personal data in compliance with all the applicable provisions of data protection legislation.

Further details on processing can be found in our privacy policy. The current version is available at all times at online-services.europ-assistance.ch/politique-de-confidentialite.

2. Table of insurance benefits

Insurance and assistance benefits		Max. sums insured	
		Essential	Comfort
Cancellation & interruption			
Insurance – Individual	Per event	CHF50,000	CHF50,000
Insurance – Family	Per event	CHF100,000	CHF100,000
Cancellation fees			
Cancelled or delayed departure		arrangement sum*	arrangement sum*
Early or delayed return		arrangement sum*	arrangement sum*
Temporary return		-	arrangement sum*
Additional return costs			
Cancelled or delayed departure	Per person	CHF2,000	CHF2,000
Early or delayed return	Per person	CHF2,000	CHF2,000
Temporary return	Per person	-	CHF2,000
Unforeseen expenses			
Cancelled or delayed departure	Per person	CHF2,000	CHF2,000
Early or delayed return	Per person	CHF2,000	CHF2,000
Temporary return	Per person	-	CHF2,000
Additional costs			
During the trip	Per event	CHF1,500	CHF1,500
Medical assistance			
Search & rescue	Per person	CHF50,000 and unlimited	CHF50,000 and unlimited
Emergency transport	Per person	unlimited	unlimited
Medical costs	Per person	-	CHF250,000
Repatriation of insured	Per person	unlimited	unlimited
Insured's unforeseen expenses	Per person	CHF2,000	CHF3,000
Travel companion's unforeseen expenses	Per person	CHF1,000	CHF1,000
Replacement travel	Per event		arrangement sum*
Assistance to minors	Per event	unlimited	unlimited
Bedside visit	Per event	CHF3,000	CHF4,000
Luggage			
Delayed luggage delivery	Per person	-	CHF1,000
Damage to luggage	Per period**	-	CHF5,000
Pets			
Cancellation fees			
Cancelled or delayed departure	Per event	-	arrangement sum*
Early or delayed return	Per event	-	arrangement sum*
Unforeseen expenses			
Cancelled or delayed departure		-	
Early or delayed return	Per event	-	CHF500
Concierge			included
Services			
Preparation for the trip			
Info-Line & Travel Care		included	included
Travel assistance		included	included
Medical assistance during trip		included	included

* arrangement sum: the sum is always calculated on a pro rata basis

** per insurance period

3. General terms and conditions of insurance

The following sections present:

- Firstly, provisions common to all benefits of the Annual Travel Insurance product
- Secondly, provisions specific to some of the benefits.

To find out the scope and conditions of a given benefit, we recommend that you check in the above table if it is included in the insurance policy taken out and then read both the common provisions and any specific provisions.

3.1 Provisions common to the Annual Travel Insurance product

1. Insurance company

Apart from any exceptions indicated below, the insurance company is Europ Assistance (Suisse) Assurances SA (hereinafter "Europ Assistance" or "the insurer"), domiciled at Avenue Perdtemps 23, 1260 Nyon, Switzerland, with company identification number (IDE/UID) CHE-101.333.746. Through its activity, the insurance company is subject to supervision by the FINMA (Swiss Financial Market Supervisory Authority).

Claims arising during the insurance policy's validity period will become statute-barred after five years from the occurrence of the event giving rise to the obligation.

2. Policyholder

The policyholder is the person named as such in the insurance policy.

The policyholder has the right of revocation for policies with a term of one month or more. This communication must be made to the insurer in writing or by any other means that can be proved by a text. The right of revocation allows the insurance buyer to revoke acceptance of the insurance policy within 14 days of this acceptance.

3. Persons insured

Annual travel insurance - individual:

Annual travel insurance covers the person indicated in the policy (hereinafter the "policyholder" or the "insured", as the case may be). Any minor child in the policyholder's care during the trip is also covered when the minor child's parents are not part of the trip.

5. Risks insured and scope of insurance

The risks insured and the scope of the insurance cover stem from the insurance policy. The nature of the insurance is damage insurance as regards all benefits.

Annual travel insurance is subsidiary to any other existing insurance cover in favor of the insured and can thus only be activated for any event where no claims can be made against a third party.

Annual travel insurance – family:

If a family insurance policy is taken out, the policyholder, the persons living with the policyholder in the same household and his/her children who do not live with the policyholder in the same household are insured, as well as any minor children in his/her care during the trip when the parents of the minor children are not part of the trip.

6. Territorial scope

Cover is valid throughout the world, subject to limitations and exclusions concerning the international sanctions described below.

7. Obligations of the insured

Obligation to provide information

The policyholder must inform the Insurer of any change of domicile within 30 days of the change. In the event of a change of domicile in Switzerland, the insurer is entitled to adjust the insurance cover and premium to the new conditions.

Obligations in the event of a claim

The insured must comply fully with the following legal or contractual obligations to inform and act:

- To notify the insurer in writing of the occurrence of a claim as soon as possible
- To limit the damage as far as possible
- To provide any information that helps to determine the circumstances of the claim and/or assess its consequences

- To transmit to the insurer or its duly appointed representative all relevant documents and information concerning the claim in a comprehensive and accurate manner
- Not to make any changes to insured items that could complicate the determination of the circumstances of the claim or the assessment of its consequences, unless these changes appear necessary to limit the claim or are in the public interest.

Special agreements, i.e. those not governed by these GTC, are only valid if they have been approved in writing or in text form by the insurer.

Contact details for assistance and claims

The insured is available to insureds 24/7.

Tel. : +41 (0) 22 939 22 96

Email help@europ-assistance.ch

Contact details in the event of a claim (without medical assistance)

The insurer is available to insureds Mondays to Fridays from 8.30 a.m. to 5.30 p.m.

Tel. : +41 (0) 22 939 22 96

Email claims@europ-assistance.ch

Site online-services-ch.eclaims.europ-assistance.com

Postal address :
Europe Assistance
Avenue Perdtemp 23
1260 Nyon - Switzerland

Infringement of obligations

In the event of a culpable breach of the obligation to notify, inform or provide the required documents, the insurer reserves the right to reduce or refuse its benefits, unless the insured can prove that their culpable conduct had no influence on the occurrence and extent of the claim.

8. General exclusions

The following general exclusions apply to all annual travel insurance benefits.

The insurance does not cover events:

- That had already occurred when the insurance was taken out or the trip booked, or which were already known or dealt with, or in the event of an illness that could have been diagnosed during a medical check-up
- Whose occurrence was obvious to the insured at the time the trip was booked
- Resulting from illnesses and accidents that were not diagnosed by a doctor and supported by a medical certificate at the time they occurred

- Following any pre-existing chronic or mental illness. With these events, insurance cover is only granted in the event of an acute, sudden and unforeseeable aggravation and if a doctor has certified that the insured was able to travel or should normally have been able to travel.

- Caused by an insured's intentional or grossly negligent act or omission or as a result of a breach of the usual duty of care or as a result of drunkenness, the consumption of drugs, medicines not prescribed by a doctor, narcotics or similar products

- Events resulting from an administrative decision, with collective or individual scope, taken by one or more States and/or administrative authorities, such as seizure of assets, internment, detention, limitation of movement of goods and/or persons, suspension of activities, etc.

- Following a pandemic, epidemic or quarantine within or outside the country of residence

- Resulting from suicide, voluntary mutilation, attempted suicide or kidnapping

- Following acts of war or terrorism in Switzerland

- Occurring during the insured's active participation in strikes or internal disturbances

- Occurring during participation in speed contests or training, rallies, extreme sports or similar events

- Occurring during participation in a professional capacity or under a paid contract in an official competition organized by a sports federation, as well as training for these competitions and the legal liability associated with these activities.

- Occurring when driving a motor vehicle or boat without respecting the rules of the road or navigation.

- Occurring during the intentional perpetration of crimes and offences or attempts to commit them

- Resulting from a total or partial cancellation or interruption of the contractual services by the organizer or linked to its insolvency

- Following the grounding of the airline

- Following an earthquake in Switzerland

- Occurring in a country or region to which the DFAE (Federal Department of Foreign Affairs) advises against travel at the time of booking or departure

- Following ionizing radiation, including radiation resulting from transmutation of the atom

- Occurring during a business trip.

The insurance does not cover costs:

- Arising from measures not ordered or approved by the insurer

- Arising from measures not expressly covered by the GTC



- Relating to the excess of the health insurer or any other provident institution.

9. Definitions

Accident: any sudden and involuntary damage to the human body caused by an extraordinary external event entailing an inability to travel.

Pets: dogs and cats only.

Exceptional circumstances: war, riots, civil unrest, revolutions or revolts, acts of terrorism, reprisals, strikes, volcanic eruptions, earthquakes abroad, fire, natural events (high water, floods, storms with winds of at least 75 kph, hail, avalanches, snow pressure, rockfalls and landslides), local weather conditions and destinations advised against by the DFAE (Federal Department of Foreign Affairs). The period for each loss event ends 14 days after the event occurs. Entitlement to benefits ends on the 15th day after the event.

Destinations advised against by the DFAE: destinations advised against by the DFAE (Federal Department of Foreign Affairs) or any official department of a State or international organization. An official department must confirm exceptional events at the destination during the journey to this place.

Child: a person who has not yet reached the age of 25 and is not in gainful employment (apprentices and students are not considered to be in gainful employment).

Family: this includes the policyholder's partner, children, parents, brothers, sisters, grandparents, grandchildren, parents-in-law and the children of the policyholder's partner.

Illness: any impairment of physical, mental or psychological health that is not due to an accident and entails an inability to travel.

Serious illness: any impairment of physical, mental or psychological health that is not due to an accident and requires hospitalization for at least 7 days.

Public transport: any means of transport that runs regularly according to a timetable and requires a valid ticket. Taxis, self-employed drivers and hire vehicles are not considered to be public transport.

Travel companion: a single adult taking part in the same trip as the insured.

Close friend/relative: family members, people living in the same household as the policyholder, close friends and persons in charge of minors or persons requiring care who are not taking part in the trip.

Arrangement sum: non-refundable sum already paid for the insured's trip and activities.

Trip: this lasts a maximum of 365 days. It starts when the insured leaves home, includes at least one night away from home or includes a return trip at a distance of more than

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30 km from the domicile. It ends with the return to the domicile.

10. International sanctions

General provisions

Europ Assistance will not provide cover, payments, services or other benefits if this could expose it to sanctions, prohibitions or restrictions in application of United Nations resolutions or economic sanctions, laws or regulations of the European Union, the United States of America, the United Kingdom, France or the Swiss Confederation. Furthermore, no payments will be made by the insurer in US dollars.

More information can be found at europ-assistance.com/fr/who-we-are-international-regulatory-information.

Territorial exclusion clause

Europ Assistance guarantees its cover for the countries covered by the insurance policy with the exception of the following countries and territories: Afghanistan, Belarus, Burma (Myanmar), North Korea, Russian Federation, Iran, Crimea Region, Donetsk People's Republic, Kherson People's Republic, Luhansk People's Republic, Zaporizhzhia People's Republic, Syria and Venezuela.

American Traveler Clause

Europ Assistance can guarantee its cover to an insured who is a United States national (US-Person) travelling to Cuba only when the journey complies with American laws.

11. Exemption from liability

Force majeure clause

The insurer may not be held responsible for any failure to perform services because of force majeure, such as a country being in a state of war, civil war or known political instability or subjected to civil commotion, riots, acts of terrorism, reprisals, restrictions on the free movement of persons and goods, strikes, explosions, natural disasters, volcanic eruptions, disintegration of the atomic nucleus, epidemics, pandemics or any other case of force majeure.

Concierge services

The nature of these services means that the insurer is bound by a "best endeavors" not an "absolute" obligation. The insurer may not be held responsible for material damage, financial losses and more generally the consequences of the following events:

- The actions or failures of a third-party service provider or partner
- Delay, inaccurate or poor-quality information, or defects in the objects and/or services purchased

- An inability to contact the third-party service provider

12. Personal data processing

The insurer processes personal data in compliance with all the applicable provisions of data protection legislation.

Further details on processing can be found in our privacy policy. The current version is available at all times at online-services.europ-assistance.ch/en/personal-data-processing-notice.

13. Place of jurisdiction

This insurance is governed by Swiss law. The courts of the Swiss domicile of the policyholder or the insured and the courts of the insurer's registered office will have jurisdiction over any disputes arising from this insurance policy.

14. Additional legal foundations

In addition, the provisions of the Swiss Federal Insurance Policy Act (LCA), the Swiss Code of Civil Procedure (CPC), the Swiss Code of Obligations (CO) and all other relevant laws and regulations will apply.

Normative Hierarchy

In the event of discrepancies between the French and English versions of the General Terms and Conditions (AVB), the French version shall prevail in case of doubt.

3.2. Trip cancellation and interruption

1. Cancellation fees

1. Events insured

The insurer provides insurance cover when the insured is unable to start their trip at the time initially planned (**trip cancellation or delayed departure**), carry out their trip as initially planned (**early or delayed return**), or temporarily continue their trip as initially planned (**temporary return**) as a result of an event mentioned below:

- Accident, illness, disappearance or death of the insured
- Accident, serious illness, disappearance or death of a close friend/relative
- Accident, serious illness, pregnancy complications or death of the person replacing the insured at their workplace
- Loss of employment of the insured or of the person replacing the insured at their workplace, after the trip has been booked
- Exceptional circumstances
- Burglary or major damage to the insured's domicile following a natural event, fire or water damage
- Theft of the travel ticket, passport or credit card 24 hours before the trip starts
- Missed connection due to a failure caused by an accident or breakdown involving the private vehicle or taxi used by the insured to reach the departure venue for the trip (airport, station, port).
- Missed connection due to late arrival as a result of an accident or breakdown of the public transport used to reach the departure venue for the trip (airport, station, port)
- A sudden and unexpected call to civic duty (marching orders, personnel specializing in disaster situations, giving evidence).

2. Benefits provided

The insurer will reimburse the insured for the actual costs of the trip's cancellation, rental of goods, activities and lessons/training at the destination, up to the amount indicated in the table of benefits under point 2.

3. Exclusions

In addition to the general exclusions, the following specific exclusions apply:

- Unsuccessful recovery: if an illness or the consequences of an accident, operation or medical intervention already exist at the time the event is booked and have not been cured by the start of the event.

- Missed connections caused by the private vehicle's or taxi's running out of fuel, lack of maintenance or loss of/defect in keys.
- The events "loss of the insured's job" and "missed connection to the departure venue of the trip" do not apply to cases of early or delayed return or temporary return.

2. Additional return costs

1. Events insured

The insurer provides insurance cover when the insured is unable to carry out their trip as initially planned (**early or delayed return**), or to temporarily continue their trip as initially planned (**temporary return**) as a result of an insured event mentioned under cancellation costs cover under point 3.2.1.

2. Benefits provided

The insurer will organize and pay for the insured's additional return travel costs (by train or passenger plane), up to the amount indicated in the table of benefits under point 2. The insurer decides on the type of transport.

3. Exclusions

In addition to the general exclusions, the specific exclusions for cancellation costs cover under point 3.2.1 apply.

3. Unforeseen expenses

1. Events insured

The insurer provides insurance cover when the insured is unable to carry out their trip as initially planned (**early or delayed return**), or to temporarily continue their trip as initially planned (**temporary return**) as a result of an insured event mentioned under cancellation costs cover under point 3.2.1.

2. Benefits provided

The insurer will cover unforeseen expenses for accommodation, meals, transport (not related to the return home) and telephone calls, up to the amount indicated in the table of benefits under point 2.

3. Exclusions

In addition to the general exclusions, the specific exclusions for cancellation costs cover under point 3.2.1 apply.

4. Additional costs

1. Events insured

The insurer will provide cover if the insured cannot continue their trip as initially planned, following one of the events listed below:

- Missed connection by more than 3 hours as a result of a breakdown or traffic accident while travelling by taxi (or independent driver service) or public transport.
- Damage to trip accommodation rendering it unusable
- Loss, theft or destruction of vital medicines
- Loss, theft or destruction of travel documents

2. Benefits provided

The insurer will cover unforeseen expenses for accommodation, meals, transport (not related to the return home) and telephone calls, up to the amount indicated in the table of benefits under point 2.

In the event of the loss, theft or destruction of vital medicines, the insurer will pay for the cost of re-shipping the medicines if they are not available at the destination, up to a maximum of CHF200 per event.

3. Exclusions

In addition to the general exclusions and the specific exclusions for cancellation costs cover under point 3.2.1, the following exclusions apply:

- The cost of medicines.

3.3. Medical assistance

1. Search & rescue

1. Events insured

The insurer will cover the insured if the insured can no longer continue their trip (already begun) following one of the events listed below:

- Accident, illness, pregnancy complications or death of the insured.

2. Benefits provided

The insurer will contribute to the costs of search and rescue operations, up to the amount indicated in the table of benefits under point 2.

If the insured is officially reported missing, the insurer will contribute to the search costs, even if there is no insured event, regardless of the insured's state of health.

3. Exclusions

In addition to the general exclusions, the following specific exclusions apply:

- In the event of abduction, cover for search costs expires when the abduction is established as certain.

2. Emergency transport

1. Events insured

The insurer will cover the insured if the insured can no longer continue their trip following one of the events listed below:

- Accident, illness, pregnancy complications or death of the insured for which emergency medical intervention is indicated and certified by a doctor.

2. Benefits provided

The insurer will organize and pay for the following, as decided by the insurer's doctors:

- Emergency transport to the nearest hospital to their domicile, as far as possible (by ambulance, train, passenger plane or medical plane).

If the insured is ill or injured during a trip, the insurer's doctors will contact the local doctor, and possibly the insured's attending physician, in order to decide on the best course of action in the insured's interest.

Under no circumstances can the insurer take the place of official local emergency services such as the police or fire brigade. Only the insured's medical interests and compliance with current health regulations are taken into consideration when deciding on transport, the means of transport used and any hospitalization establishment.

3. Exclusions

In addition to the general exclusions, the following specific exclusions apply:

- The organization of and payment for emergency transport for benign conditions that can be treated locally and do not prevent the insured from continuing their trip.

3. Repatriation of the insured

1. Events insured

The insurer will cover the insured if the insured can no longer continue their trip following one of the events listed below:

- Accident, illness, pregnancy complications or death of the insured, for which emergency medical intervention is unnecessary.

2. Benefits provided

The insurer will organize and pay for the following, as decided by the insurer's doctors:

- Return to the domicile (by train or passenger plane)

If the insurer's doctors deem that the insured's state of health allows them to travel without medical supervision, the insurer will pay for and organize the insured's return to their domicile. This transport can only be organized with the prior agreement of the insurer's doctors and on the advice of the local attending physician. Only the insured's medical interests and compliance with current health regulations are taken into consideration when deciding on transport, the means of transport used and any place of hospitalization.

The insurer will contribute up to the amount indicated in the table of benefits under point 2.

If an insured dies during a trip, the insurer will organize and pay for the transport of the deceased to the designated place of burial in their country of residence. The insurer will contribute up to CHF2,000 towards the deceased's coffin and funeral expenses.

3. Exclusions

In addition to the general exclusions, the specific exclusions for emergency transport cover under point 3.3.2 apply.

4. Medical costs

If the insured is seriously ill or injured during a trip, the insurer will intervene in a subsidiary capacity to the statutory social insurances of their country of residence (LAMal/KVG health insurance, UVG/AA accident insurance, Caisse Primaire insurance fund, etc.) and any supplementary insurance for emergency hospitalization or emergency outpatient treatment costs that are not covered by these organizations and remain payable by the insured, up to the maximum agreed sum insured per person per year.

1. Events insured

The insurer will cover the insured if the insured can no longer continue their trip because of an event listed below:

- Accident, illness, pregnancy complications or death of the insured for which emergency medical intervention is indicated and certified by a doctor.

2. Benefits provided

The insurer will organize and pay for the following, up to the amount indicated in the table of benefits under point 2.

- Medical fees
- Pharmacy and transport costs prescribed by a doctor
- Urgent dental care
- Hospitalization costs if, by mutual agreement between the insurer's doctors and the attending doctor on site, the insured is deemed unable to travel. Cover for hospitalization costs ceases from the date on which the insurer is able to transport the insured.

If the insured has no health and/or accident insurance cover, the insurer will only reimburse 50% of the costs of hospitalization or outpatient treatment if these are due to illness or accident, up to a maximum of CHF50,000 per person.

3. Exclusions

In addition to the general exclusions, the following specific exclusions for emergency transport cover under point 3.3.2 apply:

- Medical and/or hospitalization costs for a treatment diagnosed or planned or undertaken by the insured before their departure
- Dental care and jaw diseases, except for emergency dental care
- Expenses concerning the diagnosis or treatment of a pregnancy already known before the trip, unless an unforeseeable complication arises, and in all cases, expenses concerning a pregnancy from the 28th week onwards

- Optical expenses (e.g. glasses or contact lenses).
- Costs for medical aids and prostheses (including dental, hearing and orthopedic prostheses)
- Spa treatment costs
- The cost of travel to a nursing home
- Rehabilitation, physiotherapy and chiropractic expenses
- Vaccine purchase and vaccination costs
- Health check-up costs
- Costs for medical or paramedical services, as well as cost of purchasing products whose therapeutic nature is not recognized in Switzerland
- Medical examinations and related costs
- Costs concerning medically assisted reproduction or the voluntary termination of pregnancy
- The cost of the excess not covered by the state health insurance scheme or any other provident or insurance institution
- Meal and telephone costs.

4. Obligations in the event of a claim

In addition to the general obligations, the following specific obligations apply:

- To take all necessary steps to recover medical expenses from the insured's sickness/accident insurance fund or any other provident body, once the insured has returned to their country of residence.
- To send the insurer photocopies of care sheets and original statements from provident bodies certifying the expenses incurred and the reimbursements received.

5. Insured's unforeseen expenses

1. Events insured

The insurer will cover the insured if the insured can no longer continue their trip (early return or delayed return) due to one of the following events:

- Accident, illness, pregnancy complications or death of the insured

2. Benefits provided

The insurer will organize and pay for the following, up to the amount indicated in the table of benefits under point 2.

- Unforeseen transport, accommodation and meal costs for the insured.

3. Exclusions

In addition to the general exclusions, the following specific exclusions for emergency transport cover under point 3.3.2 apply:

- Compensation for accommodation, transport and meals provided to the insured under point 3.2.3 will be deducted.

6. Travel companion's unforeseen expenses

1. Events insured

The insurer will cover the travel companion if the insured can no longer continue their trip (**early return or delayed return**) due to one of the following events:

- Accident, illness, pregnancy complications or death of the insured

2. Benefits provided

The insurer will organize and pay for the following, up to the amount indicated in the table of benefits under point 2:

- Unexpected transport, accommodation and meal costs for the travel companion.

In principle, the travel companion travels with the sick or injured insured. On the advice of the insurer's medical department, the travel companion may travel in a different means of transport from the sick or injured insured.

7. Replacement travel

1. Events insured

The Insurer will provide cover if the insured is repatriated for medical reasons covered under point 3.3.2. occurring during the trip.

2. Benefits provided

The insurer will compensate the repatriated insured for the amount of the arrangement sum or the price of the trip booked and paid before departure, but only up to the amount indicated in the table of benefits under point 2.

3. Exclusions

In addition to the general exclusions, the following specific exclusions for emergency transport cover under point 3.3.2 apply:

- Replacement travel cover applies when repatriation under point 3.3.2 has been organized and paid for by the insurer.
- The replacement travel cover under point 3.3.7 cannot be combined with the unforeseen expenses cover under point 3.2.3. The insured can choose the cover they wish to apply, provided that all the conditions are met.

8. Assistance to minors

1. Events insured

The insurer will cover the insured if the insured can no longer continue their trip (**early return or delayed return**) and assistance to minors on the trip is required, due to one of the following events:

- Accident, illness, pregnancy complications or death of the insured

2. Benefits provided

The insurer will organize and pay for the following, up to the amount indicated in the table of benefits under point 2:

- Unforeseen costs of assistance by a natural person (escort) for the transport of minors to their home.

9. Bedside visits

1. Events insured

The insurer will cover a person not involved in the trip, chosen by the insured, if the insured is confined to their bed (immobilized in a hospital or hotel) for at least 10 days, and the insurer's doctors advise against transport back to the domicile following an illness or accident occurring during a trip. With minor insureds, the insurer will provide cover from 5 days of their confinement to bed.

2. Benefits provided

The insurer will organize and pay for the following, up to the amount indicated in the table of benefits under point 2.

- Unforeseen transport, accommodation and meal costs for the person not involved in the trip, chosen by the insured.

3.4. Luggage

Insured items

The insured's personal effects taken on the trip or entrusted to a public transport company with which the insured is travelling to the destination.

Non-insured items

- Items covered by a dedicated transport contract
- All types of jewelry and accessories, watches, perfumes, beauty products, furs, works of art or collectors' items, musical instruments, alcohol, tobacco, perishable goods and weapons
- Cash, travel tickets, season tickets, credit cards, securities, savings books and precious metals
- Software of any kind
- Any object moving on its own axles as well as flying devices, including their accessories.

1. Delayed luggage delivery

1. Events insured

The insurer will grant cover if the insured's luggage arrives at the trip destination at least four hours after the insured's arrival.

2. Benefits provided

The insurer will reimburse the costs incurred for purchasing essential clothing and hygiene items, up to the amounts indicated in the table under point 2.

3. Exclusions

In addition to the general exclusions, the following specific exclusions apply:

- Clothing and hygiene items purchased by the insured after the luggage is delivered
- Late arrival of luggage on the insured's return journey
- Delays due to the confiscation of the insured's luggage by the authorities (customs, police).

4. Obligations in the event of a claim

In addition to the general obligations, the following specific obligations apply:

- To inform the service provider of any irregularities in the transport of luggage and have the incident reported.

2. Damage to luggage

1. Events insured

The insurer provides insurance cover in the event of damage, loss, robbery, destruction or theft of luggage

during the trip. The policy also covers costs incurred to reduce damage caused by an insured event.

2. Benefits provided

The insurer will reimburse repair costs up to the replacement value of the insured item, but not exceeding the amounts indicated in the table under point 2.

If the item cannot be repaired, the insurer will reimburse the insured up to the replacement value of the item, but not exceeding the amounts indicated in the table under point 2. The insurer applies an excess of CHF200.

As an exception to the obligation to provide proof of purchase for insured items, the insurer allows the insured to benefit from the lump-sum system. The lump-sum system does not require proof of purchase, does not apply an excess and pays out a maximum of CHF500 per event.

3. Exclusions

In addition to the general exclusions, the following specific exclusions apply:

- The lump-sum system does not apply in addition to the standard system (reimbursement at the item's replacement value).
- Damage caused by the insured or a relative of the insured, whether or not intentionally
- Damage caused by insured items left unattended or forgotten in a public place out of the insured's direct reach.
- Loss damage not caused by the transport company used by the insured for their own transport to their destination
- Damage resulting from road traffic offences, customs requirements, confiscation, removal or detention by a government or other authority.
- Damage resulting from enamel or lacquer chips, scratches, abrasions, friction, bumps, cracks and detachment of any kind
- Damage resulting from the influence of climate or temperature
- Damage resulting from theft from a private or rental vehicle.

4. Obligations in the event of a claim

In addition to the general obligations, the following specific obligations apply:

- To report the theft or robbery to the police and have a written report drawn up

- To report any damage to luggage to the service provider and have a written report drawn up
- To submit original proof of purchase (or guarantee certificate) to the insurer.

3.5. Pets

1. Cancellation fees

1. Events insured

The insurer provides insurance cover if the insured is unable to start their trip at the time initially planned (**trip cancellation or delayed departure**), to carry out their trip as initially planned (**early or delayed return**), or to temporarily continue their trip as initially planned (**temporary return**) as a result of an event mentioned below:

- Accident, illness or death of a pet, the insured or a carer
- The disappearance (loss) of a pet dog belonging to the insured or a carer
- The disappearance (loss) of a pet cat belonging to the insured or a carer if the period of absence exceeds 48 hours
- Accident, illness, disappearance or death of the person responsible for looking after a pet belonging to the insured or the carer, prior to departure.
- Accident, illness or death of a pet belonging to the insured or the carer, during the trip
- Accident, illness, disappearance or death of the person responsible for looking after a pet belonging to the insured or the carer, during the trip

2. Benefits provided

The insurer will reimburse the insured pro rata for the costs of the trip's cancellation, rental of goods, activities and lessons/training at the destination, up to the amount indicated in the table of benefits under point 2.

3. Exclusions

In addition to the general exclusions, the following specific exclusions apply:

- Any accident or illness not verified by a vet and not requiring medical examination or treatment.
- The presence of the insured or the carer is not imperative for a pet at home.

2. Unforeseen expenses

1. Events insured

The insurer provides insurance cover if the insured is unable to start their trip at the time initially planned (**trip**

cancellation or delayed departure), to carry out their trip as initially planned (**early or delayed return**), or to temporarily continue their trip as initially planned (**temporary return**) as a result of an insured event mentioned under cancellation costs cover under point 3.5.1.

2. Benefits provided

The insurer will cover unforeseen expenses for accommodation, meals, transport (not related to the return home) and telephone calls, up to the amount indicated in the table of benefits under point 2.

3. Exclusions

In addition to the general exclusions, the specific exclusions for cancellation costs cover under point 3.5.1 apply.

3.6. Concierge services

1. Contact

The concierge is available 24/7 for trip-related requests.

Tel. : +41 (0) 22 939 22 96

Email : conciergeservices@europ-assistance.ch

- Requests that merely involve granting a discount.
- Requests that are restricted for certain people or in certain countries.
- Requests in breach of current legislation of the country where the services are to be provided.

2. Beneficiaries

The beneficiaries are the insureds.

3. Entitlement to Concierge Services

The entitlement to concierge services corresponds to the period of validity of the annual travel insurance policy.

4. Benefits provided

The insurer offers the insured various types of concierge services in terms of travel, gastronomy, ticketing, shopping, children, practical life, well-being and the organization of events. When the insured makes a request, the insurer will use its best efforts, without any absolute obligation, to ensure that the request is met either through its intermediary or by putting the insured in contact with one of its service providers or partners.

If request processing requires more than two hours, the insurer reserves the right to close the request in its current state and inform the beneficiary of its status.

The insurer reserves the right to refuse any inappropriate requests without having to provide an explanation.

5. Payment terms

Costs and expenses concerning the products and services reserved are payable by the beneficiaries.

Beneficiaries are responsible for paying for the services requested, as well as any cancellation or no-show fees. The balance remaining to be paid for the service must be settled directly between the beneficiaries and the third-party service provider.

6. Obligations of beneficiaries

The beneficiary must do all in their power to provide proof of identity each time they request concierge services.

If the information necessary to identify the beneficiary is insufficient, the insurer reserves the right to request confirmation from the insurance buyer.

7. Exclusions

The insurer will refuse the following requests for concierge services:

- Requests that are illegal in Switzerland, unethical and contrary to morals.

3.7. Services

1. Contact

The service line is available 24/7 during the trip.

Tel. :	+41 (0) 22 939 22 96
Email	help@europ-assistance.ch

1. Costs and payment

Any costs and expenses incurred as a result of consultations or expert opinions obtained from health professionals are payable by the insured.

Telephone charges are payable by the insured.

1. Preparation for the trip

Info-Line & Travel Care

The service line acts as a contact point for all information concerning the insured's trip destination. On the basis of information provided by the DFAE (Federal Department of Foreign Affairs), the service line provides information on the security situation abroad, the contact details of the relevant bodies in Switzerland for visa applications, regulations on the length of stays and the recommendations to be followed before each trip.

2. Travel assistance

Loss/theft of documents and mobile phones

In the event of the loss of travel documents, identity papers, cheques, credit cards, travel tickets or telephone cards, the insurer will put the insured in contact with the appropriate supplier, issuer or operator.

Urgent messages

In the event of an emergency or while the insured is hospitalized, at the insured's request and with their consent, the insurer will help the insured by forwarding urgent messages to and from their family or a designated person.

Unforeseen events at home during the trip

In the event of an emergency or dangerous situation (burglary, pet left unattended, open door, fire, water damage) at the insured's home during the trip, the insured can contact the insurer to organize assistance at their home. However, the costs of dealing with the danger or the emergency situation are payable by the insured.

3. Medical assistance during the trip

Initial health advice/priority consultation

The service line's medical specialists will discuss the next steps in the treatment with the insured.

Second medical opinions

The insurer's service line team will arrange either a direct appointment with a specialist or, if the documents are sufficiently detailed, a second examination of the documents and an assessment by a specialist.

In the event of a second examination of the documents by a specialist, the 15-working-day period cannot be respected. Consequently the "best efforts" principle is applied.

Psychological support

In the event of an accident, assault or attempted assault, the death of a family member, an attack or a natural disaster resulting in psychological trauma during the trip, the insurer will provide a psychological counselling service enabling the insured to contact clinical psychologists by telephone up to 7 days after the trip.