



INTER PARTNER ASSISTANCE S.A.

Insurance and Reinsurance Company
General Agency for Italy

MULTI-RISK TRAVEL INSURANCE POLICY

"TRIPY INTEGRAZIONE SPESE MEDICHE"

Policy Summary

Last updated in April 2023

Inter Partner Assistance S.A. – Rappresentanza Generale per l'Italia

Compagnia di Assicurazioni e Riassicurazioni – Via Carlo Pesenti, 121 – 00156 Roma – Tel.06/42118.1

Sede legale Bruxelles – 7, Boulevard du Régent – Capitale sociale € 130.702.613 interamente versato – Gruppo AXA Partners

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GLOSSARY

Insured: the individual, mentioned in the policy, whose interests are covered and protected by the insurance.

Insurance: the insurance contract.

Assistance: timely assistance or help, in money or in kind, provided that the insured person is in difficulties following the occurrence of an accident, organised through the Operations centre.

Baggage: clothing, sporting goods and personal hygiene item, photographic and video equipment suitcase, handbag, a backpack that may contain them and which the Insured may take with him/her on the trip.

Natural disasters: tornadoes, hurricanes, earthquakes, volcanic eruptions, floods, nuclear explosions and other upheavals of nature.

Operations Centre: the organisational structure of Inter Partner Assistance SA - General Agent for Italy - Via Carlo Pesenti 121 - 00156 Rome - made up of human resources and equipment, available 24 hours of every day of the year, providing telephone contact with the Insured, organising intervention in-situ and to carry out, with costs borne by the Company, any assistance provided for in the Policy.

travelling companion: the insured person who, while not having family ties with the insured who suffered the incident, is listed on the same journey of the Insured..

Insured Party: the person who takes out the insurance. In the case of a natural person, a person of legal age with legal capacity to act.

Destinations: The list of individual countries per destination zone is available on the website prior to subscription.

Address: the place in Italy where the Insured lives or has established the headquarters of his business and interests.

Day hospital: a hospital stay not involving an overnight admission, but documented by medical records, at a medical facility authorised having beds devoted to hospital use.

Italy: the territory of the Republic of Italy, including the Republic of San Marino and the Vatican City.

Abroad: all countries of the world, except Italy.

Event: the event that caused or has given rise, directly or indirectly, to one or more claims.

Family: means a person related by kinship to the insured (spouse, children, father, mother, brothers, sisters, grandparents, in-laws, son-in-laws, daughters in-laws, uncles, cousins, nephews) and persons permanently living together with him/her in a family unit.

Excess: fixed amount, in absolute number, to be paid by the insured person in the event of a claim or claims.

Theft: an offence committed by anyone who takes possession of the personal property of others, in order to gain profit for oneself or others as regulated by articles 624a and 624b from the Penal Code.

Mechanical failure: the sudden and unexpected mechanical or hydraulic, event that puts the vehicle in such a way as to not be able to continue the planned trip or it puts in abnormal or dangerous traffic conditions in terms of safety of the persons or vehicles. The following are considered faults: breaking or perforation of the tire, fuel exhaustion, battery failure, blocking of the theft alarm/immobiliser.

Fire: Free flame combustion of tangible assets outside of appropriate burning point that can expand and propagate by itself

Traffic accident: the accident occurred to the vehicle while moving in traffic, including the impact or the collision with a mobile or stationary obstacle, with other vehicles, identified or not, the overturning or running off the road, even if it is due to the incompetence, neglect and failure to comply with the traffic rules and regulations (as defined by law), such as to cause damage which leads to the immobilisation of the vehicle itself or allow the driving with the risk of aggravating the damage which does not allow him the independent displacement in normal safety conditions.

Compensation or indemnification: the sum payable by the Company in event of a claim covered by the guarantees of the policy.

Injury: casualty due to fortuitous, violent and external causes that produces objectively noticeable bodily harm, which, as a consequence, result the death, permanent injury or disability or temporary disability.

Care institution: University college hospital, hospital, nursing home, day hospital, diagnostic and / or therapeutic clinic, duly authorized for diagnosis and treatment. The following are not commonly considered as health facilities for diagnosis and care spas, mainly those for dietary purposes, for wellness, rehabilitation, convalescence, hospital stays or long stays, facilities for the elderly.

Illness: any noticeable impairment of health not due to the injury sustained.

Pre-existing disease: the disease that is the expression or direct consequence of chronic or pre-existing pathological situations at the start of the trip.

Maximum: the maximum amount, established in the Policy, guaranteed by the Company in the event of a claim.

Medicines: Considered to be those entered in the Italian Register of Medicines. The following are not considered to be pharmaceutical products: homoeopathy, cosmetics, dietary, galenic preparation, etc., Even if prescribed by a doctor.

Policy: the document which proves the insurance has been taken out.

Premium: the amount owed by the Contractor to the Insurer.

Statute of Limitations: the expiry of the time to exercise the same right within the time allowed by law.

Robbery: the theft of movable objects from the owner, with violence or threat to his/her person.

Residence: the place where the Insured has established his/her dwelling as a result the certificate of residence.

Admission / hospitalisation: staying in care institutions duly authorized for the provision of hospital care, covering at least one night, or a day hospital stay.

Deadline: the date on which the effects of the contract cease.

Burglary: forcing, removal or breaking of locks or means of protection of rooms or safes or cabinets containing the insured property, such as to cause the subsequent inability of the regular operation in place before the damaging event.

Mugging: Stealing things by snatching them out of the hand of or from the person the hands or

Deductible: The part of indemnifiable damage under the terms of the policy, calculated as a percentage, that remains the responsibility of the insured per claim.

Claim: the occurrence of the damaging event, uncertain future, for which insurance has been given.

Company: INTER PARTNER ASSISTANCE S.A. General Agent for Italy - Via Carlo Pesenti 121 - 00156 Rome.

Third parties mean any person not falling within the definition of "family".

Travel: a trip, stay or location resulting from the relative contract or travel document.

SPECIAL CONDITIONS OF INSURANCE

Territorial extension

The insurance is valid for the destination chosen in the policy.

Exclusions common to all sections

Excluded from the terms of this insurance are all the services for which the Insured has not sought prior approval from the Operations Centre helpline.

The following are also excluded from any compensation, services, consequences and / or event arising directly or indirectly from:

- a) a) situations of armed conflict, invasion, acts of foreign enemies, hostilities, war, civil war, rebellion, revolution, insurrection, martial law, military or usurped power or attempts to usurp power;
- b) acts of terrorism in general, including the use of any type of nuclear or chemical bomb; **this exclusion is not for Assistance and Medical Expenses while travelling**
- c) c) ionising radiation or radioactive contamination from nuclear fuel, or arising from phenomena of transmutation of the nucleus or radioactive, toxic, explosive, or other dangerous features of nuclear equipment and its components;
- d) air, water, soil, subsoil, or any other environmental damage;
- e) search and rescue expenses of the Insured in the sea, lake, mountain or desert;
- f) wilful or gross misconduct of the Insured;
- g) suicide or attempted suicide.

No (re)insurer will be required to provide coverage, to pay a claim or provide a service in any capacity in the event that the provision of such coverage, payment of the claim or the provision of this service exposes the (re) insurer to any penalty or restriction pursuant to a resolution of the United Nations or under the sanctions, laws or economic and trade embargoes of the European Union, the United Kingdom or the United States of America.

Age limitations

For trips with a duration up to 35 days, persons under the age of 90 years are insurable. However, for people who reach this age (90 years) during the contract, the policy remains valid until the expiry of the Policy.

For trips longer than 35 days, persons under 71 years of age are insurable. However, for people who reach this age (71 years) during the contract, the policy remains valid until the expiry of the Policy

Limitations common to all sections

In the event of multiple claims covered by the policy and caused by the same event that involved more than one policyholder at the same time, the aggregate policy ceiling for all claims cannot exceed € 20,000,000.00.

In the event that the total amount of claims exceeds € 20,000,000.00, the sums to be paid to the Insured will be reduced on a proportional basis, if possible.

PURPOSE OF THE INSURANCE

The Company, through its Operating Centre, provides the guarantees specified in the following sections:

A. MEDICAL EXPENSES WHILE TRAVELLING**B. BACK HOME****C. COVER STAY****A. MEDICAL EXPENSES WHILE TRAVELLING****A.1 - Purpose of the insurance:**

The guarantee medical expenses while travelling is operating as an Excess Insurance and the Company's liability it is conditioned to the existence and effective operation of a valid primary insurance of medical expenses contracted with the Company or with another insurance company.

The Company, in the event of an illness or an accident of the Insured while travelling, provides the following services:

MEDICAL EXPENSES WHILE TRAVELLING <i>The indicated thresholds must be understood for the Insured, claim and the insurance period, given the sub limits set out below.</i>	Maximum (indicated in euros)	
	Zone 1	Zone 2 / Zone 3 / Zone 4
BY DIRECT PAYMENT - only if the Operations Centre has been contacted beforehand.	€ 10,000	Maximum amount indicated on the policy certificate

<p>a) If the insured incurs medical expenses / hospital care or urgent and unavoidable surgery which cannot be postponed, received in situ during the trip, during the period of validity of the guarantee, the Company shall bear the costs with direct payments made by the Operations Centre.</p> <p>The guarantee will be paid until the date of discharge or until such time as the Insured shall be deemed, in the opinion of the doctors of the Company, in condition to be repatriated.</p> <p>Where the Company cannot make direct payment, the expenses will be reimbursed provided they have been authorized, in advance by the Operations Centre prior to the period of hospitalisation.</p> <p>No refund will be made without prior contact with the Operations Centre helpline.</p>		<p><i>Chosen from the following amounts</i></p> <p>€ 10,000 € 30,000 € 50,000 € 100,000 € 200,000 € 300,000 € 400,000 € 500,000</p>
<p>TO BE REFUNDED - Even without prior authorisation from the Operations Centre, within the indicated sub-limits, upon the presentation of appropriate both clinical and tax documentation</p>		<p>€ 5,000</p>
<p>a) The Company will reimburse the cost of transport from the scene of the event to the medical centre emergency room or first admission.</p>		<p>€ 1,500</p>
<p>b) The Company shall reimburse the expenses for medical and/or pharmaceutical visits pursuant to the medical prescription, diagnostic tests, ambulatory care and/or first admission (including the day hospital), incurred following an accident or illness occurred while travelling.</p>		<p>€ 500</p>
<p>c) <u>Dental care</u>: The Company will reimburse the expenses for urgent dental treatment while travelling.</p> <p><u>Treatment following an accident</u>: In the event of an accident occurring while travelling the Company will also reimburse the expenses for medical and diagnostic tests, provided they are performed within 30 days after the return from the trip.</p>		<p>€ 500</p>
<p>d) The Company shall provide the refund of the expenses, including the physiotherapy, incurred following an accident or illness occurring while travelling and which resulted in a hospital admission. The guarantee covers, exclusively, the expenses incurred in the hospital or during the recovery period immediately following the admission and, in any case, prior to the return from the trip.</p>		<p>€ 500</p>

A.2 - Effective start date and operation of the section of Travel Medical Expenses

The guarantee runs from the time the trip begins and it ends at the end of the trip, however not later than the policy's end date. The guarantee is given within the limits of capital and the assistance in situ where the event occurred, always included in the "destination" chosen in the policy.

A.3- Deductible Medical Expenses while Travelling

The sum insured in the primary policy is considered the fixed deductible of this policy, with a minimum of € 5,000.00.

A.4- Exclusions (In addition to common exclusions)

The assistance will not be provided in the following cases:

- a) if the Insured (or his/her representative) ignores the indications of the Operations Centre, that is where he/she requests to be discharged from the facility where admitted, against the advice of the doctors of the same facility; or if he/she refuses sanitary transportation or repatriation. In both cases, the Company will immediately suspend the assistance and coverage of the additional medical expenses accrued from the day following the refusal of the transport / repatriation to Italy.
- b) a trip made towards an area where, at the time of departure, there is a ban or limitation (*even temporary*) issued by a competent Public Authority;
- c) a trip made for the purpose of undergoing medical / surgical treatment;
- d) travel to countries formally advised not by the Ministry of Foreign Affairs and International Cooperation, for Italy, and / or by equivalent competent authority of the country of destination of the trip
- e) the guarantee does not operate in the event of non-observance / compliance with the rules provided for vaccines and prophylaxis

Additionally:

A.4.2- Medical Expenses while Travelling

The Company will not accept responsibility for expenses arising from:

- a) rehabilitation and physiotherapy services other than those referred to in the Medical Expenses while Travelling Section, at point d);
- b) mental illness, schizophrenia, bipolar disorders, psychosis, major depression in the acute stage.
- c) the purchase, application, maintenance and repair of prostheses and therapeutic devices;
- d) treatment or removal of physical defects or congenital malformations, for aesthetic applications, for thermal and slimming treatments;
- e) abortion;
- f) practice of air sports and the aerial activities in general, extreme sports if done outside sports organizations and without the required safety criteria;
- g) any sport carried out professionally or which, however, leads to direct or indirect remuneration;
- h) purchase and repair of glasses, contact lenses;
- i) follow-up visits in Italy for situations resulting from illnesses which started while travelling.
- j) travel to countries formally advised not by the Ministry of Foreign Affairs and International Cooperation, for Italy, and / or by equivalent competent authority of the country of destination of the trip;
- k) the exercise of hunting activities;
- l) all activities involving the use of mines, weapons and / or dangerous substances, explosives, access to mines, excavations and / or quarries and land and sea mining;
- m) carrying out the activity of firefighter, pyrotechnician, diver, acrobat, stunt double, stunt performer as well as pilot or crew of aircraft;
- n) the practice of parachuting and downhill.

The guarantee does not operate in the event of non-observance / compliance with the rules provided for vaccines and prophylaxis

The guarantee also does not apply to accidents caused by or due to:

- natural delivery or caesarean section;
- morbidity due to pregnancy beyond the 26th week of pregnancy and childbirth;
- malice of the insured;
- abuse of alcohol or drugs and the use of narcotics and hallucinogens;
- attempted suicide or suicide.

A.5 - Provisions and limitations

For policyholders older than 71 years old at the time of stipulation of the policy, even if the chosen ceiling for medical expenses is equal to € 300,000, € 400,000 or € 500,000; the ceiling will be limited to € 100,000, in case of claim determined by pre-existing conditions of evolving nature and their complications.

The Insured releases the doctors who examined him and the people involved by the policy conditions from professional confidentiality, exclusively for the events covered by this insurance and exclusively to the Company.

B. BACK HOME

OPTIONAL WARRANTY - IS VALID AND OPERATING ONLY IF IT HAS BEEN RECALLED ON THE INSURANCE CERTIFICATE AND THE RELATIVE PREMIUM HAS BEEN PAID

FOR THIS WARRANTY, THE EXCLUSIONS AND DELIVERY METHODS PROVIDED FOR THE TRAVEL ASSISTANCE POLICY SECTION APPLY, IF RELEVANT.

B.1 - Purpose of the insurance:

If the Insured is unable to continue the trip according to the itinerary initially planned due to:

- natural disasters (tornadoes, hurricanes, earthquakes, volcanic eruptions, floods, nuclear explosions and other upheavals of nature);
- epidemic or pandemic (declared by any government body), of such gravity and virulence as to cause high mortality or to require restrictive measures in order to reduce the risk of transmission to the civilian population.

The Operations Center organizes:

- moving to another accommodation or
- coming back home to the insured residence in Italy

Limit: € 1,500 per insured and € 5,000 per policy

C. COVER STAY

OPTIONAL WARRANTY - IS VALID AND OPERATING ONLY IF IT HAS BEEN RECALLED ON THE INSURANCE CERTIFICATE AND THE RELATIVE PREMIUM HAS BEEN PAID

FOR THIS WARRANTY, THE EXCLUSIONS AND DELIVERY METHODS PROVIDED FOR THE TRAVEL ASSISTANCE POLICY SECTION APPLY, IF RELEVANT.

C.1 - Purpose of the insurance:

In the event of the Insured's medical stop, ordered by the competent authority for security reasons:

- upon arrival at the airport of the country of destination or transit;
- or during the course of the trip or stay for the purpose of carrying out health checks;
- or in case of declared quarantine with forced stay on the spot;

the Company will bear any major essential and indispensable costs for food and hotel accommodation incurred by the Insured for forced stay on site and for travel tickets to return.

Maximum: € 2,500.00 per insured and 25,000.00 per policy

If the medical detention concerns a minor, without an adult companion, this guarantee is intended to be provided in favor of an adult companion, even if not insured, with a sub-limit of Euro 1,000.00.

If, on the other hand, the medical detention concerns an adult, any accompanying person, who is not detained, is excluded from this coverage.

The Company reserves the right to ask the Insured for any refunds obtained from tourism service providers and / or carriers.

C.2 - Exclusions (in addition to common exclusions)

- a) willful misconduct or gross negligence of the Insured;
- b) trips undertaken to countries in which medical detention was already known;
- c) if the destination is to be or is declared to be under quarantine during the trip. This exclusion does not apply if the Insured or a travel companion is infected by the pathology for which the quarantine has been declared;
- d) costs not covered by the guarantee;
- e) losses following the insured's waiver of the continuation / re-protection of the interrupted trip offered by the travel organizer.

3 - IN CASE OF CALL FOR MEDICAL EXPENSES DURING TRAVELLING

The Insured, or someone acting on his behalf, must immediately contact the Operations Centre, providing personal details of the Insured, the policy number and the type of intervention required, as well as indicating:

- **Medical Expenses during Travelling** resulting in hospitalisation
- Temporary telephone number;
- Hospital details (*Name and telephone number, ward where admitted, name of the doctor who took care of the patient*);
- Address of any family members / travelling with the Insured.

4 - IN CASE OF A REFUND REQUEST

For each refund request, the Insured or the person acting on his behalf, must report the accident to the Company within 30 days after his return or, for the Travel Cancellation guarantee, within 5 days from the date of the event, providing the Company, regardless of the way in which the complaint was made (i.e. in writing on the site) the set of documents relevant to the management of the claim, in particular:

- Policy number;
- Receipt of payment of the trip with the route;
- Personal details and tax code of the recipient of the payment, pursuant to Law No. 248 of 4 August 2006;
- Name and address of the Bank, IBAN, SWIFT code in the case of a foreign bank account;
- Name of account holder if different from the owner of the file;
- Place, date and time of the event and the circumstances and the causes that have determined it.

Also providing:

- Refund of medical expenses:

- medical records written on site (medical records, minutes of first aid, medical certificate stating the diagnosis) and related original receipts of incurred medical expenses.

- Cover Stay

The insured must send the following documentation:

- place, day and time of the event as well as the circumstances and causes that determined it;
- documentation certifying the medical detention ordered by the Authority;
- travel contract;
- any re-routing travel document showing the higher cost paid or a new travel document issued;
- refund document for airport taxes, or alternatively declaration of non-flown, issued by the air carrier;
- bills for expenses related to forced residence (hotel expenses, meals);
- documentation certifying any refunds recognized by service providers;

All documents relating to expenses (invoices, travel documents, etc.) must be in the name of the Insured.

5 - IMPORTANT REFERENCES

MEDICAL EXPENSES WHILE TRAVELLING
OPERATIONS CENTRE 24/7
Phone + 39 06 42115820

REFUND REQUESTS

Claims must be notified as follows:

The Insured shall notify the claim via the website www.tripy.net, enter "Denuncia sinistro" and follow the instructions at "Istruzioni per la denuncia".

Alternatively, the Insured can download the claim notification form at "Modulo di denuncia" from the site www.tripy.net and send it together with all the useful documentation to:

Inter Partner Assistance S.A. - Travel - Ufficio Sinistri
Casella Postale 20175
Via Eroi di Cefalonia