

## Supplementary Insurance Conditions (SIC)

# myTravel AXA travel insurance coverage for medical emergencies abroad

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### Part A General provisions of the insurance contract

#### A1 What is the purpose of the insurance?

This insurance provides comprehensive protection in the event of illness or accident occurring while traveling outside Switzerland. It covers the cost of unexpected, unplanned medical expenses plus the cost of rescue, transportation, search operations, and repatriation, unless these are already covered by other insurance companies.

#### A2 What does the insurance cover?

If while traveling abroad an insured falls seriously ill, has an accident, or experiences a medically certified unexpected deterioration in a chronic illness, we provide the following benefits:

#### A2.1 Medical expenses:

Assumption of the cost of emergency, scientifically recognized, and appropriate outpatient and inpatient treatment

#### A2.2 Personal Assistance:

- Assumption of the costs of rescue missions and transportation deemed to be medically necessary;
- Assumption of the costs of search missions undertaken with the aim of rescue or recovery of the insured, up to CHF 20,000 per insured;
- Assumption of the repatriation costs to the Swiss place of residence or hospital if deemed to be medically necessary;
- Assumption of patient contributions (excess, deductible) incurred in a Member State of the European Union (EU) or the European Free Trade Association (EFTA) in application of social security legislation;
- Assumption of the cost of repatriating the insured's body in the event of his or her death;
- Where the insured is kept in hospital abroad for longer than seven days, travel expenses incurred by someone related or close to him or her for the purpose of a visit will be paid to the following extent:
  - the authenticated costs of the inward and outward journeys, at most the costs of a flight in the economy class;
  - the authenticated costs of accommodation and meals, up to CHF 1,000 per loss event;
- Additional travel expenses incurred for an early return journey up to a maximum of CHF 500 per insured for the following events:
  - if a traveling companion related or close to this insured is repatriated due to illness or accident;
  - if someone related or close to this insured becomes seriously ill, is seriously injured, or dies;
  - if the property of this insured at their place of residence in Switzerland is badly affected due to burglary or damage from fire, water, or natural forces;

- if a strike, an epidemic, or the failure of a public means of transportation makes it impossible to continue a travel program within 72 hours; additional costs of rerouting and delays are not covered;
- if the deputy at the insured's place of work becomes seriously ill, suffers a serious accident, or dies, and the presence of this insured at work is vital;
- Rebooking fees for the return flight, if an insured is unable to take the return flight for medical reasons due to an illness or accident covered by this insurance. If it is not possible to rebook the flight, we will assume the cost of the return flight in economy class. These benefits will only be provided upon presentation of the expired return ticket.

Related or close persons within the meaning of this paragraph are defined as the spouse, registered partner, children, parents, or cohabiting partner of the insured.

#### A2.3 This list is exhaustive

A2.4 By way of an amendment to C1.3 GIC, the insurance benefits provided by AXA under the present insurance are limited to CHF 1 million per calendar year.

#### A3 What does the insurance not cover?

- **A3.1** By way of an amendment to A4.1 GIC, we do not assume any costs for outpatient or inpatient treatment in Switzerland or in connection with travel within Switzerland.
- **A3.2** This insurance does not cover the cost of planned outpatient or inpatient treatment.
- A3.3 In all other respects, C3 GIC applies.

#### A4 What are the obligations of the insured?

- A4.1 An insured is obligated to inform us or our emergency hotline about the treatment without delay. We may reduce our benefits or refuse to assume the costs if we or our emergency hotline were not informed without delay. E3.2 GIC is reserved.
- A4.2 Our emergency hotline organizes and coordinates the provision of services locally. Our emergency hotline is available round the clock, seven days a week.
- **A4.3** Our emergency hotline issues a confirmation of coverage within the limits of the existing insurance coverage if an insured needs inpatient or outpatient treatment during their trip abroad.

#### A5 What else needs to be considered in connection with the insurance coverage?

- **A5.1** We pay the benefits set out in these SIC for foreign travel during the period of coverage. By way of an amendment to A4.2 GIC, insurance cover is provided for a foreign trip lasting for a maximum of two years, provided that this insured has a Swiss place of residence (see G2 GIC).
- **A5.2** In amendment of C6.2 GIC, the benefits pursuant to these Supplementary Conditions are granted subsequent to benefits from other private insurance policies, whereby the costs will only be reimbursed once in each case. Coverage is limited to that portion of the benefits that exceeds the benefits granted by the other insurers. If the other insurers similarly pay their benefits on a subsidiary basis only, the legislation on double insurance applies.
- **A5.3** Our benefits are based on the actual costs. We assume no more than the costs that actually arise and can be demonstrated, unless in individual cases another arrangement has been expressly agreed. If receipts are submitted in a foreign language, we may require an officially authenticated translation into one of the national languages of Switzerland or into English, at the expense of the insured. This insurance is indemnity insurance.

### A6 How long does the insurance contract remain valid?

- A6.1 The period of coverage is specified in the insurance policy and, by way of an amendment to G1.2 GIC, may be less than one year.
- **A6.2** If the period of coverage is less than one year, the insurance expires at the end of the agreed period, unless otherwise agreed before expiry.
- A6.3 If the insurance has a term of at least one year, the contract will be tacitly extended by a further year unless terminated on expiry. The insurance may be terminated by giving one month's notice to the end of the period of coverage, but not before the end of the minimum contract period.
- **A6.4** In all other respects, the provisions on duration and termination pursuant to sections G1, G2, and G5.2 to G6.2 GIC apply. Notice of termination must be in writing or in another form of text (email, for example).

#### A7 What persons are insured?

A7.1 Under this insurance policy, the policyholder may be insured alone or jointly with other persons. A7.2 The insurance covers all persons named in the policy who live with the policyholder in a shared household. The policyholder may request the inclusion of additional persons at any time; A5.2 GIC applies mutatis mutandis. A7.3 If insureds move out of the policyholder's shared household, the insurance coverage for these persons will automatically lapse. Such changes must be reported to us without delay. If the number of insureds changes, the premiums will be A7.4 adjusted accordingly. A7.5 A shared household exists when the domicile (as per the confirmation of registration/confirmation of domicile) and the address of the insureds and of the policyholder are identical.

## A8 Are age groups used for determining the premiums?

Age groups are not used for determining the premiums. The number of persons insured is relevant for the premium. There are three categories:

- Single-person household
- Two-person household
- Multi-person household



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