



Personal Accident and Travel Insurance Group Policy

This group policy is evidence of the contract between the **group policyholder** and **us**, AIG Europe Limited.

We agree to give the insurance cover set out in this group policy document. **We** will provide cover only to those people who are shown as being **insured persons** and who have been included in the **insurance arrangement** and as long as the required premium has been paid and **we** have accepted it.

This group policy, the **schedule** and any attached memoranda or endorsements, show details of the cover and the terms and conditions which apply. The **group policyholder** should read these documents to make sure that they understand the cover provided and the limitations which apply.

It is the **group policyholder's** responsibility to ensure that the **policyholders** are given full details of this group insurance and that the **policyholders** agree to observe, fulfil and comply with the terms and conditions of this group policy.

If there are any elements of the cover that require clarification or do not meet the needs of the **group policyholder**, the **group policyholder** should in the first instance raise these with their insurance intermediary.

AIG Europe Limited

This insurance is underwritten by AIG Europe Limited which is authorised and regulated by the Financial Services Authority (FSA number 202628). This information can be checked by visiting the FSA website (www.fsa.gov.uk).

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Claims procedure

We should be notified as soon as reasonably practicable after the event that a claim is to be made. **We** may reject the claim if it is made so long after the event that it makes it difficult or impossible for **us** to investigate the claim fully, or may result in the **policyholder** or **insured person** not receiving the full amount claimed for, if the amount claimed is increased as a result of the delay. Claims are to be notified to:

For a claim under Section B5 - Personal Property or Section B6 – Money, please contact:

Concierge Claims Service

Telephone: +44 (0) 207 359 3433

Email: lifelinebaggageclaims@aig.com

For all other claims contact:

The Accident & Health Claims Department,

AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG.

Telephone: +44 (0) 845 602 9429

Facsimile: +44 (0) 20 8253 7569

Email: claimsuk@aig.com

We will ask the claimant to complete a claim form and to provide at their own expense all reasonable and necessary evidence required by **us** to support a claim. If the information supplied is insufficient, **we** will identify the further information which is required. This evidence may include written confirmation from a **group policyholder** that the **insured person** was insured at the time of the event and, if applicable, that **they** have paid the premium for the period of **their** inclusion under this group policy. If **we** do not receive the information **we** need, **we** may reject the claim.

We may ask the **insured person** to have one or more medical examinations. If **we** do, **we** will pay the cost of the examinations and the reasonable travelling expenses of the **insured person** (and **their parent** if the **insured person** is a **child** under 18 years of age), as long as **we** agree beforehand. If the **insured person** fails to go to a medical examination without a good reason, **we** may reject the claim.

The **insured person** must give **us** permission to obtain any medical reports or records needed from any **medical practitioner** who has treated the **insured person** otherwise **we** may not pay any claim.

If the **insured person** has an existing physical impairment or medical condition, **we** may also ask an independent medical consultant to assess:

- a. whether the **insured person's** existing physical impairment or medical condition has contributed to the **bodily injury** or expense for which **they** are claiming; or
- b. whether this new **bodily injury** makes the **insured person's** existing physical impairment or medical condition worse.

In either case, **we** will ask the consultant to assess the difference between the **insured person's** existing physical impairment or medical condition before and after the **accident**. Any payment made by **us** will be based on this difference and will be expressed as a percentage of the appropriate **sum insured** shown on the **schedule**.

If an **insured person** dies, **we** have the right to ask for a post-mortem examination at **our** expense. If this is refused, **we** may not pay the claim.

If the **insured person** (or the person claiming on the **insured person's** behalf if **they** die) does not comply with any reasonable request by **us** under this claims procedure **we** may not pay the claim.

We will deal with covered **death** claims as follows:

- a. If an **insured person** is 18 years of age or over **we** will pay the **sum insured** to the executor or personal representative of the deceased **insured person's** estate.
- b. If an **insured person** is under 18 years of age **we** will pay the **sum insured** to a **parent** of the deceased **insured person**.

We will deal with all covered claims, other than **death** claims, as follows:

- a. If an **insured person** is 18 years of age or over **we** will pay the **sum insured** to the **insured person**.
- b. If an **insured person** is under 18 years of age **we** will pay the **sum insured** to a **parent** of the **insured person** for the benefit of the **insured person**.

The receipt of the payment will be a full discharge of all liability by **us** in respect of the claim.

Policy definitions

We use words and expressions in this group policy which have a specific meaning and sometimes those meanings are unique to this group policy. These words and their meaning in this policy, are shown below and each time one of them is used they have this specific meaning wherever they appear in this group policy document (in all sections), the policy summary and the **schedule** and any endorsements or memoranda attached to the **schedule** and are shown in bold type.

Accident

A sudden, unexpected and specific event, external to the body, which occurs at an identifiable time and place.

Bodily injury

Identifiable physical injury to an **insured person's** body which is caused directly and solely by an **accident**, is not intentionally self-inflicted and does not result from sickness or disease.

Channel Islands

Jersey, Guernsey, Alderney and Sark, Herm, Jethou, Brecqhou and Lihou.

Child

A person who is under 18 years of age or 23 years of age if in full-time education.

Dental practitioner

A suitably qualified dental practitioner registered by the General Dental Council in the **United Kingdom** other than:

- a. an **insured person**;
- b. a relative of an **insured person**; or
- c. an **employee**.

Director

A person holding the position of director with a **group policyholder** but excluding non-executive directors unless otherwise agreed in writing with **us**.

Employee

Any person under a contract of service or apprenticeship with a **group policyholder**.

Group policyholder

A company, organisation or individual named in the **schedule**.

Hijack

Unlawful seizure or taking control of an aircraft or conveyance in which an **insured person** is travelling as a passenger.

Hospital

An institution which has accommodation for **in-patients** and facilities for diagnosis, surgery and treatment. It does not include a long term nursing home, a rehabilitation centre, an old people's or convalescence home or an extended-care facility.

Hospitalisation

Admission to a **hospital** as an **in-patient** as a result of **bodily injury** (within the **United Kingdom**) or **bodily injury** or **illness** (outside the **United Kingdom**) for a continuous period of 24 hours or more on the advice of and under the constant supervision of a **medical practitioner**.

Illness

Sickness or disease of an **insured person** which manifests itself during the **period of insurance** and results in the death or **disablement** of an **insured person**.

In-patient

An **insured person** who has gone through the full admission procedure and for whom a clinical case record has been opened and whose admission is necessary for the medical care and treatment of **bodily injury** (within the **United Kingdom**) or **bodily injury** or **illness** (outside the **United Kingdom**) and not merely for any form of nursing, convalescence, rehabilitation, rest or extended care.

Insurance arrangement

The process by which an **insured person** is added to this insurance operated by a **group policyholder**.

Insured person

The person shown on the **schedule**.

Medical consultant

A **medical practitioner** who either holds a substantive NHS Consultant Post or holds a current Certificate of Completion of Specialist Training (CCST), or is on the Specialist Register held by the General Medical Council (GMC) and holds a specialist accreditation issued by the General Medical Council in accordance with EC Medical Directives (or foreign equivalents). In respect of dental treatment only, a dental practitioner who is registered with the British Dental Association (or foreign equivalent) and who either holds an NHS Consultant post (or foreign equivalent) or who specialises in a specific branch of dentistry.

Medical practitioner

A suitably qualified medical practitioner other than:

- a. an **insured person**,
- b. a relative of an **insured person**; or
- c. an **employee**

who is currently registered with the General Medical Council in the **United Kingdom** (or foreign equivalent) to practice medicine.

Operative time

The period of time during which a **group policyholder** or an **insured person** is covered by this policy, as outlined on the **schedule**.

Parent

A person with parental responsibility including a legal guardian acting in that capacity.

Participating establishment

A school or other establishment within the jurisdiction of the Council shown as a **group policyholder** on the **schedule** and which has been declared by the Council to **us** as being insured by this policy.

Partner

A person who is the **insured person's** husband or wife, civil partner, fiancé or fiancée, boyfriend or girlfriend and who permanently lives at the same address as the **insured person**.

Period of insurance

The period shown on the **schedule** commencing from the **start date of cover** shown until the 'To' date shown on the **schedule**. (Please see the section 'Start and finish of cover for an insured person' relating to the period of insurance for an **insured person**).

Permanent country of residence

A country in which an **insured person** has resided, or intends to reside for a period of 12 months or longer, for reasons of employment or self-employment.

Policyholder

A person described as an **insured person** or, in respect of **insured persons** under the age of 18 years, the **parent** of such **insured person**.

Pupil

A **child** who is attending a **participating establishment**.

Schedule

The document showing details of the cover purchased and which should be read with this policy.

Scheduled aircraft

An aircraft which flies from an internationally recognised airport on a published schedule and which has more than 18 seats.

Second Opinion

Second Opinion Telemedicine Network (UK) Limited.

Start date of cover

The date on which cover commences for the **group policyholder** as shown on the **schedule**.

Sum insured

(Or limit of liability in respect of Section B9 Personal Liability) the maximum amount, or assessed percentage thereof, **we** can pay, subject to the aggregate limit(s) as specified in Section A Personal Accident, Section B3 - Search and Rescue, Section B4 – Cancellation, Curtailment, Disruption, Replacement, Travel Delay & Missed Departure and Section B6 – Money.

They, their or them

The **insured person**.

Trip

Any trip described on the **schedule** undertaken by an **insured person** which commences during the **period of insurance**.

Where a **trip** continues beyond the expiry of the **period of insurance** such period is extended for up to a maximum of twelve months or until the completion of the **trip**, whichever is sooner.

United Kingdom

England, Scotland, Wales, Northern Ireland, the Isle of Man and the **Channel Islands**.

War

Military action, either between nations or resulting from civil war or revolution.

We, us or our

AIG Europe Limited.

Section A – Personal Accident

If an **insured person** sustains **bodily injury** during the **period of insurance** and the **operative time** as defined on the **schedule**, and which within two years (or 30 days in respect of **dental treatment**) solely and independently of any other cause results in their **death, disablement** or **hospitalisation** or the incurring of **accident medical expenses** or **dental treatment**, we will pay up to the **sum insured** shown in the Table of Benefits.

Definitions applicable to Section A

Accident medical expenses

The cost of medical, surgical or other remedial attention or treatment given or prescribed by a **medical practitioner** and all **hospital**, nursing home and ambulance charges connected with a valid claim under Section A items 1- 4 in the Table of Benefits.

Any one accident limit

The maximum amount we will pay in the aggregate under this and any other policy of Personal Accident Insurance issued by us in the names of all **group policyholders** in respect of all **insured persons** suffering **bodily injury** in the same **accident** or series of **accidents** contributed to, caused by, or consequent upon the same original cause, event, or circumstance.

Death

A fatal **accident**.

Dental treatment

Treatment received in a dental surgery or in an Accident and Emergency department of a **hospital** following an external oral impact resulting in accidental damage to sound and natural teeth (including loss or damage to any prostheses while in the mouth) when such treatment is given by a **medical practitioner** or **dental practitioner**.

Disablement

Loss of hearing, loss of limb, loss of sight, loss of speech and **permanent partial disablement**.

Foodstuff

Food or drink including any foreign body in such food and drink.

Gradually operating cause

A cause that is the result of a series of events, which occur or develop over time and, which, cannot be attributable to a single **accident**.

Loss of hearing

Total and permanent loss of hearing resulting in the **insured person** being classified as **profoundly deaf**.

Loss of limb

In the case of a leg:

- a. loss by permanent physical severance at or above the ankle; or
- b. permanent and total loss of use of a complete foot or leg.

In the case of an arm:

- a. loss by permanent physical severance of the four fingers at or above the metacarpophalangeal joints (where the fingers join the palm of the hand); or
- b. permanent and total loss of use of a complete arm or hand.

Loss of sight

Permanent and total loss of sight:

- a. in both eyes if the **insured person's** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist.
- b. in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (seeing at 3 feet what the **insured person** should see at 60 feet).

Loss of speech

Total and permanent loss of the ability to speak.

Non-scheduled aircraft accumulation limit

The maximum amount **we** will pay in the aggregate under this and any other policy of Personal Accident Insurance issued by **us** in the names of all **group policyholders** in respect of all **insured persons** suffering **bodily injury** in the same aircraft accident (this not being a **scheduled aircraft** accident) or series of aircraft accidents contributed to, caused by, or consequent upon the same original cause, event or circumstance.

Permanent partial disablement

A permanent disability benefit payable as a percentage of the **sum insured** under Section A item 4, shown in the Table of Benefits, depending on the degree of permanent disability. The benefits payable for specific disabilities are:

Permanent severance or permanent total loss of use of:

- | | | | |
|----|--|-----|-----|
| a. | back or spine (excluding cervical) without cord involvement | 40% | |
| b. | neck or cervical spine without cord involvement | 30% | |
| c. | shoulder, elbow or wrist | 25% | |
| d. | hip, knee or ankle | | 20% |
| e. | foot below the level of the ankle (talotibular joint) | 50% | |
| f. | thumb | 20% | |
| g. | one forefinger or big toe | 15% | |
| h. | any other finger | 10% | |
| i. | any other toe | 5% | |
| j. | Permanent disability which is not provided for under Section A items 2, 3a, 3b, 3c(i) & (ii) of the Table of Benefits or any of the benefits above, up to a maximum of 100% of Section A item 4. | | |

Any **permanent partial disablement** payable under item j. above will be assessed by considering the severity of the disablement in conjunction with the stated percentages for the specific types of disablement mentioned above. The **insured person's** occupation will not be a relevant factor.

When more than one form of disablement results from one **accident** the percentages from each are added together, but **we** will not pay more than 100% of the **sum insured** under Section A item 4.

If a claim is payable for loss of or loss of use of a whole part of the body, a claim for any component of that part cannot also be made.

Profoundly deaf

The inability to hear sounds when tested by a qualified audiologist quieter than 90 decibels across frequencies between 500Hz and 3,000 Hz.

Scheduled aircraft accumulation limit

The maximum amount **we** will pay in the aggregate under this and any other policy of Personal Accident Insurance issued by **us** in the names of all **group policyholders** in respect of all **insured person's** suffering **bodily injury** in the same scheduled aircraft accident or series of scheduled aircraft accidents contributed to, caused by, or consequent upon the same original cause, event or circumstance.

Condition applicable to Section A

If a claim exceeds the **scheduled aircraft accumulation limit**, the **non-scheduled aircraft accumulation limit** or the **any one accident limit** shown in the **schedule**, **we** will pay an amount which is proportionately reduced until the total does not exceed the limit shown on the **schedule**.

Provisions applicable to Section A

1. If an **insured person** disappears and after a suitable period of time it is reasonable to believe that death resulted from **bodily injury**, **we** will pay the **sum insured** as shown in the Table of Benefits providing that the **insured person's** personal representative or executor signs an agreement that if it later transpires that the **insured person** has not died, any amount paid will be refunded to **us**.
2. **We** agree that **death** or **disablement** resulting from exposure to severe weather conditions will be considered to have been caused by **bodily injury**.
3. The **sum insured** under Section A item 1 will be limited to £10,000 for an **insured person** who is under 18 years of age.
4. If an **insured person** is not covered under Section A item 1 **we** will not pay for Section A items 2 - 4 until at least 13 weeks after the date of the **accident** and **we** will only then pay if the **insured person** has not in the meantime died as a result of the **accident**.
5. If an **insured person** is covered under Section A item 1 but the benefit payable is less than for items 2 - 4, **we** will not pay more than the amount of the **death** benefit if **bodily injury** does not immediately result in **death** until at least 13 weeks after the date of the **accident**.
6. The **sum insured** for **hospitalisation**, Section A item 5, is payable up to a maximum of 182 days. **We** will only pay one amount under Section A or Section B1.1.
7. **Accident medical expenses** will not exceed 15% of any amount paid under items 1- 4 up to a maximum of £15,000 per **insured person**.

What is not covered under Section A

Section A does not cover:

1. **Bodily injury, death, disablement, hospitalisation** or the incurring of **accident medical expenses** or **dental treatment** expenses caused by:
 - a. attempted suicide or intentional self-injury;
 - b. flying as a pilot;
 - c. sickness or disease (not resulting from **bodily injury**);
 - d. a **gradually operating cause**, chronic fatigue syndrome, post-traumatic stress disorder, or other anxiety disorder, any mental disorder or any disease of the nervous system.
2. Death caused by suicide.
3. **Dental treatment** which:
 - a. is as a result of any **foodstuff** while the **insured person** was consuming it; or
 - b. is not apparent within one week of the **accident** which caused the dental injury; or
 - c. is the result of ordinary deterioration, deliberate damage or wear and tear; or
 - d. is not claimed for within 30 days of the **accident** which caused the dental injury; or
 - e. is incurred more than 12 months after the date of the **accident** which caused the dental injury.
4. **Dental treatment** where the replacement or repair of bridgework, artificial teeth, crown or dentures is not of a similar type or quality to that lost or damaged by the **accident**.
5. **Dental treatment** using precious metals other than where the replacement or repair of bridgework, artificial teeth, crown or dentures is not of a similar type or quality to that lost or damaged by the **accident**.

6. Any **pupil** after expiry of the **period of insurance** during which they reach 18 years of age or 23 years of age if in full-time education.
7. Any **insured person**, other than a **pupil**, after the expiry of the **period of insurance** during which **they** reach 75 years of age.

Section B1 – Medical

Section B1.1 – Medical, Hospitalisation and Emergency Travel Expenses

If an **insured person** is injured or becomes ill during the **operative time** and the **period of insurance** whilst on a **trip** outside the **United Kingdom**, we will reimburse the **group policyholder** or the **policyholder** for **medical expenses**, **emergency travel expenses** and **hospitalisation** expenses reasonably and necessarily incurred as a direct result, for up to two years from the date of injury or **illness**, up to the **sum insured** shown in the Table of Benefits A.

Definitions applicable to Section B1.1

Emergency travel expenses

The additional transport and accommodation expenses (less any possible recovery or saving) incurred by an **insured person** and up to two persons who need to travel to, remain with or escort an **insured person**.

Medical expenses

The costs incurred outside the **United Kingdom** for medical, surgical or other remedial attention or treatment given or prescribed by a **medical practitioner** and all **hospital**, nursing home and ambulance charges. Dental expenses are covered if incurred in an emergency or if they are the result of an injury.

Condition applicable to Section B1.1

The **group policyholder** or **insured person** must contact Lifeline Plus Assist as soon as possible if injury or **illness** results in the need for **in-patient hospital** treatment.

Emergency Assistance Helpline: **+44 (0)1273 552922 (24 Hour)**

Section B1.2 – Rescue Expenses

If an **insured person** is injured or becomes ill during the **operative time** and the **period of insurance** whilst on a **trip**, we will reimburse the **group policyholder** or **policyholder** for **rescue expenses** reasonably and necessarily incurred as a direct result, for up to two years from the date of injury or **illness**.

Definition applicable to Section B1.2

Rescue expenses

The cost of transportation by any suitable means to an appropriate medical facility or to an **insured person's** home in the **United Kingdom** as recommended by **our** appointed medical advisor in conjunction with the local attending **medical practitioner**. In the event of **death** the costs of transportation of the body or ashes and the **insured person's** personal effects back to the **United Kingdom** are covered. The costs of funeral expenses outside the **United Kingdom** are covered up to a maximum of £5,000.

Condition applicable to Section B1.2

The **group policyholder** or **insured person** must contact Lifeline Plus Assist as soon as possible if injury or **illness** results in the need for **in-patient hospital** treatment or the possible need for emergency rescue otherwise the costs may not be reimbursed.

Emergency Assistance Helpline: **+44 (0)1273 552922 (24 Hour)**

Section B1.3 – On-going Medical Treatment

In the event of a valid claim under Section B1.2 **we** will pay the costs of **hospital in-patient** medical charges necessarily incurred within the three months immediately following the date of return of the **insured person** to the **United Kingdom** up to the **sum insured** shown in the Table of Benefits A.

What is not covered under Section B1

This Section does not provide cover:

1. Where an **insured person** is travelling against the advice of a **medical practitioner**.
2. Where the purpose of the **trip** is to receive medical treatment or advice.
3. Any costs relating to pregnancy or childbirth, if the **insured person** is more than 26 weeks pregnant at the start of or during the **trip**.
4. As a result of drug or alcohol abuse by an **insured person**.
5. As a result of suicide, attempted suicide or self-inflicted injury.
6. For **hospitalisation** of more than 182 days. **We** will only pay one amount under Section A or Section B1.1.

Section B2 – Assistance

The network of Lifeline Plus Assist offices are available whenever an **insured person** travels on a **trip**. If Medical Assistance is required at any time the number to call is:

Emergency Assistance Helpline: **+44 (0)1273 552922 (24 Hour)**

The Medical Assistance services provided are:

24 hour Service

Emergency telephone lines manned 24 hours a day, 365 days a year by multi-lingual assistance coordinators, experienced in the procedures of hospitals and clinics worldwide.

Medical Staff

A highly qualified team of medical consultants and nursing staff, on hand at any time to ensure that the most appropriate medical treatment is provided.

Direct Billing

Where appropriate, Lifeline Plus Assist will arrange direct billing with hospitals and clinics worldwide, relieving an **insured person** of the need to use **their** own cash or credit card.

Air Ambulance

Repatriation by air ambulance or scheduled airline depending on the circumstances of the case and if necessary, with a fully equipped medical team in attendance. On return, suitable transportation will take an **insured person** to **hospital** or home address whenever necessary.

Medical Assistance is only one aspect of the service. Lifeline Plus Assist also provides the following:

Travel Advice

Helpful and relevant information to the traveller providing valuable assistance in preparation for the **trip**, including currency and banking regulations, visa details, health requirements and reciprocal agreements.

Medical Referral and Legal Referral

To a suitable **hospital**, clinic or dentist for minor treatment. To an Embassy, Consulate or other source if legal consultation is needed, including an English speaking lawyer.

Emergency Medical Supplies

Help locate and send drugs, blood or medical equipment if unavailable locally.

Emergency Message Relay

Passing on messages to family and business associates in an emergency.

Emergency Travel

Liaise with an **insured person's** General Practitioner, hospital or relatives and to make arrangements for relatives to visit an **insured person** hospitalised or ill abroad, on the recommendation of the Lifeline Plus Assist medical officers and within the constraints of the policy.

Lost Ticket & Baggage Location

Help with replacement of lost or stolen tickets, passport or travel documents and help with locating lost baggage. If required, Lifeline Plus Assist will help locate and dispatch contact lenses and glasses.

Emergency Cash Advance

Help with replacement of cash which has been lost or stolen overseas.

Port/Airport Assistance

Liaise with carrier and advise if an **insured person** has been delayed on the way to departure point and if necessary make onward travel arrangements.

Using Lifeline Plus Assist

When Lifeline Plus Assist is contacted for assistance, the following information should be provided:

1. The **insured person's** name and the group policy number.
2. The telephone, facsimile or telex number where the **insured person** can be reached.
3. The **insured person's** address abroad.
4. The nature of the emergency.
5. The name of the **insured person's** employer, company or organisation.

In addition, the **group policyholder**, **policyholder** or **insured person** has access to Lifeline Plus Web Information Service via: www.mylifeline.co.uk

Valuable medical, travel and safety information can be obtained about travel destinations via Online Country Guides. Personal medical details can be uploaded to the site before travelling for faster reference in an emergency.

Password access is via the Group Policy Number

Section B3 – Search and Rescue

If an **insured person**, whilst on a **trip** outside the **United Kingdom**, during the **operative time** and the **period of insurance**, is reported as missing and it is necessary for the rescue or police authorities to instigate a search and rescue operation, provided that:

- a. it is known or believed that **they** may have sustained **bodily injury** or suffered **illness**, or
- b. safety conditions are such that it becomes necessary to do so in order to prevent **bodily injury** or **illness**,

we will reimburse the **group policyholder** for necessary and reasonable costs incurred by Lifeline Plus Assist and/or levied by recognised rescue or police authorities in searching for such **insured person** and for bringing **them** to a place of safety, up to £25,000 for each **insured person**, but not exceeding £100,000 overall for all **insured persons** arising out of any one event and not exceeding £250,000 in total during any one **period of insurance**.

Conditions applicable to Section B3

1. The **insured person** must comply at all times with local safety advice and adhere to recommendations prevalent at the time.
2. The **insured person** must not knowingly endanger either **their** own life or the life of any other **insured person** or engage in activities where **their** experience or skill levels fall below those reasonably required for participating in such activities.
3. The **group policyholder** or **insured person** must make arrangements for search and rescue only with the involvement and/or agreement of Lifeline Plus Assist and Lifeline Plus Assist must be notified as soon as possible.
4. Expenses are only payable for the **insured person's** proportion of the search and rescue operation.
5. Costs will only be covered up to the point where the **insured person** is recovered or where authorities advise that continuing the search is no longer viable.
6. A written statement from the appropriate rescue authorities involved in the search and/or rescue must be obtained and provided to **us** in the event of a claim.

Section B4 – Cancellation, Curtailment, Disruption, Replacement, Travel Delay & Missed Departure

Cancellation, Curtailment & Disruption

We will indemnify the **policyholder** up to the **sum insured** in the Table of Benefits A if a **trip** occurring during the **operative time** and the **period of insurance** has to be cancelled, cut short or altered as a direct result of any cause outside the control of the **group policyholder** or the **insured person**, other than a circumstance specifically mentioned in 'What is not covered under Section B4'.

Where the **trip** has to be cancelled prior to departure we will pay for all deposits and advance payments in respect of transport and accommodation costs up to the **sum insured** shown in Table of Benefits A for any one **trip** but not exceeding £50,000 overall for all **insured persons**

- a. arising out of any one **trip**, and/or
- b. whilst travelling to any one event which occurs during the **operative time**.

Where the **trip** has to be cut short following departure we will pay for expenses which:

- a. have been paid or will be payable, or
- b. become payable under contract, or
- c. cannot be recovered elsewhere.

When pre-booked travel arrangements in connection with a **trip** have to be altered following departure, we will reimburse the **policyholder** for the additional costs of travel and accommodation which are not recoverable elsewhere and are necessarily incurred to enable an **insured person** to continue the **trip** or return to the **United Kingdom**.

When, during a **trip**, an **insured person** as defined in Category B of the **schedule** (an **employee**) returns to the **United Kingdom** to accompany a **disruptive pupil**, we will indemnify:

- a. the **group policyholder** in respect of expenses incurred by the **employee** up to the **sum insured** shown in Table of Benefits A for any one **trip**; and
- b. 50% of the expenses incurred by the **group policyholder** or **policyholder** in respect of the **disruptive pupil** up to the **sum insured** shown in Table of Benefits A for any one **trip** unless such expenses are otherwise recoverable.

Replacement

Where an **insured person** as defined in Category B of the **schedule** (an **employee**):

1. has to accompany a **disruptive pupil** back to the **United Kingdom**, or
2. becomes ill or sustains injury during a **trip** outside the **United Kingdom** which in the opinion of a **medical practitioner** causes or is likely to cause total disablement from continuing the **trip** for a period in excess of seven days,

we will indemnify the **group policyholder** in respect of **replacement expenses** up to the **sum insured** shown in Table of Benefits A for any one **trip**.

Travel Delay

If the departure of the ship, aircraft or train on which an **insured person** is booked to travel in order to get to their planned destination at the commencement or completion of a **trip** is delayed due to strike, industrial action, adverse weather conditions or mechanical breakdown, we will pay £25 per hour in excess of 4 hours delay up to a maximum of £150 to the appropriate **insured person** or **policyholder**.

Missed Departure

If an **insured person** misses the international departure of the ship, aircraft or other conveyance in which **they** are booked to travel as a result of the failure of public transport due directly to strike, industrial action, adverse weather conditions or mechanical breakdown, we will indemnify the **group policyholder** or **policyholder** in respect of reasonable additional travel and accommodation expenses

up to the **sum insured** shown in Table of Benefits A in respect of any one **insured person** for any one event.

Definitions applicable to Section B4

Disruptive pupil

An **insured person** as defined in Category A of the **schedule** as a **pupil** who in the opinion of the group leader acting for the **group policyholder** is behaving in such a manner that they cannot reasonably be allowed to continue or complete the **trip**.

Replacement expenses

All reasonable costs incurred in transporting a replacement adult who is authorised by the **group policyholder** to complete the original **trip** provided that such costs will be limited to economy fare travel and other essential expenses in transportation of the replacement adult to the point at which the original **trip** was curtailed. The **trip** must be continued within three months of the original curtailment.

Extension applicable to Section B4

If a **director** or **employee** resigns or has their employment terminated more than 31 days prior to a pre-booked **trip**, we will reimburse the **group policyholder** for all deposits and advance payments in respect of transport and accommodation costs incurred due to the cancellation of the **trip**, less any expenses recoverable elsewhere.

What is not covered under Section B4

This Section does not provide cover if the **trip** is cancelled, cut short or altered as the result of:

1. an **insured person** or a **policyholder** on **their** behalf deciding not to travel or, if on a **trip**, deciding not to continue;
2. pregnancy or childbirth, if the **insured person** is more than 26 weeks pregnant at the start of or during the **trip**;
3. redundancy or resignation of an **insured person** or the termination of an **insured person's** contract of employment within 31 days of a pre-booked **trip**;
4. redundancy, resignation or the termination of employment of an **insured person**, once a **trip** has started;
5. the **group policyholder**, a **policyholder's** or an **insured person's** financial circumstances;
6. the default of any provider (or their agent) of transport or accommodation, acting for the **group policyholder** or an **insured person** or a **policyholder** acting on their behalf;
7. regulations made by any Public Authority or Government;
8. strike, labour dispute, mechanical breakdown or failure of the means of transport (other than disruption of road and rail services by avalanche snow or flood) except where the departure of a ship, aircraft or train on which the **insured person** is booked to travel is delayed by at least 24 hours unless the delay is due to a strike or industrial action which existed or the possibility of which existed and for which advance warning had been given before the date on which the **trip** was booked;
9. an **insured person** travelling or intending to travel against the advice of a **medical practitioner** or for the purpose of obtaining treatment;
10. any claim for cancellation following delay of a ship, aircraft or train; if
 - a. an **insured person** fails to check-in according to the itinerary supplied unless the failure was itself due to strike or industrial action; or
 - b. the delay is due to the withdrawal from service temporarily or permanently of any ship, aircraft or train on the orders or recommendation of any Port Authority, Rail Authority or the Civil Aviation Authority or any similar body in any country.

Section B5 – Personal Property

If an **insured person** loses, has stolen or damages **personal property** during a **trip** occurring during the **operative time** and the **period of insurance**, **we** will indemnify the **policyholder** for the cost of replacement or repair up to the **sum insured** in Table of Benefits A.

If the **insured person's personal property** is temporarily lost for more than four hours during a **trip**, **we** will reimburse up to £750 towards the cost of buying essential and reasonable replacement items. If the **personal property** which has been temporarily lost becomes permanently lost and this results in a claim, **we** will deduct the amount already paid for temporary loss from the final payment.

If during a **trip** an **insured person** loses or damages their passport, visa, **money** (as defined in Section B6 – Money), travel tickets or other essential travel documents, **we** will indemnify the **policyholder** for the reasonable and necessary additional travel and accommodation costs of replacing them, up to £1,000.

Definition applicable to Section B5

Personal property

Property owned by or in the custody or control of an **insured person**.

What is not covered under Section B5

This Section does not cover:

1. any item valued at more than £1,500;
2. loss due to chipping, scratching or breakage of glass, china or other fragile articles, unless due to fire, theft or accident to the conveyance in which they were being transported;
3. loss or damage due to:
 - a. moth, vermin, wear and tear, atmospheric or climatic conditions or gradual deterioration,
 - b. mechanical or electrical failure or breakdown,
 - c. any process of cleaning, dying, restoring, repairing or alteration;
4. loss of **money** (as defined in Section B6), bonds, negotiable instruments and securities of any kind;
5. loss or damage caused by delay, detention or confiscation by order of any Government or Public Authority;
6. loss of or damage to vehicles, their accessories or spare parts;
7. loss of or damage to **personal property** sent as freight or under an airway-bill or bill of lading.

Section B6 – Money

If an **insured person** loses or suffers theft of **money** or financial loss as the result of fraudulent use of credit, debit or charge cards during a **trip** occurring during the **operative time** and the **period of insurance**, we will indemnify the **policyholder** up to the **sum insured** in Table of Benefits A.

Definition applicable to Section B6

Money

Coins, bank or currency notes, bankers drafts, bills of exchange, letters of credit, luncheon vouchers, credit, debit or charge cards, phone cards, postal or money orders, traveller's cheques, travel tickets, petrol or other coupons with a monetary value or credit vouchers which belong to or are in the custody and control of an **insured person** and are intended for travel, meals, accommodation and personal expenditure only.

Extension applicable to Section B6

Foreign currency and traveller's cheques purchased for a **trip** are covered from the time of collection or 120 hours prior to departure on the **trip** whichever occurs last and up to 120 hours after completion of a **trip** or until deposited or cashed, whichever happens first.

What is not covered under Section B6

This Section does not cover:

1. any loss of cash in excess of £1,000 other than whilst held in the custody and control of any one party leader, being a responsible adult authorised by a **group policyholder**, when the limit is increased to £2,500;
2. loss or theft of a credit card, charge card or cash card unless the **insured person** has complied with all the terms and conditions under which the card was issued;
3. shortages due to confiscation or detention by Customs or other Officials, error, omission and depreciation in value.

Section B7 – Winter Sports

If during a **trip** to undertake **winter sports** during the **operative time** and the **period of insurance**, an **insured person's** skis are:

1. lost or broken as the result of an accident; or
2. lost or misplaced by an airline or other carrier on the outward **trip** from the **United Kingdom** and delayed for at least 12 hours after the arrival of the **insured person** at **their** destination

we will pay the **policyholder** up to £20 for each 24 hour period it is necessary for the **insured person** to hire replacement skis up to the **sum insured** shown in Table of Benefits A.

If during a **trip** to undertake **winter sports** an **insured person** is unable to use their ski pass as a result of an **accident** or **illness** or due to loss or theft of the ski pass, **we** will pay up to £75 for each full week or a proportionate amount for shorter or longer periods in respect of an unused ski pass and hire or tuition fees which **they** cannot otherwise recover up to the **sum insured** shown in Table of Benefits A.

If during a **trip** to undertake **winter sports** an **insured person** is unable to ski due to a lack of snow in the pre-booked resort and no alternative skiing being available, **we** will pay up to £20 for each 24 hour period **they** are unable to ski up to the **sum insured** shown in Table of Benefits A.

Definition applicable to Section B7

Winter sports

Skiing (including skiing outside the area of the normal compacted snow or ice slope i.e. off-piste but only whilst accompanied by a guide or ski instructor), tobogganing, snowboarding and ice skating (other than on an indoor rink), but excluding competitive winter sports (including, but not limited to ski or bob racing, mono skiing, ski jumping, ski boarding, ice hockey, or the use of bobsleighs or skeletons).

What is not covered under Section B7

Under this Section **we** will not be liable for:

1. loss due to delay, seizure, confiscation or detention by customs or any other authority;
2. loss not reported to the police and/or appropriate authorities within forty-eight hours of discovery and a report obtained.

Condition applicable to Section B7

The **insured person** will take all reasonable precautions for the safety of their ski pass.

Section B8 – Legal Expenses

We will pay to a **group policyholder** or the **policyholder** up to the **sum insured** in Table of Benefits A for **legal expenses** incurred by or on behalf of an **insured person** in pursuit of a claim for damages and/or compensation against a third party who has caused **bodily injury** to, or **death** or **illness** of, that **insured person** by an incident occurring during a **trip** outside the **United Kingdom** which occurs during the **operative time** and the **period of insurance**.

Definitions applicable to Section B8

Appointed representative

A solicitor, firm of solicitors, or any appropriately qualified person, firm or company appointed to act for an **insured person** in accordance with the terms of this insurance.

Legal expenses

- a. Any fees, expenses and other amounts reasonably incurred by the **appointed representative** in connection with any claim or legal proceedings, including costs and expenses of expert witnesses as well as those incurred by **us** in connection with any such claim or legal proceedings.
- b. Any costs payable by an **insured person** following an award of costs by any court or tribunal and any costs payable following an out-of-court settlement made in connection with any claim or legal proceedings.
- c. Any fees, expenses and other amounts reasonably incurred by the **appointed representative** in appealing or resisting an appeal against the judgement of a court, tribunal or arbitrator.

Claims settlement conditions applicable to Section B8

1. **Our** consent to pay **legal expenses** must firstly be obtained in writing. This consent will be given if an **insured person** can satisfy **us** that:
 - a. There are reasonable grounds for pursuing the legal proceedings and,
 - b. It is reasonable for **legal expenses** to be provided in a particular case. The decision to grant consent will take into account the opinion of an **insured person's appointed representative** as well as that of **our** own advisers. **We** may request, at an **insured person's** expense, an opinion of counsel as to the merits of the claim or legal proceedings. If the claim is admitted, an **insured person's** costs in obtaining this opinion will be covered by this insurance.
 - c. All claims or legal proceedings including any appeal against judgment resulting from the same original cause, event or circumstances, will be regarded as one claim.
 - d. If an **insured person** is successful in any action, any **legal expenses** provided by **us** will be reimbursed to **us**.

What is not covered under Section B8

This Section does not cover:

1. **legal expenses** incurred in the defence against any civil claim or legal proceedings made or brought against the **insured person**;
2. fines or other penalties imposed by a court of criminal jurisdiction;
3. **legal expenses** incurred in connection with any criminal act deliberately or intentionally committed by the **insured person**;
4. **legal expenses** incurred in pursuing any claim against any travel agent, tour operator, insurer or their agents;
5. claim or circumstance notified more than two years after the incident from which the cause of action arose;

6. **legal expenses** incurred by an **insured person** making a claim against a **group policyholder**, an **insured person**, **us** or any organisation or person involved in arranging this insurance.

Section B9 – Personal Liability

We will indemnify a **group policyholder** or the **policyholder** for any legal liability incurred by an **insured person** whilst on a **trip**, during the **operative time** and the **period of insurance**, as the result of:

- a. bodily injury, sickness or disease of any person; or
- b. accidental loss or damage to the property of any person

up to the **sum insured** in Table of Benefits A per person per **trip**.

Provisions applicable to Section B9

1. In addition, **we** will pay all costs and expenses incurred with **our** written consent in connection with the defence of any claims against an **insured person** which may be the subject of indemnity under this Section.
2. No admission of liability, offer, promise or payment will be made without **our** written consent.
3. **We** will, if it is considered necessary, take over and conduct the defence or settlement of any claim against an **insured person** and for that purpose can use the **insured person's** name. **We** can conduct the defence however it sees fit. **We** can prosecute at **our** own expense and for **our** own benefit, any claim for indemnity or damages against any other persons.
4. The **insured person** will give **us** full assistance in defending or prosecuting any claim and will provide **us** with any information and documents available to them.

What is not covered under Section B9

This Section does not cover liability which is the result of:

1. bodily injury to, or sickness or disease of, any person who is under a contract of employment, service or apprenticeship with a **group policyholder** or an **insured person** when injury results from their employment by the **group policyholder** or **insured person**;
2. liability arising directly or indirectly by or through, or in connection with, any mechanically propelled vehicle, aircraft or watercraft;
3. liability arising directly or indirectly by or through or in connection with:
 - a. the ownership, possession or occupation of land, buildings, immobile property or caravans other than occupying a temporary residence;
 - b. any wilful, malicious or unlawful act,
 - c. the carrying on of any trade, business or profession;
 - d. any racing activity;
4. accidental loss or damage to property belonging to, held in trust by or in the custody or control of a **group policyholder** or an **insured person** or any of their employees or any member of an **insured person's** family or household;
5. liability attaching to a **group policyholder** or an **insured person** under an express term of any contract, unless liability would attach to any **insured person** whether the express term existed or not;
6. liability for which payment should be more specifically claimed under any other contract of insurance in the name of a **group policyholder** or an **insured person**;
7. any claim where an **insured person** is insane or which results from an **insured person** being under the influence of or affected by drugs (other than drugs taken under the direction of a medical practitioner), alcohol or solvents;
8. any claim resulting from venereal disease, sexually transmitted diseases, Acquired Immune Deficiency Syndrome (AIDS) or any AIDS related condition.

Section B10 – Hijack, Kidnap, Kidnap for Ransom Consultants Costs or Hostage

We will pay the **policyholder** up to the **sum insured** in Table of Benefits A for each complete day that an **insured person** is forcibly or illegally detained as the result of a **hijack, kidnap** or being taken **hostage** which starts during the **operative time** and the **period of insurance** up to a maximum of £15,000. We will also pay up to the **sum insured** in Table of Benefits A in respect of **kidnap for ransom consultant costs**.

Definitions applicable to Section B10

Consultant costs

Reasonable fees and expenses of **our** chosen Consultants incurred during response to a **kidnap for ransom**, including but not limited to costs of travel, accommodation, qualified interpretation, communication and payments to informants.

Hijack

The unlawful seizure of, or wrongful taking control of, an aircraft, ship or train in which an **insured person** is travelling.

Hostage

The detention of an **insured person** by a third party who threatens to kill, injure or continue to detain the **insured person** in order to compel a state, international organisation or person to do or abstain from doing any act.

Kidnap

The seizing, detaining or carrying away by force or fraud of one or more **insured persons** (except a **child** by their **parent**) by a third party by force or fraud without the consent of an **insured person** and without lawful excuse.

Kidnap for ransom

Any event or connected series of events of seizing, detaining or carrying away by force or fraud of one or more **insured persons** (except a **child** by their **parent**) for the purpose of demanding cash, monetary instruments, bullion or the fair market value of any securities, property or services.

Emergency Assistance Helpline: +44 (0) 1273 552922 (24 Hour)

What is not covered under Section B10 (Kidnap for Ransom Consultants Costs only)

This Section does not cover:

1. The fraudulent, dishonest or criminal acts of the **group policyholder** or **insured person** or any person authorised by them to have custody of ransom monies. This exclusion will not apply to the payment of ransom monies by the **group policyholder** or **insured person** in a situation where local authorities have declared such payment illegal.
2. A **group policyholder** or **insured person** who has had kidnap insurance cancelled or declined in the past.
3. Any claim for an **insured person** within **their permanent country of residence**.
4. Any **kidnap for ransom** which occurs in Colombia, Iraq, Mexico, Nigeria, Philippines, Venezuela or Yemen.

Section B11 – Political Evacuation

We will reimburse the **group policyholder** for **evacuation and repatriation costs** and for **expenses** due to **political evacuation** or **political instability**. The maximum we will pay under this section is £50,000 any one evacuation and in the annual aggregate for **evacuation and repatriation costs** and £100 per **insured person** per day for a maximum of thirty days in respect of **expenses**.

Condition applicable to Section B11

If an incident occurs which may result in an **insured event** the **group policyholder** must contact the CRISIS CENTRE HOTLINE available globally twenty-four hours a day, seven days a week at the following number:

WORLDWIDE: +44 (0) 1273 552922 (24 Hour)

Definitions applicable to Section B11

Advisory

A formal recommendation of the **appropriate authorities** that an **insured person** specifically leave the **host country** or that a class of persons which include an **insured person** leave the **host country**.

Appropriate authorities

Any legally empowered regulatory, governmental or local authority of the **home country**.

Evacuation and repatriation costs

Costs incurred by the **group policyholder** or an **insured person** for the emergency evacuation of an **insured person** within thirty days prior to an **insured event** and ten days after an **insured event** to the nearest place of safety or for the repatriation of the **insured person** to **their** country of citizenship.

Evacuation costs will be paid once per **insured person** per **insured event**.

Expenses

The costs of accommodation, transportation, food and any other reasonable and necessary expenses for up to thirty days until such time as an **insured person** can be repatriated to **their home country**.

Home country

The country of citizenship of the **insured person**.

Host country

Any countries in which an **insured person** is employed.

Insured event

Any occurrence described under **political evacuation** or **political instability**.

Political evacuation

An **insured person** being expelled or declared persona non grata on the written authority of the recognised government of a **host country**, or the wholesale seizure, confiscation or expropriation of the property, plant or equipment of the **group policyholder**.

Political instability

Political or military events involving a **host country** such that the **appropriate authorities** issue an **advisory** ordering the departure of all **home country** governmental personnel in non-emergency positions and their dependents from the **host country** or such that the **group policyholder** or **insured person** receives direct instructions or recommendation to evacuate from the **appropriate authorities**. All such interrelated contingencies will be considered a single event hereunder and all losses arising there from will be considered a single loss. All acts or events having a common cause (including continuous or repeated exposure to conditions) or perpetrated or instigated by any person, group or collaborating groups will be treated as interrelated contingencies.

What is not covered under Section B11

Under this Section **we** will not be liable for any claim:

1. Arising from or attributable to an alleged violation of the laws of the **host country** by the **group policyholder** or by an **insured person**.
2. Which results from failure of the **group policyholder** or an **insured person** to maintain and possess duly authorised and issued required documents and visas; unless **we** determine in its sole discretion that such allegations were intentionally false, fraudulent and malicious and made solely to achieve a political, propaganda and/or coercive effect upon or at the expense of the **group policyholder** or an **insured person**.
3. Arising from or attributable, in whole or in part, to a debt, insolvency, commercial failure, the repossession of any property by any titleholder or lienholder or any other financial cause.
4. Arising from or attributable, in whole or in part, to non-compliance by the **group policyholder** or an **insured person** with any obligation specified in a contract or license or failure by the **group policyholder** or an **insured person** to provide bond or other security because of any liability assumed by the **group policyholder** or an **insured person** under any contract, whether written or oral, unless **our** specific consent hereto is endorsed on this policy prior to an **insured event**.
5. Arising from or attributable, in whole or in part, to the implementation of currency exchange rates by a legally constituted authority.
6. If an **insured person** is a citizen of the **host country**.

Section C – Crisis Containment Management

We will reimburse the **group policyholder** for **crisis consultant** fees and costs incurred as a direct result of a **crisis** which starts during the **period of insurance** and is reported to **us** in accordance with this cover. Any fees and costs will be approved and paid by the **group policyholder** and submitted to **us** for approval and reimbursement under this policy. **Crisis consultant** costs are limited to fees or costs which are incurred within the **crisis coverage period** subject to an aggregate limit of £50,000 per **crisis** or all **crises** which start during the **period of insurance**.

Definitions applicable to Section C

Adverse publicity

Any negative reporting of an **insured event** in local, regional or national media (including but not limited to radio, television, newspaper and/or magazines) which has the potential to cause a **material interruption**.

Crisis

Any decisive, unstable or crucial time in the **group policyholder's** affairs or business resulting from an **insured event** that:

- i. has directly caused a **material interruption**; or
- ii. has the potential to cause:
 - a. imminent **financial loss**, or
 - b. **adverse publicity**

for the **group policyholder** if left unmanaged.

Crisis consultants

The independent crisis consultants previously approved by **us** for use by the **group policyholder** in connection with a **crisis**.

Crisis coverage period

The period of time commencing when the **crisis** is first reported to **us** and ending not later than thirty days thereafter.

Financial loss

- i. within a 48 hour period, the price per share of the **group policyholder's** common stock decreases by 10% net of the change in the Standard & Poor's Composite Index or any other comparable index used to measure the stock exchange in which the **group policyholder** lists its common stock; or
- ii. a decrease greater than 20% in the consolidated revenues of the **group policyholder**.

Insured event

A notification of a potential claim under Section A or B of this policy.

Material interruption

A disruption or break in the continuity of the **group policyholder's** normal business operations, which:

- i. requires the direct involvement of all of the **group policyholder's** board of directors or senior executives and diverts their concentration from their normal operating duties; and
- ii. is likely to have a significant negative impact on the **group policyholder's** revenues, earnings or net worth.

Conditions applicable to Section C

1. Any **crisis** arising out of, based upon or attributable to, related, continuous or repeated notifications under Sections A & B of the policy will be considered a single **crisis**.
2. The **group policyholder** must give **us** immediate notice of any **crisis** by telephoning the CRISIS CENTRE HOTLINE available globally twenty-four hours a day, seven days a week at the following number:

WORLDWIDE: +44 (0) 1273 552922 (24 Hour)

Any event that meets the following conditions must be reported to **us** in the time period indicated:

- a. any event that results in regional or national media coverage (print, radio or television) and relates to an **insured event**, must be reported to **us** within 24 hours of the media coverage, if **we** have not previously been notified of the event by the **group policyholder**;
- b. any event that results in the filing of a claim or litigation against the **group policyholder** and relates to an **insured event**, must be reported to **us** within 48 hours of the claim/litigation filing, if **we** have not previously been notified of the event by the **group policyholder**.

No claim will be paid if **we** are not notified as described above.

Provision applicable to Section C

The **group policyholder** will bear 20% of the cost of each **crisis** which will remain uninsured. **We** will reimburse the **group policyholder** subject to the aggregate limit of liability after deducting 20% from the amount of the incurred **crisis consultant** costs.

What is not covered under Section C

Under this Section **we** will not be liable for any claim directly or indirectly caused by or resulting from:

1. circumstances that affect the industry in which the **group policyholder** conducts its business activities;
2. governmental regulations which affect another country or the industry in which the **group policyholder** conducts its business activities;
3. changes in population, customer tastes, economic conditions, seasonal sales variations or competitive environment;
4. any fraudulent act committed by any of the **group policyholder's** senior executives.

Section D – Healthline Plus

Second Opinion Medical Service

If an **insured person** (or their **partner** or **their child** or **children**) sustains any **bodily injury** or illness which is diagnosed during the **period of insurance**, regardless of the **operative time** shown in the Table of Benefits or the exclusions applicable under this policy, access to a medical second opinion service is provided by **us**.

Full details of the service are available at: www.mylifeline.co.uk with downloadable details which can be hosted on the **group policyholder's** intranet site, emailed to all staff or shared however the **group policyholder** wishes.

To use this service a **policyholder** (or **their partner** or **their child** or **children**) should either:

- access www.mylifeline.co.uk or
- contact **Second Opinion** by telephoning **+44 (0) 1273 552922 (24 Hour)**,

and provide details of their current **medical consultant** as prompted.

An **insured person** (or their **partner** or their **child** or **children**) should then request that their medical file be forwarded to **Second Opinion** by the **medical consultant** (this may require written authorisation).

In most cases it will not be necessary for an **insured person** (or their **partner** or their **child** or **children**) to visit **Second Opinion**. However, if **Second Opinion** considers this necessary, **we** will pay for the cost of the first consultation (excluding the cost of travel and accommodation).

Health Portal

Healthline Plus also provides access to 24 hour, 7 days a week remote nursing services.

An **insured person** (or their **partner** or their **child** or **children**) can interact with fully trained nurses located in the **United Kingdom** through the website (including via web camera), via telephone, via SMS text messaging and via video mobile phone.

Remote nursing is available to an **insured person** (or their **partner** or their **child** or **children**) for all conditions whether recovering from major surgery through to daily medical problems, avoiding the need to refer to a **general practitioner**.

Full details about how to use the Health Portal service are available at www.mylifeline.co.uk

Health Information

Health Information accessible at www.mylifeline.co.uk provides an **insured person** (or their **partner** or their **child** or **children**) instant access to general and educational health information.

Information provided includes:

- Preventative services such as weight loss, quit smoking, blood pressure, cholesterol control.
- Holistic services and details on alternative medicine available in the **United Kingdom**.
- Specialist condition self-management tools.
- The ability to create an electronic health record.
- Subscriptions to newsletters and news flashes.

What is not covered under this policy

The policy does not cover loss or destruction of or damage to property, loss or expense, legal liability, or any consequential loss directly or indirectly caused by or contributed to by or arising from:

1. Ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
2. The radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

Please refer to additional 'What is not covered' limitations under each Section of this group policy.

Start and finish of cover for an insured person

The cover for an **insured person** will begin on the **start date of cover** for the **period of insurance** or the date **they** are included in this insurance through the **insurance arrangement**, whichever is later.

Cover will end on the earliest of the following:

- a. the end of the period for which payment of premium is paid to **us** (unless this is due to a mistake by the **group policyholder**);
- b. the Council named as a **group policyholder** or **we** cancel this policy (please see the 'Cancellation and cooling off period' section for further details);
- c. the **insured person** notifies a **group policyholder** that **they** no longer wish to be included in this policy;
- d. the **insured person** ceases to be a **pupil** or **employee** of a **participating establishment**;
- e. the **insured person** dies (although a claim for that person can be submitted if the **death** is due to **bodily injury**);
- f. the end of the **period of insurance**;
- g. the end of the **period of insurance** during which the **pupil** reaches 18 years of age or 23 years if in full-time education and when any other **insured person** reaches 75 years of age.

General policy conditions

1. The policy or benefit cannot be assigned or transferred to anyone else unless **we** agree.
2. Where the **policyholder** is paying the premium, the insurance will not be affected by the **group policyholder's** failure to send reports, pay premiums or keep to any of the conditions of the policy.
3. All claims must be notified as soon as is reasonably practical after the event which causes the claim. Failure to do so may result in **our** rejection of the claim if it is made so long after the event that **we** are unable to investigate it fully, or may result in the **policyholder** or **insured person** not receiving the full amount claimed for if the amount claimed is increased as a result of the delay.
4. If **we** have paid a claim under this policy and the **group policyholder**, the **policyholder** or the **insured person** has accepted this as full and final payment then **we** will not have to make any further payments for the same claim.
5. As well as **our** annual review, **we** may change the terms and conditions, including the premium, of this policy at any time as considered necessary if there is an event outside **our** control that is likely to have an impact on future claims and which **we** could not reasonably have foreseen when **we** last reviewed the cover terms and premiums or in the event of any change in the law affecting this policy, for example a change in Insurance Premium Tax or other tax. Before **we** make any changes, **we** will give the **group policyholder** 30 days notice in writing.

If the changes are acceptable to the **group policyholder** then this cover will continue. The **group policyholder** is responsible for notifying the **policyholders** or **insured persons** of the changes applicable.

If the changes are not acceptable, the **group policyholder** may cancel this policy. If this happens no claims will be paid for any **bodily injury** suffered by an **insured person** after the date of the cancellation. **We** will return to the **group policyholder** any premium already paid to **us** in advance for cover that is unused at the date of cancellation. The **group policyholder** will be responsible for returning any premium to a **policyholder** included in this insurance who has paid the premium. The **group policyholder** is responsible for promptly notifying **policyholders** or **insured persons** of such cancellation.

6. The premiums are to be paid as agreed and information will be supplied to **us** in the form and at the frequency reasonably required by **us** for the cover to remain in force.
7. This policy will be governed by English law, and the **group policyholder** and **we** agree to submit to the courts of England and Wales to determine any dispute arising under or in connection with it, unless the **group policyholder** resides in Scotland, Northern Ireland or the Isle of Man, in which case the law applicable to that jurisdiction will apply and it's courts will have exclusive jurisdiction, unless agreed to the contrary by the **group policyholder** and **us** before the **start date of cover**.

The terms and conditions of this policy will only be available in English and all communication relating to this policy will be in English.

8. Only the **group policyholder**, the **insured person** (or the **policyholder** if **they** are under 18 years of age or **their** executor or personal representative in the event of the **death** of an **insured person**) or **we** may enforce the terms of this policy and the provisions of the Contract (Rights of Third Parties) Act 1999 do not apply.
9. **We** will not pay interest on any amount paid under this policy.

Disputes and complaints

We believe the **group policyholder** and **policyholders/insured persons** deserve a courteous, fair and prompt service. If there is any occasion when **our** service does not meet expectations please contact **us** using the appropriate contact details below and provide the policy/claim number and the name of the **group policyholder/insured person** to help **us** deal with the comments more quickly.

Claims related complaints

Accident & Health Claims Manager UK

AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG.

Telephone: +44(0) 845 6029429

Facsimile: +44(0) 20 8253 7569

Email: claimsuk@aig.com

On-line: www.aig.co.uk and select 'your feedback'

All other complaints

Customer Relations Unit UK

AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG.

Telephone: +44(0) 20 8649 6666

Facsimile: +44(0) 20 8680 7330

Email: uk.customer.relations@aig.com

On-line: www.aig.co.uk and select 'your feedback'

We will acknowledge the complaint within 5 business days of receiving it, keep the **group policyholder** and **insured persons** informed of progress and do **our** best to resolve matters satisfactorily within 8 weeks. If **we** are unable to do this the **group policyholder** and **insured persons** may be entitled to refer the complaint to the Financial Ombudsman Service (FOS) who will review the case. **We** will provide full details of how to do this when **we** provide **our** final response letter addressing the issues raised.

The FOS may not consider a complaint if the complainant:

- has not provided **us** with the opportunity to resolve the complaint; or
- is a business with more than 10 employees and a group annual turnover of more than 2 million; or
- is a trustee of a trust with a net asset value of more than £1 million; or
- is a charity with an annual income of more than £1 million.

The FOS can be contacted at:

Financial Ombudsman Service

South Quay Plaza, 183 Marsh Wall, London E14 9SR.

Telephone: 08000 234 567 (free for people phoning from a 'fixed line' i.e. landline at home)

0300 123 9 123 (free for mobile phone users who pay a monthly charge for calls to numbers 01 or 02)

Email: complaints.info@financial-ombudsman.org.uk

Following this complaint procedure does not affect the right to take legal action.

Financial Services Compensation Scheme

AIG Europe Limited is covered by the Financial Services Compensation Scheme (FSCS). The **group policyholder** or an **insured person** may be entitled to compensation from the scheme if **we** cannot meet **our** financial obligations depending on the type of insurance and the circumstances of the claim.

For this type of insurance 90% of the claim is covered, without any upper limit.

Further information about compensation scheme arrangements is available at: www.fscs.org.uk and on **020 7714 4100** or **0800 678 1100**.

Fraud or false information

By the group policyholder

Any fraud, deliberate dishonesty or deliberate hiding of information connected with the **group policyholder's** application for this group policy or in connection with a claim, will make this policy invalid.

In this event **we** will not refund any premiums and **we** will not consider for payment any claims which have not already been submitted to **us**.

Where claims have been made by **insured persons** under this policy, but remain unpaid, prior to the discovery of such fraud, deliberate dishonesty or deliberate hiding of information, where the **insured person** making the claim had no involvement in it, such claims will be considered for payment in the usual way.

By the insured person

Any fraud, deliberate dishonesty or deliberate hiding of information by an **insured person** at any time will make this policy invalid so far as concerns cover for that **insured person**.

If this happens, the **insured person** will lose any amount due to **them** and **they** must pay back any amount that **we** have already paid.

If this occurs, **we** will not refund any premiums in respect of that **insured person**.

Cancellation and cooling off period

Cancellation of cover – us and the group policyholder

We can cancel this group policy by giving 30 days notice in writing to the **group policyholder** at the **group policyholder's** last known address.

The **group policyholder** can cancel this policy by giving 30 days notice in writing to **us** at **our** head office address in the **United Kingdom**, AIG Europe Limited, The AIG Building, 58 Fenchurch Street, London EC3M 4AB United Kingdom.

It is the responsibility of the **group policyholder** to notify **insured persons** that the policy has been cancelled.

The premium for the period up to the date when the cancellation takes effect will be calculated and any unused portion of the premium paid will be returned to the **group policyholder** for them to pass on to the **insured person** provided the **insured person** has paid the premium and they have not made a claim.

It is the **group policyholder's** responsibility to tell an **insured person** contributing that the premium will no longer be collected and the policy is cancelled.

We may cancel any cover provided by this group policy for **war** by sending seven days notice to the **group policyholder** at their last known address.

Cancellation of cover – Insured person

An **insured person** has no rights to cancel the group policy held by the **group policyholder**, only the right not to be included.

Other than specifically detailed under the cooling off period, an **insured person** may withdraw from their inclusion of cover under this group policy by giving notice in writing to the **group policyholder** or their appointed administrators. Cover will cease at the end of the period for which payment of premium was paid to **us** unless the premium is paid annually when a proportionate return will be given to the **group policyholder** for them to pass on to the **insured person** provided the **insured person** has paid the premium.

Cooling off period – Insured person

If this group policy does not meet an **insured person's** needs, they can choose not to be covered by this group policy by notifying the **group policyholder** and returning the documentation provided to them within 15 days of the inception date of this group policy or the date the **insured person** is included in this insurance or the date upon which an **insured person** receives their insurance documents, whichever is later.

If within this cooling off period an **insured person** sustains a **bodily injury** which results in a covered claim under this group policy, **we** will only refund the part of the premium in proportion to the period of unused cover. This will be returned to the **group policyholder** for them to pass on to the **insured person** if the cost of their inclusion in this insurance has been collected from the **insured person**.

How we use personal information

We are committed to protecting the privacy of customers, claimants and other business contacts.

“**Personal Information**” means information that identifies and relates to an **insured person** or other individuals. By providing **personal information** an **insured person** gives permission for its use as described below. If an **insured person** or the **group policyholder** provides **personal information** about another individual, they confirm that they are authorised to provide it for use as described below.

The types of **personal information** we may collect and why - Depending on the relationship between us and an **insured person**. **Personal information** collected may include: identification and contact information, payment card and bank account, credit reference and scoring information, sensitive information about health or medical condition, and other **personal information** provided by the **group policyholder** or an **insured person**. **Personal information** may be used for the following purposes:

- Insurance administration, e.g. communications, claims processing and payment
- Decision-making on provision of insurance cover and payment plan eligibility
- Assistance and advice on medical and travel matters
- Management and audit of **our** business operations
- Prevention, detection and investigation of crime, e.g. fraud and money laundering
- Establishment and defence of legal rights
- Legal and regulatory compliance, including compliance with laws outside the **group policyholder's** or **insured person's** country of residence
- Monitoring and recording of telephone calls for quality, training and security purposes
- Marketing, market research and analysis

To opt-out of any marketing communications we may send please contact us by e-mail at: marketing.uk@aig.com or by writing to: **Head of Marketing, AIG Europe Limited, The AIG Building, 58 Fenchurch Street, London EC3M 4AB, United Kingdom.**

If the **group policyholder** opts-out we may still send the **group policyholder** or **insured persons** other important communications, e.g. communications relating to administration of the insurance policy or a claim.

Sharing of Personal Information - For the above purposes **personal information** may be shared with **our** group companies, brokers and other distribution parties, insurers and reinsurers, credit reference agencies, healthcare professionals and other service providers. **Personal information** will be shared with other third parties (including government authorities) if required by law. **Personal information** (including details of injuries) may be recorded on claims registers shared with other insurers. We are required to register all third party claims for compensation relating to bodily injury to workers' compensation boards. We may search these registers to detect and prevent fraud or to validate claims history or that of any other person or property likely to be involved in the policy or claim. **Personal information** may be shared with prospective purchasers and purchasers, and transferred upon a sale of **our** company or transfer of business assets.

International transfer - Due to the global nature of **our** business, **Personal information** may be transferred to parties located in other countries, including the United States and other countries with different data protection laws than in the **group policyholder's** or an **insured person's** country of residence.

Security and retention of Personal Information – Appropriate legal and security measures are used to protect **personal information**. **Our** service providers are also selected carefully and required to use appropriate protective measures. **Personal information** will be retained for the period necessary to fulfil the purposes described above.

Requests or questions - To request access or correct inaccurate **Personal information**, or to request the deletion or suppression of **Personal information**, or object to its use, please e-mail: DataProtectionOfficer@aig.com or write to Data Protection Officer, Legal Department, AIG Europe Limited, The AIG Building, 58 Fenchurch Street, London EC3M 4AB. More details about the use of **Personal information** by us can be found in our full Privacy Policy at www.aig.com/uk/privacypolicy or the **group policyholder** or **insured person** may request a copy using the contact details above.

AIG Europe Limited

The AIG Building, 58 Fenchurch Street, London EC3M 4AB.

This Insurance is underwritten by AIG Europe Limited which is authorised and regulated by the Financial Services Authority (FSA number 202628).

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