

Bupa Travel Medical TravelCover

Bupa Travel Services



Have a safe trip



We are working with the Foreign and Commonwealth Office to do all that **we** can to help travellers stay safe overseas. Before you go overseas, check out the FCO web site, at www.fco.gov.uk/knowbeforeyougo.

It is packed with essential travel advice and tips, and up-to date country-specific information. Please note that this policy does not provide cover for travel to areas where the Foreign & Commonwealth Office has advised against travel to. Please see General Exclusion 17 (page 20).

Before you travel

- ✓ Check the FCO web site for any specific advice on the country & region you are visiting.
- ✓ If you are travelling to the European Union (EU) obtain your European Health Insurance Card (EHIC) from the post office, by calling 0845 606 2030 or applying at: www.dh.gov.uk/travellers
- ✓ Only make travel arrangements through an agent who displays their ABTA and/or ATOL registration numbers.
- ✓ Check the visa and passport requirements for the **trip** before booking.
- ✓ Consult your local GP, a recognised travel clinic or call Bupa Travel on 0208 763 3115 for any required vaccinations or health precautions.
- ✓ Take enough money for your **trip** but not excessive amounts in cash. Make arrangements for access to additional funds if required.
- ✓ Leave copies of important documents e.g. passport, travel itinerary, insurance policy etc. at **home**, with a relative or friend.
- ✓ Research your destination before you go to maximise your opportunity to experience new and exciting things during your **trip**.

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Bupa TravelCover

Bupa is the trademark of the British United Provident Association. Bupa Insurance Limited will provide the services and benefits described in this policy during the **insurance period**, within the **geographical limits**, subject to the **limits of cover** and all other terms, conditions and exclusions contained in this policy, and following payment of the appropriate premium for the level of cover chosen.

Bupa TravelCover is provided by Bupa Insurance Limited.
Registered in England and Wales No. 3956433*.

Bupa Insurance Services Limited.
Registered in England and Wales No. 3829851*.

*Authorised and regulated by the Financial Services Authority.

Registered Office
Bupa House, 15-19 Bloomsbury Way, London WC1A 2BA

Emergency assistance

In the event of a **medical emergency**, immediate help is available from the 24-hour multi-lingual emergency centre, 365 days a year.

What the insured person must do:

In an emergency, the **insured person** should first check that the situation is covered by this Bupa Business TravelCover policy.

The **insured person** will be asked to give their name, membership number and as much information as possible about their emergency. Bupa Travel Assistance will ask for a telephone or fax number where they can contact the insured person or leave them a message at any time of the day or night.

The **insured person** must contact Bupa Travel Assistance and obtain their authorisation before any expenses are incurred over £500. Until Bupa Travel Assistance have been contacted we cannot accept responsibility for any expenses.

Any minor illness or injury costs resulting in a claim should be paid by the **insured person** and redeemed within 28 days of returning from the **trip**.

The **insured person** can ring Bupa Travel Assistance on the following number (when calling or faxing from inside the UK, first dial '0'):

Telephone: +44 (0) 20 8763 3115

Or fax Bupa Travel Assistance on:

Telefax: +44 (0) 20 8763 3035

Bupa Travel Assistance services are provided by FirstAssist Services Limited.

For **your** protection, **your** calls may be monitored and may be recorded.

General / Medical warranty

Cancellation

It is the **insured person's** promise to **us** that:

At the time of booking the **trip**, the **insured person** is fit and healthy and knows of no reason why the **trip** could be cancelled.

Cutting short the trip and medical expenses

It is the **insured person's** promise to **us** that:

The **insured person** must not travel against the advice of a **medical practitioner** or for the purpose of obtaining **treatment abroad** or where a terminal prognosis has been given.

Reciprocal health agreement

If the **insured person** is a resident of a European Economic Area (EEA) country and are going to travel to another EEA country, **we** advise that the **insured person** to obtain a European Health Insurance Card (EHIC) before travelling. This EHIC entitles the **insured person** to receive healthcare at a reduced-cost, or sometimes free, if medical treatment becomes necessary during **their** visit to a country in the EEA or Switzerland. You can pick up the EHIC form and pre-addressed envelope from your local Post Office. The quickest and easiest way to apply for an EHIC is online. Go to www.dh.gov.uk and follow the links through 'Health advice for travellers'. To apply by phone, call 0845 606 2030#. You will need your NHS or National Insurance Number to hand. (The Community Health Index number for Scotland and the Health and Care number for Northern Ireland.)

We are working with the Foreign and Commonwealth Office to do all that **we** can to help travellers stay safe overseas. Before **you** go overseas, check out the FCO website, at www.fco.gov.uk/knowbeforeyougo. It is packed with essential travel advice and tips, and up-to-date country specific information.

About your policy

Understanding and using your policy

Your policy and schedule:

Your policy is a legal contract between **you** and the **insurer**, and is based on the information **you** gave the **insurer**

The policy is made up of two parts; **your** schedule and this policy wording. These must be read together.

Your schedule shows **you** which level of cover **you** have chosen, the **insurance period**, **your** premium, who is insured and any endorsements.

Change in circumstances

The **insured person** must write and tell **us**, within 14 days, if:

- There is any change in their **country of residence**
- There is any change in their personal circumstances, where **Family** cover has been selected
- **Family** are no longer living at the same address as the **insured person**
- The **insured person** is aware of any reason why the **trip** could be cancelled as these may affect the terms and conditions of the policy.

Cancellation

You may cancel **your** policy by giving **us** at least 7 days notice. **We** may cancel this policy by giving **you** at least 7 days notice in writing at **your** last known address. **We** reserve the right to amend the premium and policy terms, conditions and exclusions.

Important notes:

1. The most **we** will pay in any **insurance period** for each person insured under this policy is the amount shown under each section of cover unless otherwise stated.
2. This policy will give **you** cover for the **trips your employees** take up to 180 days in each annual **insurance period**.
3. If **you** have chosen and paid for Leisure cover **your employees** will automatically have winter sports cover up to a maximum of 17 days in each **insurance period**.

4. This policy does not cover **trips** within the **employee's country of residence**, unless **you** have paid an additional premium.
5. **Employee's** resident in the **United Kingdom area** will not be covered when travelling within the **United Kingdom** unless **you** have paid an additional premium.
6. If **you** have chosen and paid for **Family** cover, any member of **your employee's Family** will be covered when travelling with the main **insured person**.
7. It is possible to choose the Law applicable to a contract of insurance covering a risk situated in the UK. **We** have chosen English Law to apply. Payment of **your** premium is evidence of acceptance of **our** choice. If any other Law is to apply it must be agreed by both parties and evidenced in writing.

How the insured person can make a claim

Check the situation is covered first.

To find out exactly what is and what is not covered please look at the policy noting particularly any policy conditions, exclusions and claim conditions.

Making a claim

Q. How does an **insured person** make a claim?

A. In the event of an emergency see section "What the **insured person** must do" above (any minor illness or injury costs must be paid for by the **insured person** and reclaimed).

For all claims other than **legal expenses**, the **insured person** must telephone the Bupa Travel Services Claims Department on 020 8760 7240~ and ask for a claim form. The **insured person** will be asked to give their name, membership number and details of the claim. The **insured person** must return the completed claim form and any additional information we ask for within 28 days of the end of the trip.

If the **insured person** needs to make a **legal expenses** claim they should immediately phone or write to:

FirstAssist Services Limited
Marshall's Court, Marshall's Road
Sutton, Surrey
M1 4DU
Phone: 020 8652 1313~
Fax: 020 8661 7604

~Lines open 9am to 5pm, Monday to Friday excluding public holidays

Q. What extra information does the **insured person** need to supply?

A. The **insured person** must supply all original invoices, receipts and reports etc. They should check the section they are claiming under to see if there are any specific conditions and details or any supporting evidence that they must give **us**.

It is always advisable to keep copies of all the documents that are sent to **us** when making a claim.

Occasionally, to help **us** agree a quick and fair settlement of a claim, it may be necessary for **us** to appoint a claims handling agent. When **we** do, **our** agent will contact the **insured person** as quickly as possible to arrange an appointment to discuss the claim. Please note that evidence to support the claim will be needed (e.g. police reports, receipts etc.).

Policy information

Words with special meanings

This part of the policy sets out the words which have a special meaning, each word is listed with the meaning explained below it. Whenever a word with a special meaning appears within this document it will be printed in **bold type**.

Abroad

Outside the **country of residence**.

Business trip

A **trip** undertaken on behalf of the **company**.

Close business colleague

A person working for the same **company** as **you** or **your travelling companion** whose absence from work along with **you** or **your travelling companion** would prevent the proper functioning of the **company**, as confirmed by an officer of the **company**.

Close relative

The **insured person's** spouse, partner (with whom they have lived for 6 months or more), mother, father, mother-in-law, father-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandparent, grandchild or the fiancé(e) of a person insured under this policy.

Country of residence

The country in which the **insured person** has his/her principal place of residence.

Excess

The first £25 of each claim, for each person insured under this policy which must be paid by the **insured person** for every incident, under each section of cover the **insured person** claims.

Family

The **insured person**, his/her spouse or common law partner (with whom they have lived for 6 months or more) and their children who are under 21 years old, in full time education and who normally live with the **insured person**.

*Please note that all **Family** members must reside at the same address as the main **insured person**.*

Geographical areas

European area

Albania, Algeria, Andorra, Austria, Balearic Islands, Belarus, Belgium, Bosnia Herzegovina, Bulgaria, Crete, Croatia, Cyprus, Czech Republic, Denmark, Egypt, Eire, Estonia, Finland, France, Germany, Gibraltar, Greece, Greek Islands, Hungary, Iceland, Israel, Italy, Latvia, Lebanon, Libya, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Malta, Moldova, Monaco, Montenegro, Morocco, Netherlands, Norway, Poland, Portugal, Republic of Ireland, Romania, Russia (European), San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Syria, Tunisia, Turkey, Ukraine, Vatican City, Yugoslavia, The Azores, The Canary Islands, The Channel Islands.

United Kingdom area

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

Geographical limits

All countries Worldwide excluding **trips** taken solely within the **insured person's country of residence**.

Home

The place where the **insured person** lives in the **country of residence**.

Insured person/employee

Any person under a contract of service or apprenticeship with the **company**, who is named on the schedule supplied to the **company** by **us**, unless **we** have agreed in writing to waive this requirement for whom the appropriate premium has been paid and who at the commencement of the **insurance period** is not more than 74 years of age.

When the appropriate **Family** subscription has been paid, this definition and the cover are extended to apply to any member of the **family** when travelling with the main **insured person**.

Insurance period

The period to which the insurance applies. This is shown in **your** schedule.
Extension to the **insurance period**:

If the **insured person's** return journey from **abroad** is unavoidably delayed because of something which is covered under the policy, **we** will automatically extend the cover for the period of the delay at no additional cost.

Insurer

BupaInsurance Limited.

Legal expenses

The **insured person's representative's** legal fees, expenses and other costs which we have agreed or the costs of any other people involved in the **legal proceedings** if **you** or the **insured person** have to pay those costs. This includes costs following an out-of-court settlement to which **we** have agreed.

Legal proceedings

Legal action to protect the **insured person's** rights in a dispute.

Limit(s) of cover

The most **we** will pay in any **insurance period** for each **insured person** under this policy is the amount shown under each section of cover.

Loss of limb

In the case of an upper limb:

- an entire hand or arm being permanently severed;

In the case of a lower limb:

- the limb being severed permanently at or above the ankle.

Loss of sight

Permanent and total loss of sight which shall be considered as having occurred 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. In one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.

Manual work

Hands-on work as a plumber, electrician, lighting or sound technician, carpenter, painter / decorator or builder or which involves the installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant or manual labour of any kind or working in a hazardous location.

Manual work does not include work of a purely managerial, supervisory, sales or administrative nature or any work in the catering industry.

Medical emergency

A bodily injury or sudden and unforeseen illness suffered by the **insured person** while they are on a **trip abroad** and a recognised **medical practitioner** tells the **insured person** that they need immediate in-patient or out-patient **treatment**.

Medical practitioner

A person who is qualified and recognised as such by the relevant authority in that country, other than the **insured person**, a **close relative**, **travelling companion** or **employee**.

Permanent total disablement

Disability which prevents the **insured person** from doing any work of any kind which, after 12 months is beyond reasonable hope of any improvement.

Representative

The solicitor or other suitably qualified person appointed to act for the **insured person**.

Travelling companion

Any person whom **you** are travelling with during **your trip**.

Treatment

Any type of surgical or medical procedure which is carried out solely to cure or relieve an acute illness or injury.

Trip

A pre-booked journey **abroad** within the **geographical limits**, not exceeding 180 consecutive days or the period of the original booked journey (whichever is shorter), during the **insurance period**, commencing and ending in the **country of residence**.

We, us, our

Bupa Insurance Services Limited who administer the insurance on behalf of the **insurer**.

You, your, company

The company named as the policyholder on the schedule.

Activities covered by this policy

The following activities are covered under this policy:

- Coastal sailing
- Jet skiing
- Water skiing
- Paragliding
- Banana boat rides
- Parascending
- Roller skating on a recognised rink
- Horse trekking
- Golf
- Surfing
- *On piste skiing
- *Ice skating on a recognised rink
- *Snow boarding with a leash and/or bindings and protective headgear
- *Tobogganing

The following activities are covered when the **insured person** has booked and paid for the activity with a fully licensed and reputable company:

- Hot air ballooning
- White water rafting
- Safari
- *Heli-skiing
- *Cross country skiing

The following activities are covered when the **insured person** is accompanied by a qualified guide or qualified instructor:

- Hill trekking (on a recognised route)
- *off piste skiing

- Scuba diving up to a depth of 30 metres

* Skiing activities are covered only when leisure cover has been purchased.

This policy does not cover any other hazardous pursuits. This list provides an indication of some of the activities **we** do cover. The **insured person** should contact Bupa Travel Services on 0800 00 10 22[†] if any activity they wish to do is not listed.

Please check Section 4 (Personal legal responsibility) which identifies which activities have no cover for the **insured person's** legal responsibilities.

Policy conditions

These are the conditions of the insurance the **insured person** will need to meet as their part of this contract:

1. Taking care

The **insured person** must take all reasonable steps to prevent loss or damage. The **insured person** must act as if they are not insured.

2. Fraud

If dishonest means are used by the **insured person** or anyone acting on their behalf to:

- obtain a claims payment under this policy;
- obtain cover for which they do not qualify;

all benefits under this policy will be lost. All benefits claimed fraudulently and received must be repaid to **us**.

3. Transferring your interest in the policy

The **insured person** cannot transfer their interest in this policy to anyone else.

4. The **insured person** must not settle, reject or negotiate any claim without **our** permission.

5. **We** have the right, if **we** choose, in the **insured person's** name but at **our** expense to:

- take over the defence or settlement of any claim;
- start legal action to get compensation from anyone else for **our** own benefit;
- start legal action to get back from anyone else any payments that have already been made;
- take any action to get back any lost property or property believed to be lost.

6. The **insured person** must give **us**, at their reasonable expense, all the information **we** ask for about any claim including evidence and receipts and they must help **us** to take legal action against anyone if **we** ask them to.

7. If the **insured person** claims under this policy for something which is also covered by another insurance policy or service contract, they must provide **us** with full details of the other insurance policy or contract. **We** will only pay **our** share of any claim except for Personal Legal Responsibility where **we** will make no payment where they hold another insurance policy providing this cover.
8. The **insured person** must take all reasonable steps to get back any article which has been lost or stolen. The **insured person** must if asked to, identify the person they believe to be responsible for the loss and to assist with any prosecution if necessary.
9. If **we** settle the claim and as a result the travel ticket(s) are not used, **you** or the **insured person** must, if **we** request, give the tickets to **us**.
10. The **insured person** must complete a claim form within 28 days of them returning **home** to the **country of residence** if anything happened on the **trip** which might lead to a claim under the policy. For emergencies or claims that are likely to be expensive, the **insured person** must tell **us** as soon as possible.
11. If **we** ask for it, the **insured person** must agree to be examined by a **medical practitioner** of **our** choice and at **our** expense.
12. The **insured person** must pay back to **us** any amount which **we** have paid to them for something which is not covered under this policy.
13. **We** will make every effort to apply the full range of services in all circumstances as shown in the policy. Remote geographical locations or unforeseeable adverse local conditions may prevent the normal standard of service being provided.

Policy exclusions

These exclusions apply to all the sections of this policy.

What is not covered:

1. Anyone 75 years old or over unless **we** have agreed in writing to provide cover.
2. Any loss or damage caused by an act deliberately carried out by **you** or the **insured person**.
3. For loss, damage or **treatment** if the **insured person** had put themselves in danger, except if the **insured person** was trying to save another human life.
4. Any claim which results from the **insured person**:
 - committing or attempting suicide;
 - developing psychiatric, mental or nervous condition(s);
 - deliberately injuring themselves;
 - being an alcoholic;
 - being addicted to drugs or abusing solvents or being under the influence of drugs or alcohol.
5. Air travel (other than as a fare-paying passenger on a regular scheduled airline or licensed charter aircraft).
6. Any claim or expense of any kind caused directly or indirectly by sexually transmitted diseases.
7. Any claim or expense of any kind directly or indirectly caused by, contributed to or arising from Human Immunodeficiency Virus Infection (HIV) and/or Acquired Immunodeficiency Syndrome (AIDS) and/or any form or variation of HIV or AIDS, however caused.
8. Any claim resulting from the **insured person** taking part in **manual work**.
9. Any claim if the **insured person** has been taking part in steeplechasing, polo, hunting, any professional sport(s), mountaineering (normally requiring ropes or requiring the services of a guide), pot holing, canyoning, fighting (except in self-defence), scuba-diving below a depth of 30 metres, parachuting, racing, speed or endurance tests or practising for such events (other than athletics), or any form of organised team sport.

10. Hazardous pursuits (please see 'Activities covered by this policy'.)
11. Any claim where the **insured person** has been taking part in ski-racing, ski-jumping, ski-acrobatics, snow boarding without a leash and/or bindings and protective headgear, off-piste skiing not accompanied by a qualified guide or qualified instructor, ice hockey, the use of bobsleighs, skeletons or luge
12. Any claim if the **insured person** is aged 65 or over whilst taking part in winter sports.
13. Motorcycling as a rider or passenger on any motorcycle or moped, unless wearing a helmet and unless the rider is a holder of a full and valid motorcycle licence.
14. Any claim or expense of any kind, directly or indirectly caused by:
 - any terrorist act (other than Section 1 - Medical Emergency & Other Related Expenses and Section 3 - Personal Accident - as long as the disturbances were not taking place at the time of the booking of the **trip** and/or at the start of the **trip**); or
 - war, riot, invasion, revolution, rebellion or civil commotion;
 - ionising radiation or radioactive contamination from any nuclear fuel or waste which results from the burning of nuclear fuel;
 - radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it;
 - pressure waves from aircraft and other flying objects travelling at or faster than the speed of sound.
15. Any loss which happens after **we** have provided services of any kind to the **insured person** or for any loss which happens following any delay, on **our** part, in providing services to the **insured person** unless negligence on **our** part can be proved.
16. Any costs **you** or the **insured person** would have expected or would have been required to pay, if the event resulting in the claim had not happened.
17. Date change and computer viruses exclusion applicable to all sections of the policy except Section 1 - Medical Emergency and Other Related Expenses, Section 3 - Personal Accident and Legal Protection.

This insurance does not cover direct or indirect loss or damage caused:

- to, or by, equipment (whether **you** own it or not) failing, or being unable, correctly to recognise data representing any date in such a way that it does not work properly or at all,
- by the fear of equipment (whether **you** own it or not) failing, or being unable, correctly to recognise data representing any date in such a way that it does not work properly or at all,
- by computer viruses.

Equipment includes computers and anything else that has a microchip in it.

Computers will include hardware, software, data, electronic data processing equipment and other computing and electronic equipment linked to a computer. Microchips include integrated circuits and microcontrollers.

Computer viruses include any program or software which prevents any operating system, computer program or software working properly or at all.

18. Travel to areas the Foreign Office has advised against travelling to. If **you** are unsure please contact them on 0207 008 0232 / 0233 or www.fco.gov.uk/knowbeforeyougo

Complaints procedure

We set ourselves high standards and try to provide the service **we** believe **you** have a right to expect. However, things can go wrong, and if they do, **we** want to be told about them. If a problem arises, please write with details of the complaint to:

The Quality Manager, Bupa Travel Services, Thames Side House, South Street, Staines, Middlesex TW18 4TL. Telephone no. 0800 00 10 22⁺

If **you** are still not satisfied, **you** may then contact the Financial Ombudsman Service to review **your** case.

If this does not resolve the complaint, you or the insured person should write to:

Customer Relations, Bupa, Staines, Middlesex TW18 4XF.
Telephone no. 0845 606 6726#

The Ombudsman can be contacted at the following address:

Financial Ombudsman Service, Insurance Division, South Quay Plaza, 183 Marsh Wall, London E14 9SR. Telephone no. 0845 080 1800

We must accept the Ombudsman's final decision, but **you** are not bound by it and may take further action if **you** wish.

Your rights as a customer to take legal action remain unaffected by the existence or use of **our** complaints procedure. However, the Financial Ombudsman Service will not adjudicate on any cases where litigation has commenced.

+ Calls from landlines are free, however, mobile phone providers may charge. Calls may be recorded and may be monitored. Personal lines are open 8.30am - 6pm, Monday to Friday and 9am - 1pm, Saturdays and Public holidays. Business lines are open 9am - 5pm, Monday to Friday.

BT landline calls to 0845 numbers will cost no more than 3 pence per minute. Charges from other providers may vary and calls made from mobiles usually cost more.

Section 1 - Medical emergency and other related expenses

This part of the policy explains the cover **we** provide for a **medical emergency** and other related expenses.

What is covered:

If the **insured person** suffers a bodily injury, illness or dies while on a **trip** **we** will pay the cost of:

- 1.1 Reasonable and necessary emergency medical and surgical **treatment** in the nearest suitable hospital.

The most **we** will pay for any one claim for each person insured under the policy, per **trip** is £5,000,000.

- 1.2 In the event of death:

- transport of the body or ashes to the **insured person's home**, or
- the cost of burial or cremation where death occurred **abroad**.

The most **we** will pay for any one claim for each person insured under the policy is £2,500.

- 1.3 Reasonable additional travelling costs when **our** Senior Medical Officer recommends that the **insured person** must return to their **country of residence** including the cost of a medical escort if necessary.

- 1.4 Reasonable additional travelling and accommodation costs for the **insured person's** husband, wife or partner or **travelling companion** accompanying them if they need to return to the **country of residence** for **treatment** on the advice of **our** Senior Medical Officer.

- 1.5 Emergency dental **treatment** for the immediate relief of pain.

The most **we** will pay for any one claim for each person insured per **trip** under the policy is £1,000.

- 1.6 The additional travelling and accommodation costs for one person to come and stay with the **insured person** and/or accompany them **home** if this is recommended by a **medical practitioner**.

The most **we** will pay for any one claim per **trip** is £750.

- 1.7 A competent adult of **our** choice to accompany any of the **insured person's** children insured under this policy **home** and any of their additional travelling costs, if the **insured person's accidental bodily injury** illness or death means that there is no one else to look after them.

The most **we** will pay for any one claim per **trip** is £750.

- 1.8 Where the appropriate premium has been paid for Leisure cover, charges for unused ski pack if, during the **insured person's trip**, a **medical practitioner** at the ski resort certifies that the **insured person** is unable to ski as a direct result of an injury or sudden and unforeseen illness.

The most **we** will pay for any one claim for each person insured under the policy is a proportional refund equivalent to the amount the **insured person** already paid for the ski-pack but is now unable to use.

What is not covered:

- a) The **excess**.
- b) Costs of more than £500 which **we** have not agreed in advance.
- c) Any claim where the **insured person** is travelling against the advice of a **medical practitioner** or for the purpose of obtaining **treatment abroad** or where a terminal prognosis has been given.
- d) **Treatment** costs for cosmetic reasons.
- e) The cost of **treatment** for pregnancy or childbirth incurred within 10 weeks of the expected date of delivery.
- f) The cost of any **treatment** when the **insured person** has been told by a **medical practitioner** that the **treatment** can safely be delayed until they return **home**.
- g) Any costs the **insured person** incurs **abroad** after the date **our** Senior Medical Officer tells them that they should return **home**.
- h) Costs incurred in the **country of residence** other than the cost of transporting them or the body or ashes of anyone insured under this policy to their **home**.

- i) Any travelling or accommodation costs where **we** have not arranged the transportation.
- j) The cost of dental **treatment** for cosmetic reasons only.
- k) The cost of dental **treatment** involving the provision of dentures, artificial teeth or the use of precious metals.
- l) In respect of Section: Medical Emergency and Other Related Expenses point 1.7, children who are 21 years old or over.
- m) Children who are not insured under the policy.
- n) In respect of Section: 'Medical Emergency and Other Related Expenses' points 1.6 and 1.7 any air travel costs above the same class of travel as that paid by the **insured person** on his/her outward **trip**.
- o) Any accommodation costs other than the cost of the room.
- p) Any **treatment**, investigations or tests in a private hospital unless authorised and agreed by **us**.

Section 2 - Replacement business colleague

This part of the policy sets out the cover **we** will provide to enable a business colleague to replace the **insured person**.

What is covered:

We will pay the cost of a single journey air ticket, of the same class of travel as that paid by the **insured person** on their outward **trip**, to enable a business colleague, where necessary, to replace them if they are hospitalised for more than 3 consecutive days deceased or repatriated, on the **business trip**.

The most **we** will pay for any one claim per **trip** is £1,500.

What is not covered:

- a) The **excess**.
- b) Any incident excluded from cover under Section 1.
- c) Any costs in respect of the spouse or child of the **insured person**.
- d) Costs in excess of £1,500.

Section 3 - Personal accident

This section of the policy sets out the cover **we** provide if the **insured person** has an accident during a **trip**.

What is covered:

If the **insured person** suffers disablement, **permanent total disablement** or dies as a result of an **accidental bodily injury** during a **trip**, which within 12 months is the sole cause of either death or disablement, **we** will pay £30,000 for:

- death;
- **loss of limb(s)** (of one or more limbs);
- **loss of sight** (in one or both eyes);
- **permanent total disablement.**

The most **we** will pay for any one claim in total is £30,000 per person insured under this policy subject to a maximum of £1,000 for the death of any person insured under 18 years old or more than 69 years old.

What is not covered:

- a) Any claim related directly or indirectly to any disease, physical defect, infirmity or illness which existed before the start of the **trip**.
- b) Any claim related directly or indirectly to pregnancy within 10 weeks of the estimated date of delivery.

Section 4 - Personal legal responsibility

This section of the policy sets out the cover **we** provide for certain personal legal responsibilities the **insured person** may have.

What is covered:

The **insured person's** legal responsibility to pay damages and costs to others which are the result of:

- accidental death or physical injury to anyone during a **trip**; and/or
- accidental loss of or damage to property during a **trip**.

The most **we** will pay for any single event occurring during the **insurance period** is £2,000,000 in total for each person insured under the policy per **trip**.

If the **insured person** dies, this cover is transferred to their legal personal **representative** provided that the **representative** follows the terms and conditions of the policy as far as they can.

What is not covered:

- a) Accidental death of or physical injury to the **insured person** or any of their **family**.
- b) Anything belonging to the **insured person**, or anything the responsibility of the **insured person** or any of their **family** or anyone employed by the **insured person** or any of their **family** or anyone living with them.
- c) Any responsibility resulting from the **insured person's** employment, trade, profession, business or gainful occupation or the trade, business, profession or gainful employment of any of their **family**.
- d) Any responsibility as an employer to anyone employed by the **insured person** or any of their **family** in any trade, business or profession.
- e) Any agreement or contract which adds any responsibility which would not have existed otherwise.
- f) Any responsibility resulting from the **insured person** or any of their **family** owning or using: aircraft, horse-drawn vehicles, motorised or mechanically propelled, assisted vehicles or towed vehicles, boats (other than rowing

boats, punts and canoes), jet skis, jet bikes or wet bikes, animals (other than horses, domestic dogs or cats), firearms (other than sporting guns).

- g) Any responsibility resulting from wilful or malicious acts by the **insured person**.
- h) Accidental injury or loss which has not been caused by the **insured person's** negligence.
- i) Any claim for personal legal responsibility which is covered by any other insurance held by the **insured person**.
- j) The occupation, except temporarily for the purposes of the **trip**, or ownership of any land or building.

Section 5 - Legal protection

We will provide telephone guidance and assistance on any legal problem which arises in connection with a **trip**. This service operates from the start of a **trip** until 7 days after completion of the **trip**.

What is covered:

We will insure the **insured person** for:

- 5.1 **Legal expenses** up to £25,000 to claim compensation or damages if the **insured person** is injured or if they die as a direct result of an accident that happens during the **trip**.
- 5.2 An overall maximum of £50,000 for all claims made by **insured persons** as a direct result of the same accident.
- 5.3 Any extra travelling expenses up to a maximum of £250 if the **insured person** has to attend a court **abroad** about their claim for compensation.

What is not covered:

We will not cover any claim:

- a) For **legal expenses** which **we** have not agreed to beforehand in writing.
- b) Reported to **us** more than 90 days after the incident.
- c) Where **we** think there is not a reasonable chance of the **insured person** winning the case or achieving a reasonable outcome.
- d) Where a reasonable estimate of the **insured person's** total **legal expenses** is greater than the compensation or damages that they are claiming.
- e) Where the **insured person** is injured or dies as a result of taking part in hazardous sports or activities.
- f) For damages or fines the **insured person** has to pay.
- g) Made by the **insured person** against **us**, the **insurer** or FirstAssist Services Limited.
- h) For any costs relating to a claim or counterclaim made against the **insured person**.

- i) Any **legal expenses** which are dependent on the successful outcome of the case.

How we settle claims under this section

The **insured person** must keep to the conditions on this page, and on page 3.

If anything happens which might lead to a **legal expenses** claim, the **insured person** must tell **us** immediately by filling in a claim form, giving **us** a full and truthful account of the details of their claim. The **insured person** must give **us** any information **we** request.

We will give the **insured person our** agreement if:

- **we** think the **insured person** has a reasonable chance of winning their case and achieving a reasonable outcome; and
- **we** think it is reasonable to pay the **insured person's legal expenses**.

If **we** do not accept the **insured person's** claim **we** will tell them why.

If there is a dispute between the **insured person** and **us** about this section of the policy, it can be taken to an independent arbitrator. The arbitrator will be a solicitor or barrister whom the **insured person** and **we** agree to. If **we** cannot agree with them on an arbitrator, the President of the Law Society (or similar organisation) will choose an arbitrator.

The side that loses the arbitration will pay the costs of the arbitration. If the decision is not totally in the favour of one side, the arbitrator will decide who pays the costs.

When an incident happens outside of the European Union, **we** will appoint and control the **legal representative**.

If the **insured person's representative** wants to consult a barrister **we** will agree if **we** think it is reasonable. The **insured person** must give **us** the name of the barrister and the reasons why they need one.

We may take over and continue in the **insured person's** name all legal action if the dispute is for an amount which is less than £1,000 or if the dispute could be dealt with by the Small Claims Court. In these circumstances, **we** may carry out **our** own investigation and try to settle their dispute. The **insured person** must agree to a settlement which is reasonable.

The **insured person** must tell **us** if an offer is made to settle the dispute.

The **insured person** must not negotiate or agree to settle the dispute without having **our** agreement beforehand. If they do not accept a reasonable offer to settle the dispute, **we** may not continue to support their claim.

We must be able to contact the **insured person's representative**. The **insured person** and the **insured person's representative** must co-operate with **us** and tell **us** about developments to do with their case.

The **insured person** must send all bills for the **representative's legal expenses** to **us** as soon as they receive them. The **insured person** must confirm to **us** that any charges they have to pay for the **representative's** handling this dispute are acceptable and that **we** may pay the bill for them.

The **insured person** and their **representative** must take every step to recover **legal expenses**. The **insured person** must pay any recovered **legal expenses** to their **representative's** who must then refund any **legal expenses** which **we** have paid or which **we** are due to pay.

If, during the claim, **we** think that Exclusion (c) may apply, **we** may not continue to support the **insured person's legal proceedings**.

Section 6 - Assistance Cover

6.1 Pre travel assistance

This part of the policy explains the services **we** provide before the **insured person** travels and **we** can be contacted on **020 8763 3115**.

Before the **insured person** travels **we** can provide them with the following advice and information:

- current visa and/or entry permit requirements for any country in the world
- current inoculation and vaccination requirements for any country in the world (**we** can also help the **insured person** arrange inoculations or vaccinations before they start a **trip abroad**)

We will not pay for the cost of vaccinations or inoculations

- current World Health Organisation warnings
- weather conditions
- languages
- time zones and differences
- motoring regulations and restrictions
- other motoring insurance issues
- main bank opening hours, national or bank holidays

6.2 Personal assistance

This part of the policy explains the administrative and delivery costs **we** will pay for when providing the following services.

What is covered:

- 6.2.1 If the **insured person** needs **money** urgently and access to their normal financial or banking arrangement is not available locally **we** will transfer emergency funds intended to cover their immediate emergency needs to them if they allow **us** to debit a credit or charge card, or arrange for funds to be deposited with **us** in their **country of residence**.

The most **we** will transfer under this policy, per **trip** is £500.

- 6.2.2 If the **insured person** suffers an illness, accident or has unforeseen travel delay problems, **we** will send two urgent messages to their **home**.
- 6.2.3 If the **insured person** needs **us** to, **we** will help:
- replace essential drugs or other medication which have been lost or which they cannot get **abroad**;
 - replace prescription glasses or contact lenses which have been lost or broken and which they cannot get **abroad**;
 - obtain blood supplies which they cannot obtain **abroad**.
- 6.2.4 **We** will provide access to the names and addresses of local doctors, hospitals, clinics or dentists when the **insured person** wants a consultation or if minor **treatment** is needed.
(If any **treatment** other than for minor ailments is needed, they must advise **us** as soon as possible.)
- 6.2.5 If the **insured person's personal baggage** has been lost and the carrier has not found it for them, **we** will help trace their **personal baggage** and deliver it to them. **We** will need their baggage tag number.
- 6.2.6 If the **insured person's** tickets and travel documents, including their passport, have been lost or stolen, **we** will help them to replace these and refer them to a suitable travel office.
- 11.2.7 If the **insured person's** credit or debit cards are lost or stolen, **we** will tell their credit or debit card company in their **country of residence** if they ask **us** to.
- 11.2.8 If the **insured person** leaves any of their children in their **country of residence** when they go **abroad** and any of their children become ill or suffer injury **we** will, if they ask **us** to:
- arrange for medical advice to be made available;
 - arrange for medically advisable **treatment**;
 - monitor the situation until they return **home**.

What is not covered:

- The cost of any items unless they are insured under another section of this policy.

Section 7 - Business trips within employees country of residence

When **you** have paid the appropriate additional premium, as shown on the schedule, the following sections of cover will apply during **business trips**

undertaken within the **employees country of residence**:

Section 1.3 - Additional travelling costs incurred in repatriating the **insured person home**;

Section 1.6 - Additional travelling and accommodation costs for someone to stay with the **insured person** or escort them **home**;

Section 1.7 - Additional travelling costs incurred in returning the **insured person's** unsupervised children under 18 years of age to **home**;

Section 3 - Personal accident.

Section 4 - Personal legal responsibility.

Section 5 - Legal Protection.

Specific conditions applying to Section 7

1. The **insured person** must demonstrate to us that they have prebooked at least one night's overnight accommodation away from **home** prior to their departure for the **trip**.
2. **You** must comply with all the relevant Conditions listed under each of the above sections of cover.

Specific exclusions applying to Section 7

What is not covered:

- a) Any **trip** when the **insured person** is unable to demonstrate to our satisfaction that they have pre-booked at least one night's accommodation away from **home**.
- b) Everything which is listed as excluded under each of the above sections of cover.
- c) Any **trip** not undertaken for business purposes.
- d) The first £25 of each claim, for each person insured under this policy which must be paid by the **insured person** for each incident, under each section of cover the **insured person** claims.



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Registered Office Bupa House 15-19 Bloomsbury Way London WC1A 2BA