



NMC OVERSEAS MEDICAL EXPENSES POLICY WORDING





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Important information

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1. Cancellation

NMC may cancel this policy by giving **us** 30 days' written notice. **We** will not provide any cover after the termination date.

2. Contact us

- 2.1 General Enquiries: If **you** have any questions or are in any doubt about the cover, please call **our** travel helpline on **+264 61 254 695** during office hours.
- 2.2 Refer to authorisation of expenses for contact details of **our** 24-hour emergency assistance helpline.

3. Complaints

If **we** do not accept **your** claim or if **you** do not agree with the amount of the claim, **you** may ask **us** to review **our** decision. **You** must send NMC a written request to review within 90 days of receiving **our** claims letter.

4. Financial loss

We will not pay you more for the actual financial loss **you** suffered.

5. Information you give us

The information **you** give **us** will be stored on databases and shared with other parties in the insurance industry to gather industry statistics and combat fraudulent claims. **We** can access the information even after **your** policy with **us** ends.

- 5.1 **You** acknowledge that sharing information for underwriting and claims purposes is in the public interest, as it will enable insurers to underwrite policies, assess risks fairly and reduce the incidence of fraudulent claims with a view to limiting premiums.
- 5.2 **You** hereby waive any right to privacy concerning any underwriting and claims information (on **your** behalf and on behalf of anyone **you** represent herein) regarding any insurance policy or claims made or lodged by **you** or on **your** behalf.
- 5.3 **You** consent to such information being stored in the shared database, and **we** may use the information as set out above.
 - 5.3.1 **You** also consent that **we** may disclose such information to any insurer or its agent.
 - 5.3.2 **You** further consent that **we** may verify any underwriting information against legally recognised sources or databases.
 - 5.3.3 **You** agree that this consent clause will survive termination for whatever reason of the policy, including its cancellation or lapse.

6. Interest

We do not pay interest unless ordered to do so by a court of law in **your home country**.

7. Insurable interest

This is **your** policy, and only **you** have rights under this policy. **You** can only claim for expenses paid by **you**.

8. Legal

- 8.1 The policy is a legal contract between **NMC** and **us**. This policy document provides **you** with the terms, conditions and exclusions of the international extension cover.
- 8.2 This policy is subject to **your home country's** law.

9. Not a medical aid

The intention of this cover is to stabilise and repatriate **you**. This policy is not a medical aid, and does not provide cover for treatment in **your home country** after repatriation. For example, if you fall and break **your** leg while skiing in Italy and it needs further operations and physio therapy once **you** have returned to **your home country**, this policy does not cover any of the costs incurred in **your home country**.

10. More than one policy underwritten by us

We shall never pay more than the **limit** of whichever policy has the highest **limit** of cover. For example, if one section in terms of this policy covers medical expenses up to 5,000 and the second policy with **us** covers medical expense up to 7,000. In that case, the maximum **we** will pay is 7,000.

11. Policy documents

- 11.1 The policy wording explains the benefits, conditions, exclusions and claims requirements and the schedule of benefits.
- 11.2 **You** may obtain a letter of confirmation from NMC. The letter is a summary of the cover. **You** must refer to this policy wording for full details of the terms, exclusions and conditions of cover.
- 11.3 **You** must read the policy wording, the visa letter and any endorsement as one document. All the headings you see merely help **you** find information quickly. **You** must not take them to affect the interpretation of the policy. **You** must read all the sections in **your** policy document and ensure that **you** understand **your** cover and responsibilities. **You** must contact **us** if **you** have any questions.
- 11.4 Should there be any conflict between the contents of the policy wording and the contents of the schedule, **we** will give the schedule precedence.

12. Third party claims

We may finalise the claim by paying you up to the **limit** or an amount for which the third-party claim may be settled. This will release **us** from any further liability for the claim.



Who qualifies for the cover?

Six things **you** must know about this policy.

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1. Age limits

You must be younger than the below ages at the time the loss occurs:

1.1 70 years for any claim related to:

1.1.1 **pre-existing medical conditions**

1.2 66 years for any claim relating to:

1.2.1 an **infectious and contagious disease**, for example: COVID-19

1.2.2 any heart attack or stroke or complications that can reasonably be related thereto, whether pre-existing or not

1.3 80 years for all other claims

2. Resident of your home country

You must have the necessary written permission from **your home country's** authorities to reside and or work in **your home country**, and **you** must be physically present in **your home country** for more than 6 months during the last 12 months. **We** will not pay any claim if **you** cannot produce written consent.

3. Return to your home country

3.1 Travel by aircraft or cruise ship: Before you leave **your home country**, **you** must have booked a reservation with a confirmed departure date from **your home country** and a confirmed departure date back to **your home country**. **We** do not cover one-way trips.

3.2 Travel by road: Cover is subject to "Where **we** will cover **you**". **We** do not cover one-way trips.

4. Where we will cover you

4.1 **We** do not cover travel claims within **your home country's** borders.

4.2 **We** do not cover **you** when **you** travel to the high-risk countries listed below:

4.2.1 Afghanistan, Burkina Faso, Central African Republic, Egypt (the area of North Sinai), Eritrea, Guinea, Guinea-Bissau, Haiti, Iraq, Iran (within 100kms of the entire Iran/Afghanistan border, Iran within 10km of the entire Iran/Iraq border and the province of Sistan-Baluchistan, the area east of the line running from Bam to Jask, including Bam), Liberia, Libya, Mali, Niger, North Korea, Sierra Leone, Somalia, Syria and within 10kms of the border to Syria in any other country, South Sudan, Venezuela, Yemen.

4.2.2 Any country where the government has announced a state of emergency with the exception of emergencies relating to an **infectious and contagious disease**.

4.2.3 Any country where the United Nations Armed Forces are present and active.

4.2.4 The trade or economic sanctions, laws or regulations of the European Union, United Kingdom or the United States of America should **we** be exposed to any sanction, prohibition or restriction.

5. When cover starts

Your cover (and this policy) starts when **you** pass through passport control from **your home country**.

6. When cover ends

6.1 The Overseas Medical benefit ends on the earliest of the following dates:

6.1.1 When **you** pass through customs back into **your home country**.

6.1.2 00:01 on day 91 after **your** date of departure from **your home country**, or

6.1.3 00:01 on the date **you** reach the maximum age limit

6.1.4 On the date **we** arrange an available flight/transport for repatriation back to **your home**

6.2 **We** will extend **your** policy automatically if **you** have an overseas medical claim approved by **us** whilst on **your trip** before **your** policy end date.

6.3 **We** cannot extend the duration of **your** cover beyond 90 days if **you** cannot return to **your home country** due to travel restrictions..

Key words to understand

We show words with special meanings in **bold**.
We define the words in the next pages to assist
you in understanding **your** policy.



1. Complications of pregnancy and childbirth

The following unexpected medical events that occur more than 15 weeks prior to the expected delivery date: toxæmia, gestational hypertension, pre-eclampsia, ectopic pregnancy, hydatidiform mole (molar pregnancy), postpartum haemorrhage, retained placenta membrane, placental abruption, hyperemesis gravidarum, placenta praevia, stillbirths, miscarriage, medically necessary emergency Caesarean sections and any premature births.

2. Close contact

You are considered to be in close contact with someone who tested positive for an **infectious and contagious disease** when:

- 2.1 **You** were within two (2) meters of this person for a total of 15 minutes or more
- 2.2 **You** provided care at home to this person
- 2.3 **You** had direct physical contact with this person (hugged or kissed them)
- 2.4 **You** shared eating or drinking utensils
- 2.5 They sneezed, coughed, or somehow got respiratory droplets on **you**

3. Dental

Emergency pain-stilling treatment to teeth. This cover excludes capped teeth, dentures, or existing conditions related to **your** teeth, such as cracks.

4. Eligible expenses

Expenses authorised by **us** for:

- 4.1 Doctor's fees, surgery, x-rays, inpatient treatment, prescription medication, the once-off cost of **your** taxi to the nearest suitable hospital or the cost of an ambulance to the nearest suitable hospital when **you** are admitted as an inpatient.
- 4.2 One test per person for a virus contracted whilst on **your trip** when **your** test result is positive.

5. Emergency assistance provider

Refers to a company authorised by **us** to assist you while **you** are on **your trip**.

6. Evacuation

Medical evacuation: **we** arrange either an ambulance or a flight from the place where **you** are injured or sick (during a **trip**) to the nearest appropriate hospital.

7. Excess

The amount **you** have to pay first before **you** can claim under any section of this policy, per person.

8. Home

Your primary place of residence, used for domestic purposes in **your home country**.

9. Home Country

Namibia or a SADC country where **you** have spent the last six (6) months residing in.

10. Infectious or contagious disease

Means any disease transmitted from an infected person, animal or species to another person, animal or species by any means when the World Health Organisation (WHO) declares the outbreak a Public Health Emergency of International Concern (PHEIC), for example, **COVID19**.

11. Illness

An illness or disease that a **medical practitioner** diagnosed and meets all of the following criteria:

- 11.1 There is a present severe or acute symptom requiring immediate care.
- 11.2 The failure to obtain such care could reasonably result in serious deterioration of **your** condition or place **your** life in jeopardy

12. Injury

A sudden **injury** because of violent, external and **accidental** means that happened at an identifiable place and time whilst on **your trip**.

13. Inpatient

Hospital admission by a doctor (including daycare) where you receive treatment, accommodation and food and spend at least 24 consecutive hours.

14. Insured event/benefit

An **insured event** is a single incident or series of incidents directly related to the same cause, that is listed in this policy and results in a claim. **We** do not cover claims for any event **we** do not list in this policy.

15. Life threatening medical condition

Medical emergency where there is a possibility that **you** may die if not treated immediately, for example:

- A serious allergic reaction that appears quickly and may cause death
- Broken bone/s
- High-risk burn wounds, for example, burns to **your** face, hands or feet
- Diving accidents or drowning
- Heat stroke with a temperature higher than 39 degrees Celsius
- Diabetic coma or insulin shock
- Low body temperature (below 35 degrees Celsius)
- Joint dislocation
- Poisoning
- Choking
- Convulsions, seizures or loss of consciousness
- Heavy, uncontrollable bleeding that you cannot stop
- Deep knife wounds or gunshot wounds
- (Signs of) a heart attack (i.e. chest pain lasting longer than two minutes)
- (Signs of) a stroke (loss of vision, sudden numbness, weakness, slurred speech)

16. Limit

The maximum amount that **we** will pay per insured person per benefit for **a loss**. The **limits** for all benefits are **set** out in the schedule.

17. Manual work

Unskilled, semi-skilled or skilled physical labour other than in a purely managerial/supervisory, sales or administrative capacity.

18. Medical practitioner

A legally licensed member of the medical profession, recognised by the law of the country where **you** are treated and who, in rendering such treatment, is practising within the scope of his/her licence and training. This person cannot be a **close relative** of either **yourself** or **your** travel companion.

19. Outpatient

Emergency department services, **urgent care** or **outpatient** services when a doctor has not written an order to admit you to a hospital as an **inpatient**.

20. Period of insurance

The period of **your trip**, subject to **when cover starts** and **when cover ends**.

21. Pre-existing medical condition

- 21.1 Permanent or long-term chronic medical conditions, for example:
 - 21.1.1 Alzheimer's, stroke, aneurysm, heart attack, dementia, depression or a terminal disease,
 - 21.1.2 Any respiratory disease, e.g. Emphysema, Chronic obstructive airway disease (COAD), Chronic obstructive pulmonary disease (COPD), Chronic bronchitis or Cystic fibrosis
 - 21.1.3 **You** periodically visit a medical practitioner for treatment, or **you** have prescribed medication over an extended period of time, for example: diabetes, epilepsy, asthma, high blood pressure, high cholesterol or blood clots.
- 21.2 Medical conditions that existed 6 months or less before **your** departure date, for which:
 - 21.2.1 **you** have been prescribed medication; however, you still have symptoms after you used the medication
 - 21.2.2 **you** consulted a medical doctor or specialist, but you still have symptoms after the consultation
 - 21.2.3 **you've** undergone surgery
 - 21.2.4 **you** have symptoms for which you are awaiting results of tests or investigations where the underlying cause has not been identified, or **you** need a follow-up visit with a medical doctor.
 - 21.2.5 **you** are on the waiting list for medical treatment
 - 21.2.6 Been hospitalised or attended the emergency department
 - 21.2.7 Experienced angina (chest pain)
 - 21.2.8 Receive ongoing treatment with prednisone or other immunosuppressant therapy
 - 21.2.9 Received physiotherapy or chiropractic treatment
- 21.3 Any condition for which you have ever required spinal or brain surgery
- 21.4 Any condition which has caused a seizure in the last 12 months
- 21.5 Joint replacement surgery over 10 years ago
- 21.6 **You** have had or are on the waiting list for an organ transplant
- 21.7 Flu symptoms accompanied by shortness of breath, chest pain, sudden dizziness or confusion two weeks or less before departure
- 21.8 Congestive heart failure which required a coronary angiography, stents or bypass grafting
- 21.9 A pacemaker or AICD (internal defibrillator)

22. Quarantine

A **medical practitioner** gives you a letter to isolate **yourself** from other people (no contact with other people) when:

- 22.1 **you** test positive for an **infectious or contagious disease**, or
- 22.2 **you** were in **close contact** with someone.

NOTE: It is a condition of cover to provide a letter from the hotel confirming you are booked into quarantine accommodation. If **you** have been fully vaccinated against the disease and show no symptoms **you** do not qualify for quarantine where the country's health protocols do not require self-isolation/quarantine.

23. Repatriation

Your return to **your home country**.

24. Snow sports - approved

- 24.1 Snow skiing and snowboarding on-piste within the resort boundaries on groomed runs patrolled or monitored by resort authorities.
- 24.2 Using a snowmobile/skidoo on a guided tour with a licensed tour operator.
- 24.3 Husky sledge driving (exclude endurance and racing)
- 24.4 Ice skating (indoor and outdoor rinks/exclude racing)
- 24.5 Tobogganing (exclude racing and competition) or Curling

25. Sporting activities – approved

When **you** participate non-professionally in the listed sports below, excluding competitions:

- 25.1 Abseiling
- 25.2 Acrobatics
- 25.3 Aerobics
- 25.4 American football
- 25.5 Athletics
- 25.6 Archery
- 25.7 Badminton
- 25.8 Banana boat rides
- 25.9 Baseball
- 25.10 Basketball
- 25.11 BMX cycling (exclude racing and competition)
- 25.12 Blackwater rafting
- 25.13 Boating, sailing
- 25.14 Bowling (lawn & ten pins)
- 25.15 Boxing (training, no contact)
- 25.16 Bungee jumping less than 30 meters when you use a body harness as a backup
- 25.17 Camel riding for a day or if you are on a camel trek
- 25.18 Canoeing (inland or 10km coastal waters limit)
- 25.19 Canyon swings less than 30 meters when you use a body harness as a backup
- 25.20 Clay pigeon shooting
- 25.21 Cricket
- 25.22 Cycling (excluding racing and competition)
- 25.23 Dancing (ballroom, salsa, Capoeira, ballet, contemporary, jazz, hip hop)
- 25.24 Dirt boarding
- 25.25 Dragon boating
- 25.26 Dune buggy
- 25.27 Elephant riding for an hour, a day or overnight
- 25.28 Fencing

- 25.29 Fishing (leisure: deep sea, angling, fly fishing, on a river, boat, or standing in a lake)
- 25.30 Fly by wire
- 25.31 Football
- 25.32 Go-karting (recreational)
- 25.33 Golf
- 25.34 Gym - including weights, Pilates, aqua aerobics, yoga
- 25.35 Gymnastics
- 25.36 Handball
- 25.37 Hiking (under 6,000 meters altitude/organised tours/clearly marked routes. Exclude solo treks, mountaineering, search and helicopter rescue)
- 25.38 High diving (less than 10 meters)
- 25.39 Hockey (field or indoor/exclude ice hockey)
- 25.40 Horse riding (leisure, non-competitive/exclude polo, hunting and jumping)
- 25.41 Hot air ballooning (excluding racing and competition)
- 25.42 Jet boating
- 25.43 Jet skiing (exclude competitions)
- 25.44 Jogging
- 25.45 Kayaking - white water, sea, river, lake
- 25.46 Kiteboarding
- 25.47 Kite surfing (excluding racing, competition and surfing during a storm)
- 25.48 Land surfing
- 25.49 Marathons
- 25.50 Martial arts training (exclude contact and competitions)
- 25.51 Moped, scooter (Valid driver's licence for operating this class of vehicle; must be wearing a helmet)
- 25.52 Motor experience as a passenger only (excluding racing)
- 25.53 Motorcycle riding/touring: independent or an organised tour (Valid driver's licence for operating this class of vehicle required/must be wearing a helmet/exclude off-road, racing and competition)
- 25.54 Mountain biking (exclude racing and competition)
- 25.55 Mountaineering or hiking: not using ropes, at an altitude less than 4,000 meters as part of an organised group on a marked route
- 25.56 Netball or Softball
- 25.57 Paint ball
- 25.58 Quad biking (not exceeding 250 cc/exclude racing and competition)
- 25.59 Racquetball
- 25.60 Roller skating, Roller blading/inline skating
- 25.61 Rowing/sculling, surf boat rowing (inland or 10km coastal waters limit)
- 25.62 Rugby school level participation only
- 25.63 Running or jogging, including half-marathon or less, marathon and ultra-marathon distances
- 25.64 Safari tours (exclude hunting/guns)
- 25.65 Sail boarding/wind surfing/Sailing
- 25.66 Sandboarding/sandskiing

- 25.67 Scuba diving (when an open water diving licence is held and diving with a buddy diver, or diving with a licensed instructor/maximum depth 30m)
- 25.68 Shark cage diving
- 25.69 Segway tours
- 25.70 Skateboarding (exclude competitions)
- 25.71 Snorkelling
- 25.72 Soccer
- 25.73 Speed boating (as a passenger on a licensed carrier)
- 25.74 Squash
- 25.75 Stand-up paddle surfing/paddle boarding
- 25.76 Surfing (exclude competition)
- 25.77 Swimming
- 25.78 Tennis
- 25.79 Tuk Tuk as a passenger (excludes Tuk-tuk racing)
- 25.80 Volleyball
- 25.81 Wakeboarding (exclude competition)
- 25.82 Wall climbing (artificial/Proper harness wear and usage/exclude racing and competition)
- 25.83 Water polo
- 25.84 Water skiing (exclude competition)
- 25.85 White water rafting (grades 1 to 4)
- 25.86 Windsurfing (exclude competition)
- 25.87 Yachting (inside territorial waters/excluding racing and competition and being a crew member)
- 25.88 Yoga
- 25.89 Zipline
- 25.90 Zorbing (exclude racing and competition)

26. Terrorism or Terrorist attack

- 26.1 An act of force or violence against the civilian population committed for political, religious, ideological or ethnic purposes.
- 26.2 The country where the act took place must certify the act or acts as an act of **terrorism**.

27. Trip

When travelling directly and uninterruptedly on an international journey outside the borders of **your home country**.

28. United States of America: Preferred Provider Organisation

This policy provides cover within a Preferred Provider Organisation (PPO) network in the U.S.A. If **you** receive treatment at a provider in **our** PPO network, **we** will pay authorised expenses directly to the provider. **You** must call **our** emergency number listed on **your** policy schedule for details of the nearest PPO provider when **you** are in the U.S.A. **We** do not pay for expenses or treatment **you** receive from a provider not within **our** PPO network.

29. United States of America: Urgent care centre

Urgent care centres in the U.S.A. differ from emergency rooms. **Urgent care** centres assist patients with an **illness** or **injury** that does not appear to be **life-threatening**, but also cannot wait until the next day, for example:

- Flu or Cold, Fever, Headaches, and Chills

- Sprains
- Allergic reactions
- Minor burns
- Dehydration
- Earache, Headaches
- Sprains and strains
- Urinary tract infections
- Diagnostic services limited to X-rays and laboratory tests
- Eye irritation and redness
- Vomiting, diarrhoea or dehydration
- Severe sore throat or cough
- Urinary tract infections

30. We, our or us

The Hollard Insurance Company of Namibia (Hollard). Hollard is a registered short-term insurer and licensed financial services provider.

31. You/Your

We will provide the services and benefits described in this policy to Active NMC Members qualifying for the Overseas Medical Extension benefit and not older than the age limit on the date of loss.

The rules of cover

If **you** do not follow them, **we** may refuse to pay **you** out for a claim or reduce the amount **we** pay **you**.

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1. Authorise expenses

- 1.1 **You** must call **us** on the emergency number provided on **your** policy schedule when:
 - 1.1.1 **You** are conscious and do not require treatment for a life-threatening medical condition before **you** receive treatment.
 - 1.1.2 In the event of treatment for a **life-threatening medical condition**, you must call **us** within 24 hours of the initial treatment.
 - 1.1.3 If **you** are unconscious or conscious but cannot call because of **your** condition, someone else (family member or travel companion) must call **us** on **your** behalf within 24 hours when they know about **your** treatment.
- 1.2 **We** will authorise treatment for a specific procedure and/or a number of days when **we** have confirmed the medical necessity of the treatment you require. **We** base **our** decision upon the accuracy and completeness of information **you/your close relative/travel companion or medical practitioner** give to **us**.
- 1.3 **You** must call **us** immediately if **your** condition changes or additional days of inpatient treatment are required.
- 1.4 **We** reserve the right to dispute or challenge any authorisation **we** have given if **we** receive new information that changes **our** decision.
- 1.5 Authorisation is not a guarantee of payment. The fact that **we** give authorisation does not guarantee payment or the availability of treatment. Authorisation remains subject to this policy's terms, conditions and exclusions.
- 1.6 **You** must tell the medical practitioner or hospital that this policy requires authorisation from **us** and ask them to cooperate with **us** fully.
- 1.7 If **you** do not follow **our** instructions or if treatment is not authorised, **we** will limit **your** claim or not pay **your** claim at all.

2. Claim form and supporting documents

You must send **us** the completed claim form and all the supporting documentation **we** may require to assess **your** claim immediately but not later than 30 days of **your** date of return to **your home country**.

We do not pay for the cost of obtaining supporting documentation. Some documentation may be required immediately before confirming cover in a medical emergency. Examples of supporting documentation **we** may require:

- 2.1 A medical report from the treating doctor with the following information:
 - 2.1.1 Hospital admission and discharge report
 - 2.1.2 Diagnosis
 - 2.1.3 Date of first consultation
 - 2.1.4 Treatment provided
 - 2.1.5 Cause of medical problem
 - 2.1.6 Medical reason if **you** are unfit to fly
 - 2.1.7 Six months medical history for any claim relating to an **illness**
- 2.2 A doctor's letter to confirm you must place **yourself** in **quarantine**.
- 2.3 Receipts listing items purchased, or an itemised invoice listing the cost of services
- 2.4 Proof that **you** paid for all expenses claimed, e.g., a copy of **your** bank statement.
- 2.5 **Your** original airline tickets that were booked from and back to **your home country**
- 2.6 If **your** flights were changed, the amended airline tickets

2.7 **You** must give **us** written confirmation of the accident from the official body in the country where the accident happened, e.g., the police report.

3. Court judgement

You must give **us** any court judgement demanding payment within 48 hours of receipt.

4. Death

We must receive notice of death within 48 hours of issuance.

5. Flight ticket

We have the right to use **your** return ticket when **we** agree to repatriate you to **your home country**.

6. Information you give to us

6.1 **You** must tell **us** immediately in writing of any material information that may increase the risk of loss. Material information is information that affects **our** decision to insure **you**. **We** will send you a written endorsement if **we** agree to cover the change/s.

6.2 **You** must be honest and act in good faith in relation to this policy. Examples of fraudulent or dishonest behaviour are:

6.2.1 Providing false information when you submit a claim or when **you** purchase a policy

6.2.2 Making a claim that **you** know to be false, fraudulent or exaggerated .

6.2.3 Not telling **us** that you also claim from another insurance company for the same event or loss

6.3 If any of this information is incomplete or incorrect,

6.3.1 **you** Will Lose **Your** Right To Claim, And/Or

6.3.2 **We** May apply special conditions, for example, a reduced sum insured or a **higher excess**.

7. Legal

You must help **us** if **we** decide to start legal proceedings against any person or company responsible for the loss. **We** may take legal action against another person or company in **your** name.

8. Pay back costs

You must pay back costs not covered by this policy to **us** within 30 days of the date **we** paid the cost.

9. Police report

You must inform the police immediately, but no later than 24 hours after theft/mugging/accident.

10. Sign a release

You must sign a release and provide **us** with evidence of **your** bank details before **we** pay **you**.

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1. After 12 months

We do not cover any medical expenses **you** have to pay for after 12 months of the date of loss, or the first treatment date, for example: if **your** baggage was damaged on 1 January 2020. **No** claim is paid out by 1 January 2021; the claim will lapse and be time-barred.

2. Age limit

We do not cover any claims where **you** have reached the age **limit** on the date of loss.

3. Alcohol and drugs

We do not pay any claim caused directly or indirectly by:

- 3.1 Excessive alcohol consumption where you exceed either a breath alcohol content of 0.24mg per 1,000ml, or a blood alcohol limit of 0.05g per 100ml at the time **you** are admitted to a hospital or
- 3.2 The use of drugs or narcotics unless they were prescribed to **you** by a **medical practitioner** and they were taken as per a medical prescription, or
- 3.3 Alcohol abuse, alcoholism, substance abuse, solvent abuse, drug abuse or addictive conditions of any kind.

4. Authorisation not obtained

- 4.1 Medical: **We** do not pay for any costs when **we** did not authorise the treatment as listed in this policy.
- 4.2 **We** do not pay for the cost of additional flights or accommodation not approved and/or booked by us.

5. Consequential loss

This policy is a "listed perils" policy. **We** do not pay any claims when the cause of the claim is not listed under the "What is covered" section. For example, **we** do not pay for the following consequential losses (these are just examples and not the items **we** do not cover):

- 5.1 Cost of a taxi (other than **your** first **trip** to the hospital)
- 5.2 Search and/or rescue costs from a mountain or remote area
- 5.3 Telephone calls or faxes
- 5.4 Food and drinks
- 5.5 Interpreters' fees
- 5.6 Inconvenience or lack of enjoyment
- 5.7 Loss of earnings
- 5.8 Time-share fees and holiday points
- 5.9 Any additional travel or accommodation costs (unless booked by **us** when it is listed as a covered item).

6. Criminal act

We do not cover any claims related to **your** own illegal or criminal act.

7. Delay in services received

The policy does not cover any loss, medical complication or death arising from the provision of, or any delay in providing the services to which this policy relates, whether provided by **us** or by anybody else.

8. Employment

We do not pay claims related to:

- 8.1 **Manual work** involving hands-on involvement with the installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant (other than in a purely managerial/supervisory, sales or administrative capacity)
- 8.2 The undertaking of any trade of plumber, electrician, lighting or sound technician, carpenter, painter decorator or builder, or manual labour of any kind (other than in the catering industry)
- 8.3 When you work as crew on any flight or any sea vessel
- 8.4 When you are not travelling as a fare-paying passenger,
- 8.5 Working with explosives
- 8.6 Performing work in any police force, military force, militia or paramilitary organisation
- 8.7 Underground mining and tunnelling
- 8.8 The manufacture of ammunition and the refining of petroleum

9. Factors beyond our control

The medical standards, sanitary conditions, reliability of telephone systems and availability of facilities.

We do not accept responsibility for any loss, medical complication or death resulting from any factor reasonably beyond **our** control.

10. Fit-to-travel

You are not covered when:

- 10.1 **You** travel against the advice of a medical doctor.
- 10.2 You travel to obtain medical treatment.
- 10.3 Receive treatment for symptoms that started before **your trip** for which **you** are awaiting a consultation or results of tests and/or **you** have not confirmed the underlying cause.

11. Flights and accommodation

We do not pay for the cost of additional or new flights and accommodation unless it is listed under "What **we** pay"; for example: **we** do not pay for the cost of new flights if **you** cannot return to **your home country** on the booked date except when **we** have authorised **your** inpatient treatment. **We** arranged a medical repatriation flight to **your home country**.

12. Infectious or contagious disease

- 12.1 **We** do not cover claims in any way caused by or resulting from an infectious or contagious disease (other than the cover provided for COVID-19) when a **medical practitioner** diagnosed **you** after the WHO declaration. This exclusion will continue to apply until the WHO cancels or withdraws any relevant PHEIC
- 12.2 **We** do not pay for COVID-19 related claims when **you** are:
 - 12.2.1 66 years or older, or
 - 12.2.2 If **your** BMI (body mass index) is 35 or above, or
 - 12.2.3 If you have a combination of both:
 - 12.2.3.1 Diabetes and high blood pressure (or using medication to control **your** blood pressure), or
 - 12.2.3.2 Diabetes and high cholesterol (or using medication to control **your** cholesterol).
 - 12.2.4 The cost of any tests when the test result is negative.
 - 12.2.5 The cost of any tests that are a requirement for travelling clearance purposes.

13. Medical (also refer to pre-existing medical conditions)

We do not cover any claim relating to the below (whether pre-existing or not):

- 13.1 Cancer or any terminal illness
- 13.2 Heart attack or stroke when **you** have a combination of:
 - 13.2.1 Diabetes and either/or high blood pressure, high cholesterol, high blood lipids (or **you** are using medication to control any of these conditions)
- 13.3 Deep vein thrombosis (DVT) when you also have either/or high blood pressure, high cholesterol, high blood lipids (or **you** are using medication to control any of these conditions)
- 13.4 Specialist tests: This policy does not cover magnetic resonance imaging (MRI), computerised axial tomography CAT scans, sonograms, biopsies, cardiac catheterisation or any cardiac procedures, or surgeries of any kind unless **we** have approved these in advance or unless performed on a life saving basis in the Emergency Department
- 13.5 Sexually transmitted diseases.
- 13.6 Treatment or surgery for cosmetic purposes
- 13.7 Routine optical and/or dental treatment, e.g., an eye test
- 13.8 Myalgia, which is the medical term for general muscle pain
- 13.9 Suicide, attempted suicide, intentional self-injury, anxiety, mental illness, insanity, psychiatric, psychological, emotional or nervous conditions including but not limited to:
 - 13.9.1 Dementia, depression, anxiety or stress
 - 13.9.2 Behavioural diagnosis such as autism
 - 13.9.3 Eating disorders
- 13.10 Treatment received in a private clinic or private hospital that has not been authorised by **us** before **you** received treatment and where there is no alternative facility within a 100-kilometre radius
- 13.11 Any costs incurred after **you** pass through passport control into **your home country**.
- 13.12 Treatment or surgery that, in **our** opinion (in consultation with the treating doctor) can reasonably wait until **your** return to **your home country**
- 13.13 Over-the-counter medication (without a prescription)
- 13.14 when **you** are travelling:
 - 13.14.1 Against the advice of a medical practitioner
 - 13.14.2 To another country for treatment or medical consultations
- 13.15 The cost of the coffin or urn.

14. One-way ticket or emigration

You do not qualify for any cover when **you** travel from **your home country** on a one-way ticket or **you** travel intending to emigrate.

15. Outpatient treatment

We do not cover the costs of **outpatient** treatment or related expenses, for example: prescription medication received as an **outpatient**.

16. Pregnancy

This policy does not cover any claim when:

- 16.1 **You** are 26 weeks or more pregnant on the date of loss

- 16.2 Where the claim is not a direct result of a **complication of pregnancy**
- 16.3 The claim is related to birth control, childbirth, antenatal care or the care of a newborn child.

17. Pre-existing medical conditions (also refer to medical)

We do not pay any claims related directly or indirectly to a **pre-existing medical condition** listed below:

- 17.1 **Outpatient** treatment
- 17.2 **Inpatient** treatment when **you** have been admitted for less than 48 hours
- 17.3 Medication regulating a **pre-existing medical condition** (chronic medication)
- 17.4 **You** require home oxygen therapy, or **you** will require oxygen for **your** trip
- 17.5 **You** have chronic renal failure
- 17.6 Epilepsy if **you** use two or more anti-convulsive medications or **your** medication has changed in the last 12 months.
- 17.7 When **you** have any undiagnosed symptoms, e.g., symptoms for which **you** are awaiting investigations/consultations or awaiting results of investigations, where the underlying cause has not been confirmed by a **medical practitioner**
- 17.8 Medical conditions that existed 6 months or less before **your** departure date:
 - 17.8.1 **You** have been prescribed medication. However, you still have symptoms after using the medication
 - 17.8.2 **You** consulted a medical doctor or specialist, but **you** still have symptoms after the consultation
 - 17.8.3 **You** had surgery, or **you** are waiting for surgery
 - 17.8.4 **You** have symptoms for which **you** are awaiting results of tests or investigations where the underlying cause has not been identified, or **you** need a follow-up visit with a medical doctor.
 - 17.8.5 **You** are waiting for medical treatment
 - 17.8.6 Been hospitalised or attended the emergency department
 - 17.8.7 Experienced angina (chest pain)
 - 17.8.8 Receive ongoing treatment with prednisone or other immunosuppressant therapy
 - 17.8.9 Received physiotherapy or chiropractic treatment
- 17.9 Any condition for which **you** have ever required spinal or brain surgery
- 17.10 Any condition which has caused a seizure in the last 12 months
- 17.11 Joint replacement surgery over 10 years ago
- 17.12 **You** have had or are on the waiting list for an organ transplant
- 17.13 Flu symptoms accompanied by shortness of breath, chest pain, sudden dizziness or confusion 2 weeks or less before departure
- 17.14 Congestive heart failure which requires a coronary angiography, stents or bypass grafting
- 17.15 A pacemaker or AICD (internal defibrillator)
- 17.16 Had a stroke or heart attack
- 17.17 Diabetes when:
 - 17.17.1 **You** have been diagnosed in the last 12 months, and/or
 - 17.17.2 **You** have eye, kidney, nerve or vascular problems, and/or

17.17.3 **You** have either/or high blood pressure, high cholesterol, high blood lipids (or **you** are using medication to control any of these conditions)

17.17.4 Type I diabetes when **you** are older than 65 years of age

17.18 Any respiratory disease, e.g., Emphysema, Chronic obstructive airway disease (COAD), Chronic obstructive pulmonary disease (COPD), Chronic bronchitis or Cystic fibrosis

17.19 Asthma is when **you** are 60 years of age or older, and **you** also have a respiratory disease as listed above

18. Repatriation

18.1 **We** have the right to demand that you return to **your home country**. If **we** confirm a date and time when it is feasible for **you** to return, but **you** decide to stay overseas, all expenses incurred after **you** have decided not to return will not be covered by this policy.

18.2 **We** do not pay for the cost of repatriation on a commercial flight when **you** travel by road.

19. Rescue costs

You are not covered for:

19.1 Any air-sea rescue costs

19.2 Any rescue costs related to altitude illness, including travel costs from the mountain to the hospital

19.3 Any rescue costs to bring **you** down from a mountain

20. Specific items

We do not pay claims related to the following items:

20.1 Contraceptive devices

20.2 Crutches or a brace of any kind

20.3 Dentures

20.4 Prosthetic devices, crutches, a brace and a sling

20.5 New or replacement spectacles

21. Sport

You are not covered when **you** participate:

21.1 In any sport that is **not** listed as an approved sport in this policy

21.2 As a professional sportsman or woman, e.g., ski instructors and motor racing drivers

21.3 In a competition

22. Terrorism, war and public disorder

22.1 This policy does **not** cover any claim(s) in any way caused or contributed to by an act of **terrorism** involving any nuclear weapon or device, chemical or biological agent or radioactive contamination.

22.2 **We** do not pay for any loss or damage directly or indirectly related to or caused by **your** active participation in:

22.2.1 War, invasion, act of foreign enemy, hostilities or war-like operations (whether war is declared or not) or civil war.

22.2.2 Mutiny, military uprising, martial law or state of siege, insurrection, rebellion or revolution.

22.2.3 Any act in protest against any state or government, or any provincial, local or tribal authority, or for the purpose of inspiring fear in the public.

Policy benefits

What we cover

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1. Overseas medical expenses

1.1 What we cover

Eligible expenses for the immediate treatment of your:

- 1.1.1 Unexpected **illness**
- 1.1.2 Serious **injury** not related to a sporting activity
- 1.1.3 Serious **injury** whilst participating in an approved snow sport
- 1.1.4 Serious **injury** whilst participating in an approved sporting activity
- 1.1.5 Emergency **dental** treatment due to a healthy, natural tooth infection or pain stilling treatment
- 1.1.6 **Your** sudden death because of an unexpected **illness** or serious **injury**
- 1.1.7 **Inpatient** treatment for **pre-existing medical conditions**


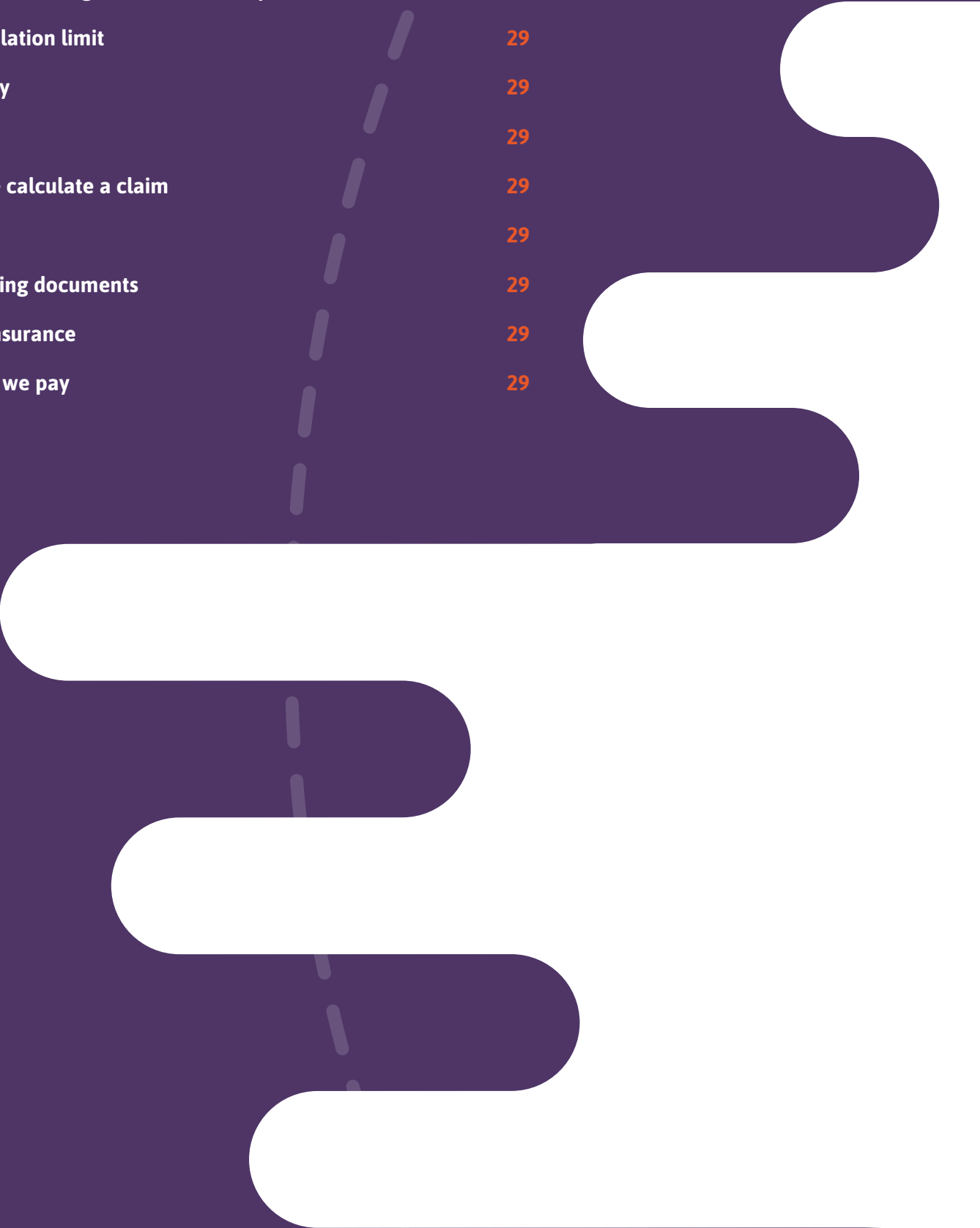
1.2 What we pay

We will pay up to the limit in the schedule for:

- 1.2.1 **Eligible expenses** authorised by **us** before you receive treatment for an unexpected illness or serious injury, that is not life-threatening: **We** will pay the provider up to the limit in the policy schedule.
- 1.2.2 **Eligible expenses** received in the Accident & Emergency department (A&E), emergency room (ER) or casualty department for an unexpected illness or serious injury, that is life-threatening: **We** will pay the provider up to the limit in the Schedule when **you** contact **us** immediately when **your** condition has been stabilised
- 1.2.3 **Eligible expenses** not authorised by us: **We** will reimburse **you** up to the limit in the policy schedule.
- 1.2.4 **We** will pay for the cost of **your** cremation at the place of death whilst on **your trip**, or the transport cost to fly **your** body or ashes back to **your home country**. Covered expenses are limited to:
 - 1.2.4.1 The collection of the body of the deceased
 - 1.2.4.2 The transfer of the body to a professional funeral home
 - 1.2.4.3 Embalming and preparation of the body or cremation if so desired
 - 1.2.4.4 Standard shipping casket
 - 1.2.4.5 Any required consular proceedings and permits
 - 1.2.4.6 Transferring the casket to the airport and boarding the casket onto the plane
 - 1.2.4.7 Airfare and the transfer of the deceased to their final destination.
- 1.2.5 **Medical repatriation or evacuation:** If **we** confirm with **your** treating doctor that **you** can transfer to another hospital or return back **to your home country**, **we** will pay for the following expenses when arranged by **us**:
 - 1.2.5.1 The cost to change **your** flight ticket when **you** departed from **your home country** on a ticket with a confirmed date to return to **your home country**, or
 - 1.2.5.2 The cost to be transported as a stretcher case on a commercial flight via the most cost effective itinerary, if a stretcher is medically necessary, and
 - 1.2.5.3 The return cost of a qualified medical escort to accompany **you**, if this is medically necessary or required by the airline, or
 - 1.2.5.4 The cost of an air ambulance
- 1.2.6 **Repatriation of children:** **We** will pay for an economy class airline ticket/s and an escort when booked by **us** to fly with **your** children back to **your home country** when there is no other adult booked with them, and **you** receive inpatient treatment.

Claims

How do we pay claims

- 
- 
- | | |
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1. 365 Days: Your right to claim will lapse

Your claim will no longer be legally enforceable after 365 days of the date of loss, unless **you** have started legal action against us.

2. Accumulation limit

If more than one person is injured or dies as a result of a crash or accident involving the same aircraft, cruise ship or any public transportation, **we** will not pay more than the accumulation limit in the schedule for all persons insured by **us** (whether on the same policy, or individual policies).

3. Currency

We will use either **your** bank statement as evidence of **your** financial loss, or the rate of exchange on the date of loss if **you** paid in a foreign currency.

4. Excess

You will always pay the first amount of every valid claim, also known as the excess. **We** show the excess in the Schedule.

5. How we calculate a claim

We consider a number of aspects in calculating the claim payment amount. These can include:

5.1 **We** never pay more than the **limit** of cover.

5.2 **We** always deduct the **excess** amount.

6. Interest

We do not pay any interest unless ordered by a court of law (or another presiding officer of a dispute such as Namfisa for Short Term Insurance) in **your home country**.

7. Supporting documents

We do not pay any claim where **you** do not provide **us** with the requested supporting documents, for example: no medical history when **you** are claiming due to an illness.

8. Other insurance

8.1 **More than one policy with us:** The maximum **we** will pay is the limit of the policy with the highest sum insured. For example: if **you** have a policy with **us** up to 10,000 and another policy up to 5,000 the maximum **we** will pay is 10,000.

8.2 **A policy with another company:** **We** will split the full amount of the claim between the different policies. You must tell **us** if you have any other insurance.

9. Who do we pay

We pay medical claims authorised by **us** before **you** receive treatment directly to the service provider (hospital). **We** pay all other claims to **you**, in **your home country**.

SCHEDULE OF BENEFITS

BENEFIT	LIMIT OF LIABILITY (per beneficiary, per trip)
Section 1: Overseas Medical Expenses – automatic cover	Refer to below
1.1 Unexpected illness 1.2 Serious injury not related to a sporting activity 1.3 Serious injury whilst participating in a listed snow sport 1.4 Serious injury whilst participating in a listed sporting activity	- Eligible expenses authorised by us: N\$10,000,000 - Eligible expenses not authorised by us: N\$10,000 - Passive war and terrorism: N\$5,000,000
Section 2: Overseas Medical Expenses – declared to us	Refer to below
2.1 Pre-existing medical conditions – declared and approved by us 2.2 Infectious and contagious diseases – declared and approved by us	- Eligible expenses authorised by us: N\$1,000,000 - Eligible expenses not authorised by us: N\$10,000
Section 3: Medical evacuation or repatriation arranged by us	Included in Section 1 or Section 2
Section 4: Dental	N\$2,000
Section 5: Pre-existing medical conditions	Refer to below
5.1 Pre-existing conditions are listed in the policy 5.2 Pre-existing medical conditions declared to us and approved by us	N\$1,000,000
Section 6: Cremation overseas, OR repatriation of mortal remains	Included in Section 1 or Section 2 when arranged by us
Section 7: Return of children	Economy airfare when arranged by us
Section 8: Assistance services	Assistance
Excess per member per claim	N\$20,000
Accumulation benefit	N\$50,000,000

