



Allied Insurance Company

OVERSEAS TRAVEL INSURANCE POLICY

IMPORTANT POINTS

This policy should be read carefully. It gives full details of what is and is not covered and the conditions and exclusions of the cover. Failure to comply with them will prejudice an insured's claim.

1. Health Condition

1.1 Nature of coverage: This policy is not a general health insurance policy. Coverage is intended for use by the insured in the event of a sudden and unexpected sickness or any injury / ies. due to an accident arising when the insured is outside of his home country, Maldives.

1.2 Pre-existing Exclusion: This policy does not cover claims for any medical services arising from a pre-existing medical condition as defined in this document.

1.3 General Health Exclusions: No claims under this policy will be paid where the insured

1.3.1 is traveling against the advice of a physician; or

1.3.2 is receiving, or on a waiting list for treatment, or awaiting the results of medical tests or investigations for medical treatment declared by a physician; or

1.3.3 is traveling for the purpose of obtaining treatment; or

1.3.4 has received a terminal prognosis for a medical condition.

2. Repatriation

The insurers reserve the right to repatriate when in the opinion of the doctor in attendance and the insurers' medical advisors, the insured is fit to travel.

3. Policy limits and excesses

This policy has specific limits on the amount the insurers will pay.

All claims will be subject red.

4. Eligibility

This policy is valid for residents of the Maldives who are 70 years and under at inception.

5. What to do in the event of a medical emergency

In the event of an insured dying, incurring medical expenses, being involved in an accident, or being admitted to hospital, SPECIALITY ASSISTANCE SERVICES MUST be contacted immediately. Insurers will not be liable for any costs without the expressed prior approval of SPECIALITY.

For non-emergency claims SPECIALITY should be contacted upon return to the insured's home country and a claim form obtained. This document, together with invoices, travel documents and any other relevant details must be sent to SPECIALITY. Please note that if medical treatment has been received, medical certificates showing the nature of the injury or illness together with all the bills and receipts if already paid, should also be attached and returned to SPECIALITY within 31 days of the insured's return to his home country.

SPECIALITY will provide complete medical assistance service to the insured. Operating at 24 hours a day, 365 days a year, SPECIALITY provides effective medical assistance to the insured anywhere in the world and can be accessed by telephone or fax as hereunder:

6. Emergency telephone numbers of specialty

Specialty Assistance Services Address	
T(24HR): +44(0)20 7902 7405 F(24HR): +44(0)20 7928 4748 E(24HR): assistance@specialty-group.com	PO Box51541 London SE10XU T: 0870 905 8555 F: 0870 905 8560 E: claims@specialty-group.com
For assistance in the Americas, contact: SPECIALTY ASSISTANCE Philadelphia, USA	Tel: +1215 489 3785 Fax: +1215 489 8525
For assistance in Africa, contact: SPECIALTY ASSISTANCE Johannesburg, South Africa	Tel: +2711 452 7272 Fax: +2711 452 4473
For assistance in Asia Pacific, contact: SPECIALTY ASSISTANCE Bangkok, Thailand	Tel: +662 645 3932 Fax: +662 645 3732

7. The insurance policy definitions

Wherever the following words or phrases appear within this policy, they will always have the same meaning:

7.1 The Insured: Any person who is included on the certificate, and for whom appropriate premium has been paid. The term 'his' shall be held to mean 'her' where

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appropriate.

7.2 Home Country: Shall mean the Maldives.

7.3 Family: A family shall consist of a maximum of 4 members being a husband and wife and up to 2 dependent children aged 18 years or under at the date of departure.

7.4 Sum Insured: This is the maximum payable for each insured under each section of this insurance as specified in the schedule of cover.

7.5 Speciality: Speciality Assistance Services provide assistance and claims administration services on behalf of the Insurers.

7.6 Medical Advisors: Medical practitioners appointed by Speciality.

7.7 Expenses that in the opinion of the treating physician and Speciality, are medically, necessary in order to maintain life and/or relieve immediate pain or distress for illness, disease or accident first manifested or occurring during an insured trip that commences during the period of insurance.

7.8 Period of Insurance: In respect of section B (Emergency Medical and Evacuation Services) insurance commences when the insured leaves his home country. In respect of all other sections, insurance commences when the insured leaves his place of residence or business in his home country (whichever is the later) to commence the trip. Under all sections, this insurance will terminate at the earliest of the following:

7.8.1 the expiry of the policy period;

7.8.2 the return of the insured to his home country as planned, at the end of a trip;

7.8.3 the first return of the insured to his home country prior to the planned return at the end of a trip.

In the event of a covered injury, illness or accident occurring during the period of insurance where the insured is medically incapable of returning to his home country, this insurance will be extended for a maximum of 90 days from the end of the period of insurance, for the treatment of emergency medical expenses only, provided that SPECIALITY has authorized such extension.

7.9 Pre-existing medical condition: Any sickness for which the insured has previously taken medication, treatment or sought medical advice at any time during the 24 months prior to purchase of this policy.

7.10 Excess: The excess is the first amount of each claim, for each separate incident, payable by the insured. Excess amounts are shown in the schedule of benefits.

7.11 Accident: means a sudden, unexpected, unusual, specific, violent, external event which occurs at a single identifiable time and place and independently of all other causes, results directly, immediately and solely in physical bodily injury which results in a loss. In no event shall the contracting of any disease and/or illness (including, but not limited to heart attack, stroke or cancer), nor the injection or ingestion of any substance, be considered an accident. An event which directly or indirectly exacerbates a previously existing physical bodily injury, shall not be considered an accident.

7.12 Loss of Limb(s): means loss by physical severance of a hand at or above the wrist, or a foot at or above the ankle.

7.13 Loss of sight: means the complete and irrecoverable loss of sight of one or both eyes.

7.14 Relative: means spouse, parent, parent-in-law, son, daughter, brother, sister, or fiancé(e).

7.15 Permanent Total Disablement: means disablement which from the moment of accident entirely prevents the insured from attending to any business or occupation of any and every kind and which lasts 12 calendar months and at the expiry of that period is in the opinion of the insurers' medical advisors beyond expectation of improvement.

7.16 Carrier: The scheduled airline; shipping line; railway coach and bus operator, car rental and taxi operator with whom the insured has arranged to travel.

7.17 Valuables: Photographic equipment, audio, video, telecommunication and computer equipment of any kind, telescopes and binoculars, spectacles and contact lenses, sunglasses, antiques, jewellery, watches, furs, silk, leather goods, animal skins, precious stones and articles made of or containing gold, silver or other precious metals.

7.18 Jurisdiction: This insurance shall be governed by the Laws of Maldives.

8. SECTION A – Personal Accident

The insurers will pay the insured or his estate, the sum insured as shown in the schedule of benefits for one of the following losses resulting from an accident sustained by the insured:

Death, loss of limb(s), loss of sight or permanent total disablement.

Loss must occur within 180 days of the date of accident. Where more than one loss is suffered, the total amount payable shall not exceed the maximum amount shown in the schedule of the policy.

9. SECTION B – Emergency Medical and Evacuation Services

9.1 The insurers will provide/organise emergency medical and evacuation services up to the amount shown in the schedule of benefits necessary as a result of the insured sustaining accidental bodily injury or becoming ill:

9.1.1 Cost of medical, evacuation, surgical or hospital treatment (including necessary emergency dental treatment up to US \$ 150 for the immediate relief of pain only). The insurers reserve the right to repatriate when in the opinion of the doctor in attendance and the insurers' medical advisors, the insured is fit to travel. Insurers further reserve the right to discontinue cover in the event that the insured refuses to be repatriated;

9.1.2 Cost of transporting the remains of an insured to his home country, or the cost of funeral in the country where death occurs up to US \$ 3,000, the cost of return to the home country of an injured or sick insured by air ambulance or other medically appropriate means where in the opinion of the insurers' medical advisors such return is medically necessary.

9.2 The insurers shall not be responsible for

9.2.1 The excess for each claim for each separate incident as shown in the schedule of cover.

9.2.2. Claims arising directly or indirectly as a result of a pre-existing medical condition;

9.2.3 Claims arising if an insured is travelling against the advice of a medical practitioner or for the purposes of obtaining medical treatment or;

9.2.4 Claims arising for treatment or surgery which in the opinion of the insurers' medical advisors is not essential or can reasonably be delayed until the insured's return to his home country;

9.2.5 Claims arising from medical treatment of any kind received after an insured has returned to his home country;

9.2.6 Claims arising from medical treatment of any kind received in any country where the insured qualifies for national or state healthcare unless this is in excess of the national or state healthcare provisions.

9.2.7 Claims arising directly or indirectly from pregnancy. Complications of pregnancy occurring during the first 6 months will however be covered.

9.2.8 Claims except at the usual, customary and reasonable level of charges for such services or claims that are not medically necessary.

SPECIAL NOTE

In the event of an insured dying, incurring medical expenses in excess of US \$ 500, being involved in an accident, or being admitted to hospital, SPECIALITY must be advised immediately by insured's family member/s and liability shall only attach for expenses agreed by them. Failure to notify SPECIALITY will prejudice the insurers' rights and will result in the insurers' non-acceptance of liability of such claims.

10. SECTION C – Hospital Benefits

The insurers will pay the insured the amount shown in the schedule of benefits for which the insured is an in-patient in a hospital, as a result of an accidental injury or illness which is covered under section B.

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11. SECTION D – Loss of Checked Baggage

The insurers will pay up to the amount shown in the schedule of benefits in the event of the insured person suffering a total loss of or damage to baggage that has been checked in. The insurers reserve the right to replace or pay the intrinsic value of any lost article.

11.1 Insurers shall not be responsible for:

11.1.1 Partial loss or damage to checked in baggage. However, total loss of or damage to an individual unit(s) of baggage shall not be construed as falling within this exclusion.

11.1.2 Items valued in excess of US \$ 100 without proof of ownership, Such proof shall be presented to 'Speciality' when submitting your claim.

11.1.3 Claims for valuables in "checked-in" baggage;

11.1.4 Claims arising from delay, detention, seizure or confiscation by customs or other officials;

11.2 Specific conditions applicable to Section D;

11.2.1 The amount payable in respect of any one article, pair or set is limited to US\$ 100.00.

11.2.2 .In the event of loss of property whilst in the custody of an airline, a Property Irregularity Report (PIR) must be obtained from the airline immediately upon discovering the loss which must be presented to 'Speciality' when submitting your claim.

12. SECTION E – Delay of Checked Baggage

Insurers will reimburse the insured for the cost of purchase of essential items, up to the maximum as shown in the schedule of benefits should baggage be delayed in transit on the outward journey for more than 12 hours. Payment made under this heading will be set against the amount of any claim arising if the baggage is permanently lost. The insured must supply receipts for the items purchased and confirmation from the carrier of the length of and reasons for the delay.

12.1 Insurers shall not be responsible for:

12.1.1 Any claims where a non-delivery certificate has not been obtained immediately from the airline. Such proof of delay must be submitted to 'Speciality' in the event of a claim under this section.

12.1.2 Any claims unless the insured person can provide proof of purchase for all emergency items reimbursable under this section.

12.1.3 Claims arising from delay, detention, seizure or confiscation by Customs or other officials;

12.2 Specific Condition: Any payment made under Section D shall be offset against any claim ultimately payable under Section E.

13. SECTION F – Loss Of Passport

Insurers shall be responsible for the reimbursement of actual expenses up to the limit shown in the schedule of benefits which are necessarily and reasonably incurred by the insured person in connection with obtaining permits to travel in the event that the insured person/s lose/s their passport/s.

13.1 Insurers shall not be responsible for

13.1.1 Loss of or damage to passport due to delay or from confiscation or detention by customs, police or other authority.

13.1.2 Theft which is not reported to any appropriate police authority within 24 hours of discovery and an official report obtained.

13.1.3 Loss or theft of passport left unattended by the insured person unless located in a locked hotel room or apartment and an appropriate sized safety deposit box was not available for use by the insured person.

13.1.4 The excess amount as stated in the schedule. The excess shall apply to each insured event and shall be paid by the insured person.

13.1.5 Reimbursement of expenses unless a valid receipt is obtained and presented to 'Speciality' when submitting your claim.

14. SECTION G – Personal Liability

The insurers will indemnify the insured up to the amount as shown in the schedule of benefits.

The insurers will indemnify the insured up to the amount as shown in the schedule of benefits for the legal liability of the insured for accidental injury to third parties and/or accidental damage to their property. This cover is applicable only in respect of liability under the law of the country in which the event giving rise to the claim occurred, or under English Law.

14.1 The insurers shall not be responsible for:

14.1.1 The excess for each claim for damage to property for each separate incident as shown in the schedule of benefits;

14.1.2 Claims arising directly or indirectly from happening through or in consequence of:

14.1.2.1 Employer's liability, contractual liability, or liability to a member of the insured's family or travelling companion;

14.1.2.2 Animals belonging to, or in the care, custody or control of the insured;

14.1.2.3 Wilful, malicious or unlawful acts or the use of firearms;

14.1.2.4 The pursuit of trade, business or profession;

14.1.2.5 Ownership or occupation of land or buildings; or

14.1.2.6 The influence of intoxicating liquor or drugs;

14.1.3 Claims arising directly or indirectly from, happening through or in consequence of ownership, possession or use of any vehicle, automobile, aircraft, watercraft or any mechanically propelled conveyance;

14.1.4 Claims for legal fees and costs resulting from any criminal proceedings.

SPECIAL NOTE

No liability shall be admitted and no admission, arrangement, offer, promise or payment shall be made by the insured without the written consent of the insurers who shall be entitled, if they so desire, to take over and conduct, in the name of the insured, their defence of any claim or to prosecute for their own benefit any claims for indemnity, damages or otherwise against any third party. The insurers shall have full discretion in the conduct of any negotiations, proceedings, or the settlement of any claims and the insured shall, wherever possible, give all such information and assistance as the insurers require.

15. Exclusions applicable to all sections of the insurance

The insurers shall not be responsible for claims arising:

15.1 Directly or indirectly by, happening through or in consequence of war, invasion, terrorism, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation, or requisition or destruction of, or damage to property by or on the order of any Government, Public or Local Authority except as specifically provided herein to the contrary:

15.2 From loss or destruction of, or damage to any property whatsoever, or any loss or expense whatsoever resulting in or arising therefrom, or any consequential loss of any legal liability of whatsoever nature, directly or indirectly caused by or contributed to, or arising from:

15.2.1 Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel; or

15.2.2 The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;

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- 15.3 From Acquired Immune Deficiency Syndrome (AIDS) or AIDS related complex and/or any illness arising as complications from these conditions;
- 15.4 From the insured engaging in any illegal or criminal act;
- 15.5 From any consequential loss whatsoever. Claims shall only be paid for those losses which are specifically stated under the terms of this insurance;
- 15.6 Directly or indirectly out of financial incapacity of the insured.
- 15.7 Which but for the existence of this insurance, would be covered under any other insurance policy(ies), including any amounts recovered by the Insured from private health insurance, any reciprocal health agreements, airlines, hotels, home contents insurers or any other recovery by the insured which is the basis of a claim;
- 15.8 From the carrier or any other company, firm or person either becoming insolvent, or being unable or unwilling to fulfil any part of their obligation of the policy;
- 15.9 Any activity that requires a degree of skill or involves a greater risk including but not limited to all wintersports (other than snow ski-ing when an additional premium is paid), racing (other than on foot), mountaineering with the use of ropes, pot-holing, caving, hang-gliding, micro-lighting, paragliding, parachuting, bungee-jumping, diving with the use of breathing apparatus, go-karting, motor racing or motor cycling above 50cc;
- 15.10 From suicide or attempted suicide or wilful exposure to danger (except in an attempt to save human life). Mental disorder, stress or depression, venereal infection or the influence of or in connection with the use of alcohol or drugs, unless as prescribed by a treating doctor;
- 15.11 From an insured being in or entering or descending from an aircraft other than a fully licensed passenger carrying aircraft in which an insured is travelling as a passenger and not for the purpose of undertaking any trade or technical operation therein or thereon;
- 15.12 From the insured's exposure to a peril. The insured must exercise reasonable care to prevent illness, injury or loss of or damage to his property as if uninsured;
- 15.13 Directly or indirectly from the insured being engaged in any manual employment after the commencement of the trip;
- 15.14 Which have not been conclusively proven and the amount thereof substantiated;
- 15.15 As a result of any loss, damage, expense or liability of whatever nature which might otherwise be recoverable under this insurance arising out of or in any way connected with, whether directly or indirectly, the use or operation of any computer, computer system, computer software, programme or any electronic system where any such loss, damage, expense or liability arises, whether directly or indirectly, as a consequence of:
- 15.15.1 The date change to a year and/or;
- 15.15.2 Any change or modification of or to any such computer, computer system, computer software, programme or process or any electronic system in relation to any such date.

16. Conditions applicable to all sections of the insurance

- 16.1 All certificates, information and evidence required by the insurers shall be provided at the expense of the insured. The insured shall when required, submit to a medical examination on behalf of the insurers at the insured's expense. In the event of death of the insured, the insurers may require a post-mortem examination. Any items for which a claim is made for loss or damage shall be retained for insurers' inspection if required at the expense of the insured. All such items shall become the property of the insurers following final settlement of the claim.
- 16.2 In the event of any occurrence which may give rise to a claim under this insurance, the insured shall take all reasonable steps to minimise any loss arising out of such claim.
- 16.3 This insurance is non-transferable. Should the journey or holiday be cancelled prior to departure for any reason whatsoever other than those set out in Section D of the policy then the insurance cover terminates immediately and the premium is neither apportionable nor refundable.
- 16.4 The insurers may, at their own expense, take proceedings in the name of the insured to recover compensation or secure an indemnity from any third party in respect of any loss or damage covered by this insurance and any amount so recovered shall belong to the insurers.
- 16.5 If any fraudulent claim is made or if any fraudulent means or devices are used to obtain any benefit under this policy, all benefits thereunder as well as all premiums paid shall be forfeited.
- 16.6 In the event that the insured experiences a problem with the policy or the claims process, the insured may contact the offices of insurers at: Allied Insurance Company of the Maldives Pvt. Ltd.