

Interski School Group - Organisers Summary 2011.12

Dear Organiser,

This summary provides details of the policy documents applicable for your group, which includes the:

- **Key Facts** page – You must give a copy of the **Key Facts** page to each person on the booking. Full supplies for your group are available from INTERSKI, and
- **Policy** wording – You must make copies of the **Policy** available to every person to read if requested. Small supplies are available from INTERSKI. Alternatively, any one can view and print the policy wording online at www.interski.co.uk and by clicking on the 'General Info' button on the home page and then following the Insurance link button on this page. You should keep a record where you have provided a copy of the **Policy** to each person.

You must read the **Policy** wording and **Key Facts** page and ensure that you understand what is and what is not covered and that it is suitable for you and your groups needs. If you have any questions please contact Fogg Travel Insurance Services Limited immediately. If the cover is not suitable please inform INTERSKI within 14 days of receipt of your policy documents.

You are responsible for notifying the Claims Handlers of any claims by your group under the **Policy** and you will see what is required is set out at the end of each section. This ensures you are aware of all claims for submission by your group. Claim Forms are also available online at www.foggtravelinsurance.com and by clicking on view claim forms button.

You should keep a note of the Master Policy No., and Assistance Company and Claims Handlers contact details with you at all times, we would suggest you also give a copy to any other responsible adults travelling with the group. Each person of your group will receive a **Medi-Card**. The **Medi-Card** should be carried by each person at all times. Each **Medi-Card** has it's own specific number and will need to be shown to the medical provider should any person encounter an emergency medical injury or illness during your trip.

The **Policy** wording contains two policies. The first policy, the **Pre-travel Policy**, provides pre-travel cover, cancellation charges, and this covers the travellers from the time of issue of the **Policy** until they leave home to start their trip. The second policy, the **Travel Policy**, which provides travel cover and this starts when the traveller leaves home to start the trip and ends when they return home or the **Policy** ends, whichever is the first.

We have tried to keep the wording as simple as possible. There are conditions and exclusions applying to the **Pre-Travel Policy** and there are terms and exclusions which apply to all parts of the **Travel Policy**. Each section tells you what is covered, what is not covered and what you need to do if you need to claim under that section. There are no hidden parts or small print.

Like many policies this insurance excludes all **pre-existing health conditions** for travel outside Europe and for **all** travellers 18 years or over. If a member of your group does need the cover, unlike some other policies, they may be able to obtain cover for these conditions by calling the **Referral Helpline** on the lo-call number shown under the 'Disclosure of Material Facts and **Pre-existing Health Conditions**' Section of the **Policy**. Cover is not available on all conditions and to include others we may need to charge an additional premium or increase the policy excess for the traveller with this condition, an excess is the first part of the claim cost. You should bear in mind that this excess will apply to everyone on the booking if they have to claim for cancellation or curtailment (**cutting short the trip**) due to the traveller's health condition. Cover is not available for conditions which are under investigation or awaiting treatment. Referral should be made for **pre-existing health conditions of close relatives or business associates** who are not travelling with the group for advice on cover.

You must make sure all travellers are aware of the following statement

" If you do not tell us about your pre-existing health conditions (all travellers outside Europe and anyone 18 or over) or about pre-existing health conditions of anyone on whom the travel plans depend, they will not be covered at all and you will not be able to claim for anything caused by them."

If a traveller's **health changes** (for any age or destination) after your group's holiday booking they must call the **Referral Helpline** immediately. As there are two policies, cancellation under the **Pre-travel Policy** will be effective, but cover for the **Travel Policy**, which has not started, may change. Travel insurers require stability of health conditions whilst away so what cover is available will depend on the condition, the medication and the period of time before travel. In some instances the new condition may be excluded and on a few occasions we may agree to pay the travellers cancellation charges at the time of diagnosis.

Under the insurance policy, cancellation claims are paid at the time the event or new diagnosis or the date the GP or consultant confirms the need to cancel is made which makes it necessary for the traveller to cancel. The GP or consultant should always be made aware of the travel plans if an injury or illness occurs. **You must, therefore, confirm cancellation by any member of your group to the tour operator immediately it becomes necessary, firstly by phone and then, in writing. Cancellation charges are raised by the tour operator dependant on the number of days prior to departure. The closer the departure date – the higher the cancellation charges. Any delay may mean that you will not receive as much as the holiday cancellation charges.**

The **personal possessions** section covers items on a market value basis. This means that we will deduct an amount for age, wear and tear, to reflect the expected life time of the item. The cover is limited to a maximum amount for each item, a maximum amount for items described as 'valuables' and has an overall limit for each person. **Mobile telephones** are not covered under your **Policy** and cover on photographic equipment and jewellery is very limited. We do not recommend taking jewellery away on holiday at all. You will be required to pay the first amount (policy excess) on each claim for each person claiming.

The **personal money** section covers a wide variety of things but the cover on cash and currency is limited.

This is not a private health insurance and the **emergency medical expenses** section is only there to cover genuine emergencies. Routine treatment and replacement of existing medication or dressings are specifically excluded, as is non-emergency dental treatment. You should make sure that our **emergency assistance service** has been advised of any hospitalisation within 48 hours of admission or within 24 hours where costs are likely to exceed £500, the telephone number is given within the **Travel Policy**.

Following injury or illness **taxi fares** other than for the injured or ill person; **telephone calls; food or drink expenses** are not covered - Reasonable costs or a contribution may be considered upon submission of a claim on a case by case basis only but there is no guarantee any payment will be made in respect of these costs. You will note however, if the person is an in-patient we will pay you an additional daily amount under the **hospital benefit** cover which provides towards such costs as newspapers, visitor's taxis, food and drink, etc if the traveller is in a state hospital.

If a traveller needs to **cut short their trip** you must confirm this with our **emergency assistance service** (details in the **Travel Policy**), before arranging any travel. If the traveller has been admitted to hospital the **emergency assistance service** should already be aware of the situation and will deal with it as necessary. If a traveller needs to come home because of a **close relative** the **emergency assistance service** should be contacted as soon as possible and they will arrange ticketing.

Overseas Emergency Medical Treatment Within most countries in the European Economic Area medical treatment is free, or at a very reduced cost, if you use state facilities under the reciprocal health arrangement. Travellers are strongly advised to obtain a valid **European Health Insurance Card (EHIC)**. Please be careful, in many areas hotel staff may direct you to private facilities. Whilst many of these resemble luxury private hospitals they can have very limited medical facilities and in the health conditions they can treat, the state facilities can usually treat everything and, if the condition requires specialist treatment, will transfer you to the specialist unit. Additionally if any person is **under 18 years**, your **Policy** carries a lower **excess of £35** under the **emergency medical expenses** section, this excess, and **£70** excess for persons **18 and over** will be removed if you use a state hospital, saving you money. Unfortunately any additional excess for a specific health condition will still apply.

Production of the Fogg Travel **Medi-Card** will mean that any rescue, transport or medical service subscribing to the scheme will make no charge to you for their service but will bill Fogg Travel direct - the **£70** policy excess (reduced to **£35** if **under 18 years**) is, however, payable to the doctor at the time of treatment. In the event of difficulty you should contact the **emergency medical assistance service** immediately. You will be given a form by the medical/rescue service whenever the **Medi-Card** is used - this form should be sent to Fogg Travel Insurance Services Limited together with any ancillary pharmaceutical bills and the like and **policy excess** receipt (the amount applicable to your age) at the end of your trip to obtain reimbursement of those costs incurred where you have made payment. Please see "what to do in the case of a medical emergency abroad" section within the **Policy** for cases involving more than simple outpatient treatment.

This insurance is arranged by **Fogg Travel Insurance Services Limited**, who is authorised and regulated by the Financial Services Authority. Our FSA Register reference is 307304. This can be checked at www.fsa.gov.uk/pages/register

Your insurer Union Reiseversicherung AG, URV, is authorised and regulated by BAFin and the FSA. URV is a member of the Financial Services Compensation scheme, which offers you protection in the event that the Insurer is not financially able to meet its liabilities in respect of your claim, the FCSC can cover 90% of the claim without any upper limit.

We sincerely hope you will not need to complain about your insurance policies or claims settlement. Please write in the first instance to the General Manager, Fogg Travel Insurance Services Limited, Crow Hill Drive, Mansfield, Notts NG19 7AE.

We wish you and your group a pleasant trip.
General Manager, Fogg Travel Insurance Services Limited.
If you or your family need travel insurance for other trips,
why not visit www.foggtravelinsurance.com