International Health Insurance Comprehensive

Insurance Product Information Document

Company: **SI Insurance (Europe), SA**
Product: **Evolution Health (EU) Comprehensive Policy**

Administered by: Morgan Price (Europe) ApS. Authorised and regulated by the Danish Financial Supervisory Authority, Registered in Denmark with Registration Number CVR No. 41127635.

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The following summary does not contain the full terms and conditions of the contract which can be found in the **policy** document (which is available on request from the broker) and is not personalised to **you**. **You** should periodically review the insurance cover offered under the **policy** to ensure that the cover remains adequate for **+** needs. Bolded words below have the same meaning as defined terms within the **policy** document.

What is this type of insurance?

This is an international health insurance **policy** designed to provide comprehensive medical benefits for expatriates (i.e. persons living/working outside of their home country), local nationals (i.e. persons living/working inside their home country) and their eligible **dependants**.

What is insured?

The overall maximum limit is per insured person, per policy year up to the sum stated in the benefits schedule, unless otherwise stated in the certificate of insurance.

The benefits provided under the **policy** will depend on the level of cover selected by the **policyholder** (Standard, Standard Plus, Comprehensive, Premium and Elite) and will include:

- ✓ **In-patient hospital** stay
- ✓ **Day-patient** treatment
- ✓ **Out-patient** treatment
- ✓ Chronic conditions
- ✓ Cancer care
- ✓ Wellness benefits
- ✓ Dental treatment
- ✓ Maternity benefit
- ✓ Medical evacuation and repatriation

Cover is available for each **insured person**. The above is a non-exhaustive list, and is subject to the **policy's** terms and conditions.

What is not insured?

- ✗ Any **excess** payable
- ✗ **Pre-existing medical conditions** not declared on the application form
- ✗ Alcoholism and substance abuse
- ✗ Sexually transmitted diseases
- ✗ Unlicensed drugs
- ✗ Cosmetic treatment
- ✗ **Over the counter drugs** and medicines
- ✗ Preventative treatment
- ✗ Experimental treatment
- ✗ Weight loss surgery
- ✗ Sleep disorders
- ✗ Professional sports
- ✗ Hazardous sports and pursuits
- ✗ Deliberate self-inflicted injury, needless self-exposure to peril, suicide, attempted suicide or self harm
- ✗ **Accidents** or **medical treatment** as a result of using electric or motorised scooters (the two/three wheeled variety **you** stand on) whether being driven on or off the road legally or illegally

The above is a non-exhaustive list and other exclusions apply. Please see **your policy** for a full list of all **policy's** exclusions.

Are there any restrictions on cover?

Certain benefits under the **benefits schedule** have specific limits. Please refer to the **benefit schedule** for full details.

- Cover for **pre-existing medical conditions** is dependent on the underwriting type selected.
- Certain benefits have **waiting periods**, please refer to the **benefit schedule** for specific details.
- **Pre-authorisation** is required for some benefits; please check the **benefits schedule** for further information.
- Any chosen **excess** will be applied to your policy as shown in **your certificate of insurance.**

Where am I covered?

This **policy** provides cover depending on the area of the world selected. This will be shown on your **certificate of insurance**. If you travel outside of the **geographical area cover** is limited to emergency **medical treatment** for up to thirty (30) days.

What are my obligations?

- **You** have a duty to give **us** complete and accurate answers to any questions **we** may ask.
- **You** must provide **your** medical history if required.
- **You** must update **us** if there are any changes to the information provided by **you**.
- **You** must observe and comply with the **policy's** terms and conditions.
- **You** must obtain **pre-authorisation** for **claims** where required.
- **You** must tell **us** as soon as possible if you move to another **country of residence** during the **period of insurance**.
- Premiums must be paid as shown in **your policy** documentation. **We** may refuse a **claim** if your premium is not up to date.

When and how do I pay?

If you have claimed there will be no refund of premium and you may still owe us outstanding frequency payments (monthly, quarterly or semi-annual).

- Premiums are payable in advance of cover being provided under this **policy**.
- Premiums can be paid monthly, quarterly or semi-annual, BUT the **policy** remains an annual contract of insurance.
- Premiums are payable in the currency which **you** elected at the start of y**our policy**.
- Annual premiums may be paid by bank transfer or credit card. Semi annual, quarterly or monthly premiums are payable by credit card only (in some countries, monthly direct debits/SEPA may be available).
- Any taxes applicable will be collected along with **your** premium payments in the same frequency and method of payment.

When does the cover start and end?

Your policy will run for twelve (12) months from the **start date** shown in **your** quote or membership certificate. This is an annually renewable contract.

How do I cancel the contract?

You must notify us in writing to info@morgan-price.eu or Morgan Price (Europe) ApS c/o ØENS Virksomhedsadministration ApS, Lergravsvej 59, 1, 2300 København S, Denmark to cancel this **policy** within the 14 days cooling off period. **We** will refund **you** any premium paid provided no **claims** have been paid or pre-authorised by **us**. If **you** cancel the **policy** any other time, **you** must give **us** thirty days (30) notice and **we** reserve the right to charge an administration fee of £/€/$ 30.