

## MAKING A CLAIM

If an accident occurs under any of the guarantees described in the benefits schedule, then the insured should in the shortest time possible contact the 24/7 International Helpline on the following:

v +44 845 217 1379 **(**+216 29 67 72 76

Direct assistance email: afrcosiam@mapfre.com Refund assistance email: refund@mapfre.com

By dialing the emergency number, you will be prompted to provide:

- Passport or identity card number
- Policy number
- Full name of the injured and principle insured
- Cause of the call
- The place you are located (Hotel/City/Address/Phone number)

For non-emergency medical and other claims, you will need to complete a claim form as soon as possible after the incident has occurred or within 31 days of your return to your home country.

The form together with relevant invoices, travel documents and any other details must be sent to GA INSURANCE LIMITED.

## MAJOR COVER EXCLUSIONS

- Pre-existing illnesses/conditions whether known/unknown to the insured
- Reimbursement of medical expenses over 300USD where the client did not seek approval from MAPFRE before making the payment
- Expenses arising from flight cancellations by airline
- Natural perils such as floods, earthquakes, landslides, volcanic eruptions etc.
- Loss arising from terrorism, mutiny or crowd disturbances
- Alcohol/drug abuse

- Dangerous sports such as underwater diving, mountain climbing, motor racing etc.
- Loss arising from Labor accidents e.g mining
- Incidents that happen before the client leaves Kenya
- Expenses that occur when the insured returns back to Kenya except pre-authorized follow-up medical treatment
- Claims whereby the client did not suffer financial loss
- Any damage occurred to Mobile Phones or Personal Computers non-registered at the moment of taking out the policy
- Prior notice should be given in-case there is a need to cancel a policy, policies that will have already taken effect will not be cancelled.

Refer to the policy document for detailed policy terms, conditions & exclusions

APPLICATION FORM					
First name	Middle name	Last name			
Date of birth	Passport	Occupation			
Postal address	Phone number	Email address			
KRA Pin No	_ Destination (s)	Purpose of trip			
Date of departure	_ Date of return	Total number of days/months			
Beneficiary (name)	Contact details of beneficiary				
Mobile Phone 🗆 Mod	lel:	Serial No:			
Optional Covers: Personal Computer (PC)  Mod	el:	Serial No:			
Upgrade to 24 hours Personal Accident Cove	er (Attracts 75% premium loading) 🛛				
PRODUCT SELECTED AFRICA/ASIA O EUROPE BASIC O WC	ORLDWIDE BASIC 🔿 WORLDWIDE PLUS 🔿 WORLDWIDE PLUS-FAMII	Y O WORLDWIDE EXTRA O WORLDWIDE EXTRA -FAMILY O			
DECLARATION					
<ol> <li>I am not aware of any circumstances likely to lead to cancellat any change in circumstances or health occurring prior to depa</li> <li>I declare that all persons are in good state of health and fit to</li> <li>I accept the levels of cover chosen as well as all terms and cor</li> </ol>	travel. Pre-existing conditions are excluded.	t the acceptance of this insurance and will notify the company of			
INSURED SIGNATURE	DATE				
		*Regulated by The Insurance Regulatory Authority of Uganda			

## **OUTBOUND PACKAGES - SCHEDULE OF BENEFITS (USD)**

OUTBOUND PACKAGES - S	AFRICA OR ASIA EUROPE BASIC WORLDWIDE BASIC WORLDWIDE PLUS WORLDWIDE EXTRA EXCESS (IN USD)					
COVER / BENEFIT	AFRICA OR ASIA	EUROPE BASIC	WORLDWIDE BASIC	WORLDWIDE PLUS	WORLDWIDE EXTRA	EXCESS (IN USD)
PERSONAL ASSISTANCE		I		I		
Dispatch of Medication	Included - Service Only	Included - Service Only	Included - Service Only	Included - Service Only	Included - Service Only	Nil
General Information	Included - Service Only	Included - Service Only	Included - Service Only	Included - Service Only	Included - Service Only	Nil
Hijack	30 Per Day Max. 3,000	50 Per Day Max. 3,000	50 Per Day Max. 3,000	50 Per Day Max. 3,000	75 Per Day Max. 7,500	Nil
MEDICAL TRANSPORTATION AND REPATRIATION						
Medical Transportation or Repatriation	Real Expenses	Real Expenses	Real Expenses	Real Expenses	Real Expenses	Nil
Transport of a Person due to the Hospitalisation of the Insured	Return Tickets	Return Tickets	Return Tickets	Return Tickets	Return Tickets	5 Days
Stay of a Person due to the Hospitalisation of the Insured	Economy Class 85 Per Day	Economy Class 100 Per Day	Economy Class 100 Per Day	Economy Class 100 Per Day	Economy Class 200 Per Day	5 Days
	Max. 10 Days	Max. 10 Days	Max. 10 Days	Max. 10 Days	Max. 10 Days	
Transportation or Repatriation of the Accompanying Insured	1,500	3,500	1,500	3,500	5,000	Nil
MEDICAL EXPENSES	15.000	80.000	100.000	225-000	500.000	NU
Medical Expenses Abroad	15,000 Included In	80,000 Included In	100,000 Included In	225,000 Included In	500,000 Included In	Nil
First Medical Assistance Abroad Covid-19 Medical	General Limit	General Limit	General Limit	General Limit	General Limit	Nil
Dental Expenses Expenses Abroad Now Included*	450 Included In	450 Included In	500 Included In	500	650 Included In	Nil
Pharmaceutical Expenses	General Limit	General Limit	General Limit	Included In General Limit	General Limit	Nil
Medical Expenses After the Return to the Country of Origin	500	500	500	500	1,000	Nil
REPATRIATION OF MORTAL REMAINS						
Transport or Repatriation of the Deceased Insured	Real Expenses	Real Expenses	Real Expenses	Real Expenses	Real Expenses	Nil
LUGGAGE						
Indemnity due to problems with the Checked - in Luggage (Accidental Damage, Loss, Robbery)	300	1,500	1,500	1,500	2,000	Nil
Compensation for Baggage Delay	200	200	250	250	350	4 Hours
Compensation due to Damage of Registered Personal PC	Nil	200	200	300	500	Nil
Compensations due to Damage of Registered Mobile Phone	Nil	200	200	300	500	Nil
TRIP CANCELLATION						
Reimbursement of the Cancellation Expenses of the Trip (Prevents the Policy to be Cancelled after Purchase)	Nil	1,500	Nil	2,000	5,000	50
DELAYS						
Indemnity due to the Transport Departure Delay	180	250	300	300	500	4 Hours
Missed Connections	Nil	200	300	300	500	Nil
Missed Departure	Nil	200	300	300	500	Nil
CURTAILMENT		1		1		
Curtailment Expenses	500	2,000	3,000	5,000	5,000	Nil
Early Return due to Serious Family Matter	Same Class Ticket	Same Class Ticket	Same Class Ticket	Same Class Ticket	Same Class Ticket	Nil
PERSONAL ACCIDENTS						
Accidental Death on Means of Transport (Optional upgrade to 24 hours cover, subject to premium increase of 75%)	7,000	50,000	200,000	200,000	500,000	Nil
Permanent Accidental Disability (Means of Transport)	% As Per Scale	% As Per Scale	% As Per Scale	% As Per Scale	% As Per Scale	Nil
PERSONAL LIABILITY		1		1		
Personal Liability due to Physical Damages to Third-Parties	200,000	200,000	200,000	250,000	250,000	Nil
Legal Defence (Not Traffic)	3,500	3,500	5,000	5,000	5,000	Nil
Deposit for Legal Costs and Expenses	3,500	3,500	5,000	5,000	5,000	Nil
Personal Liability due to Material Damages to Third-Parties	200,000	200,000	200,000	250,000	250,000	Nil
COMPLIMENTARY MEDICAL COVERS						
Hospital Compensation	Nil	100 Day Max. 10 Days	200 Day Max. 10 Days	200 Day Max. 10 Days	200 Day Max. 10 Days	5 Days
COMPLIMENTARY CARD COVERS				. ,,		
Replacement of the Passport and the Driving Licence by Emergency Documents	200	500	500	500	500	Nil
Line and the and the annual section by Energency Documents	200		500		550	

OUTBOUND PACKAGE	AFRICA ASIA		EUROPE	WORLD- WIDE BASIC	WORLDWIDE PLUS		WORLDWIDE EXTRA	
Type of Plan	Individual	Individual	Individual	Individual	Individual	Family	Individual	Family
1-8 days	\$22.45	\$22.45	\$31.35	\$34.90	\$45.58	\$97.16	\$50.91	\$106.06
9-14 days	\$27.79	\$27.79	\$38.46	\$43.80	\$50.91	\$106.06	\$54.47	\$116.73
15-21 days	\$36.68	\$33.13	\$43.80	\$50.91	\$58.03	\$123.85	\$63.37	\$136.30
22-32 days	\$42.02	\$40.24	\$49.13	\$56.25	\$65.14	\$141.63	\$70.48	\$155.87
33-49 days	\$49.13	\$49.13	\$61.59	\$70.48	\$81.15	\$180.77	\$88.27	\$198.56
50-62 days	\$77.60	\$72.26	\$91.83	\$106.06	\$123.85	\$282.16	\$134.52	\$310.63
63-92 days	\$102.50	\$86.49	\$116.73	\$134.52	\$155.87	\$360.43	\$171.88	\$397.79
93-180 days (1)	\$152.31	\$152.31	\$225.24	\$259.04	\$303.51	\$716.20	\$335.53	\$789.14
93-180 days (²)	\$180.77	\$180.77	\$291.06	\$337.31	\$396.01	\$935.00	\$435.15	\$1,032.84
Annual Multi-trip (1)	\$166.54	\$166.54	\$257.26	\$298.17	\$349.76	\$824.71	\$385.34	\$911.88
Annual Multi-trip (2)	\$207.45	\$207.45	\$335.53	\$388.90	\$456.49	\$1,079.09	\$502.74	\$1,192.94

/Semi-Annual cover: Non- consecutive trips, not exceeding 92 days mily plan covers principle + spouse + children (Max 3 children below 18 years) and benefits Policy should be bought prior to leaving Uganda.

## Disclaimer\*

other related expenses.\*

• The information contained in this brochure is for marketing purposes only, full information of the cover is contained in the policy document. In case of any queries and clarifications, please contact your agent/broker or any of our branches near you.\*

• Cover for Covid-19 is only limited to medical expenses abroad and not any

(<sup>1</sup>) Maximum 92 consecutive days per trip (<sup>2</sup>) Maximum 180 consecutive days per trip

Premiums are exclusive of levies: Policy Holder's Compensation Fund = 0.25% Training Levy = 0.2 Stand Duty = Ush 1,362/-

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