

## **TRAVEL FOR UNIVERSITY**

### **SUMMARY OF TERMS AND CONDITIONS**

To ensure the smooth operation of the benefits and the reimbursement of expenses, it is **essential that the insured contacts the insurance company for authorization before incurring any expenses.** Please take note of the following instructions:

**IT IS OF UTMOST IMPORTANCE TO PROACTIVELY CONTACT THE INSURANCE COMPANY BY PHONE TO ACTIVATE ANY BENEFIT. FAILURE TO DO SO MAY RESULT IN THE ASSISTANCE PLAN NOT FUNCTIONING PROPERLY AND SUBSEQUENT REIMBURSEMENTS NOT BEING GUARANTEED.**

**INSURANCE COMPANY PHONE NUMBER: +39 02.24128658**

- **FOR GENERAL INFORMATION OR SUPPORT IN THE PURCHASE OF THE PRODUCT:**  
kindly send an email to [travelforuniversity@marsh.com](mailto:travelforuniversity@marsh.com)
- **IF YOU REQUIRE REIMBURSEMENT OF MEDICAL EXPENSES OR WISH TO SCHEDULE A MEDICAL APPOINTMENT:**  
please contact the Insurance Company at the phone number +39 02.24128658

**IT IS PIVOTAL TO CONTACT THE INSURANCE COMPANY BY PHONE BEFORE ANY MEDICAL OR PHARMACEUTICAL RELATED EXPENSE**

- **IF YOU WISH TO ACTIVATE ANY OF THE GUARANTEES OR OBTAIN REIMBURSEMENT:**  
please contact the Insurance Company at the phone number +39 02.24128658

*The data reported in the guide represents the highlights of the forms of assistance of interest to the individual beneficiary and therefore does not constitute, in any way, a binding element for the guarantee, for which only the text of the reference agreement entered into by Mutualitas Società di Mutuo Soccorso with the Insurance Company in the interest of its Members and their family members for the provision of healthcare services is relevant.*

### SYNOPTIC TABLE OF BENEFITS

Up to 12 months of coverage for each individual trip with a maximum duration of 365 days.

Section	Benefits	MAX LIMITS	EXCESS
<b>A</b>	<b>Assistance</b>	<b>Included</b>	<b>NO Excess</b>
	Telephone medical consultation	Unlimited	
	Sending of medicines	Unlimited	
	Medical transportation	Unlimited	
	Repatriation of the insured	Unlimited	
	Repatriation of the recovering insured	Unlimited	
	Travel of a family member	800,00 €	
	Accommodation of a family member	up to 10 days; max 100€/day	
	Early repatriation of the insured	€ 5.000,00	
	Extension of stay	up to 10 days; max 100€/day	
	Legal assistance referral	Included	
	Advance for defense expenses	€ 2.500,00	
	Criminal bail	€ 15.000,00	
	Interpreter available	€ 1.500,00	
	Advance for essential expenses	€ 5.000,00	
Transmission of urgent messages	Unlimited		
Repatriation of the body	Unlimited		
Reimbursement of telephone expenses	€ 150,00		
<b>B</b>	<b>Medical, Surgical and Hospital Expenses</b>	<b>Included</b>	€ 50,00
	<i>Worldwide Coverage</i>	€ 500.000,00	
	Sub-limit: Pharmaceutical expenses	€ 2.000,00	
	Sub-limit: Expenses for post-return care	€ 500,00	
	Sub-limit: Emergency dental expenses	€ 500,00	
<b>C</b>	<b>Baggage. Loss and damage</b>	<b>Included</b>	€ 50,00
	<i>Worldwide Coverage</i>	€ 1.500,00	
	Sub-limit: Essential expenses (delay over 8 hours)	€ 250,00	
	Sub-limit: Document replacement	€ 300,00	
	Sub-limit: Single item limit	€ 200,00	
<b>D</b>	<b>Delayed departure (by plane, train, ship) exceeding 8 hours</b>	<b>€ 100</b>	<b>NO Excess</b>
<b>E</b>	<b>Missed flight, train, or ship</b>	<b>Included</b>	<b>NO Excess</b>
	<i>Worldwide coverage</i>	€ 300,00	
<b>F</b>	<b>Trip interruption</b>	<b>Included</b>	<b>NO Excess</b>
	<i>Worldwide coverage</i>	€ 1.000,00 per person	
<b>G</b>	<b>Accidents including flight</b>	<b>Included</b>	<b>Permanent disability below 5%</b>
	<i>Per person</i>	€ 25.000,00	
	<i>For collective incidents</i>	€ 2.500.000,00	

**NOTE:**

- Maximums apply per person and for the entire duration of the insurance period.
- Limits per event. In addition to the maximums per person and for the entire duration of the insurance period, there are maximums per event for the following coverages: F; G.
- Sub-limits. Sub-limits are provided for the following coverages: B; C.
- Deductibles. Deductibles, if applicable, apply per person and for all coverage levels to which they refer.

**For the complete details of coverages/limits/exclusions and maximums, it is recommended to carefully read the insurance conditions before subscribing.**

## Glossary

This paragraph contains and explains the technical terms commonly used in an insurance contract, which the Policyholder can use for a better understanding of the Insurance contract. Please note that the terms listed below do not have any significance for the interpretation of the Insurance contract. The Definitions provided in the Insurance Conditions will be relevant for that purpose.

**Assured:** In property insurance, the person for whose benefit the contract is concluded and who is entitled to any compensation.

**Claim:** The occurrence of the harmful event for which the insurance coverage is provided.

**Compensable Damage:** Damage determined based on all policy conditions, without taking into account any deductibles, excesses, and indemnity limits.

**Compensation:** The amount due from the Insured to the third party affected in the event of a claim.

**Deductible:** The predetermined amount deducted from the compensable damage, which the Insured bears and for which the Insurer does not provide compensation.

**Indemnity:** The amount due from the Insurer to the Insured in the event of a claim.

**Insurance Code:** Italian Legislative Decree of September 7, 2005, no. 209, as subsequently amended.

**Insurance:** The operation by which a subject (Insured) transfers to another subject (Company) a risk to which they are exposed.

**Insurer:** The insurance company professionally carrying out the insurance activity, authorized by IVASS (Italian Insurance Supervisory Authority) and subject to its supervision.

**IVASS:** Institute for the Supervision of Insurance. An Italian public legal entity responsible for the supervision of insurance companies, as well as insurance intermediaries (agents and brokers) and experts for the assessment of vehicle damages.

**Limit of Liability:** The maximum obligation of the Insurer per claim and/or per insurance period provided for a specific coverage.

**Policy:** The document that proves the existence of the contract.

**Policyholder:** The party who enters into the insurance and undertakes to pay the premium. The Policyholder may not coincide with the Insured. The two roles coincide when the Policyholder insures an interest of which they are the owner (e.g., their own property).

**Premium:** The price paid by the Policyholder to purchase the coverage offered by the Insurer. The payment of the premium is generally a condition for the effectiveness of the coverage. Premiums can be single, periodic, or recurring single payments.

**Recourse:** The right of the Insurer against the Insured, allowing the Insurer to recover from the Insured the amounts paid to third parties affected, in cases where the Insurer would have had the contractual right to refuse or reduce its own performance.



**Risk:** The probability of a claim occurring and the extent of the damages that may result from it.

**Subrogation:** The right of the Insurer who has paid the Indemnity to substitute for the Insured in the rights against the responsible third party, if the damage is due to the unlawful act of a third party.

## GENERAL CONDITIONS OF THE ASSISTANCE PLAN

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## **DEFINITIONS**

The following terms are conventionally attributed these meanings by the Company and the Policyholder:

**Abroad:** all countries in the world, excluding the country of residence.

**Accident:** an event due to a fortuitous, violent, and external cause that causes objectively verifiable physical injuries resulting in death, permanent disability, or temporary disability.

**Assistance:** timely help, in cash or in kind, provided by the Policy, to the Insured who is in difficulty as a result of an Incident.

**Baggage:** the clothing and belongings owned by the Insured, which the Insured wears and/or carries, including suitcases, bags, backpacks that can contain them, excluding valuables.

**Benefit:** the Assistance to be provided in kind or the help that must be provided to the Insured, in times of need, through the Organizational Structure, provided that the Premium has been duly paid.

**Claim:** the individual event/incident that can occur during the validity of the Insurance and that results in a request for Assistance or Guarantee, the indemnification of the damage suffered, or the compensation for the damage caused, within the terms of the Policy.

**Commercial Value:** the value of the insured items determined taking into account the depreciation established in relation to the degree of antiquity, type, use, quality, functionality, and state of preservation.

**Company:** IMA Italia Assistance S.p.A. - Piazza Indro Montanelli, 20 - 20099 Sesto San Giovanni (MI).

**Coverage Limit/Insured Sum:** the maximum amount, established in the Policy, for which the Company undertakes to provide the Guarantee and/or Assistance to each Insured, for one or more claims occurring during the entire duration of the Policy.

**Day Hospital:** exclusively daytime hospitalization, even if not continuous, in a Healthcare Facility, documented by a Medical Record and a Hospital Discharge Form, which indicate the days of actual presence.

**Deductible:** the amount that remains the responsibility of the Insured, expressed as a figure deducted from the amount of the indemnifiable loss. Theft: the offense provided for in Article 624 of the Penal Code, committed by anyone who takes possession of another person's movable property, taking it away from the person who holds it, in order to profit for themselves or others.

**Destination:** the location where the University where the Study Trip/University Transfer will take place is located, as stated in the Certificate of Insurance.

**Domicile:** the place where the individual has established the main location of their affairs and interests.

**Europe:** all countries in geographical Europe, countries bordering the Mediterranean basin, and the Canary Islands.

**Event:** the occurrence of a harmful event that results in one or more claims.

**Family Member:** spouse/cohabitant, siblings, children, parents-in-law, sons-in-law, daughters-in-law, grandparents, aunts, uncles, nieces, nephews, brothers-in-law up to the 3rd degree of relationship of the Insured, as evidenced by a valid certification.



**Family:** the Insured and their cohabitants, as indicated by Article 4 of Legislative Decree No. 223 of May 30, 1989, as evidenced by an Anagrafic certificate or an equivalent international document.

**Fire:** Combustion with flames of material goods outside of an appropriate hearth that can self-extend and self-propagate. **Indemnity:** the amount due from the Company in the event of a claim.

**First Means:** the means of transport that operates the first leg if the trip involves multiple legs to reach the first destination.

**Guarantee:** insurance coverage that does not fall within the definition of "Assistance," for which the Company directly reimburses the damage suffered by the Insured, provided that the corresponding premium has been duly paid.

**Healthcare Facility:** the public hospital, clinic, or nursing home, both affiliated with the National Health Service and private, duly authorized to provide medical-surgical care. Thermal establishments, convalescent and holiday homes, and healthcare facilities with aesthetic and dietetic purposes are excluded.

**Hospitalization:** hospitalization involving an overnight stay in a healthcare facility.

**Illness:** an alteration of the state of health that is not due to an Accident. **Pre-existing Illness:** a diagnosed illness or one under medical examination at the time of policy issuance and/or travel registration, or an expression/complication of diagnosed pathological conditions before policy issuance and/or travel registration. For the sole purpose of applying the benefits/guarantees contained in the "Travel Assistance" and "Medical Expenses while Traveling" sections, illnesses diagnosed or under medical examination prior to the departure date are also considered pre-existing.

**Insurance Certificate:** the document, duly numbered and containing the list of insured persons, that shall be issued to the Insured prior to departure.

**Insurance Period:** the period that begins at 12:00 a.m. on the effective date of the Policy and ends on the expiration date of the Policy.

**Insured:** the individual, indicated in the Insurance Certificate, whose interest is protected by the Insurance. **Insurance:** the insurance contract.

**Italy:** Italy, including the Republic of San Marino and the Vatican City.

**IVASS:** Institute for the Supervision of Insurance.

**Life-threatening:** when, following an evaluation by the doctors of the Organizational Structure, in contact with the attending physicians of the patient, the clinical and diagnostic situation can reasonably predict death.

**Local Attending Physician:** the doctor/physician who provides the necessary care at the local healthcare facility where the Insured is hospitalized.

**Medicines:** those described in the Italian Medicines Yearbook. Therefore, products such as parapharmaceuticals, homeopathic remedies, cosmetics, dietary supplements, galenic preparations, etc., even if prescribed by a doctor, are not considered medicines.

**Necessary Expenses/Purchases:** the purchase of goods that are materially needed and cannot objectively be done without. Goods that would still be purchased even in the absence of a claim are not considered essential goods.

**Organizational Structure:** the structure of IMA Servizi S.c.a.r.l. - Piazza Indro Montanelli, 20 - 20099 Sesto

San Giovanni (MI), consisting of doctors, technicians, and operators, operating 24 hours a day, every day of the year, which, under a specific agreement signed with the Company, contacts the Insured by phone and organizes and provides, at the expense of the Company, the assistance services provided in the Policy. Third

**Overbooking:** the overbooking of available seats for a tourist service (e.g., airline, hotel) compared to the actual capacity/availability.

**Parties:** any person not falling within the definition of "family member."

**Permanent Disability:** the permanent loss, as a result of an accident, in total or partial measure, of the physical capacity of the Insured to perform any work, regardless of their profession.

**Premium:** the amount due from the Policyholder to the Company as provided in the Policy.

**Prescription:** the extinction of a right due to failure to exercise it within the time limits established by law.

**Reservation:** the transaction and/or set of individual transactions that, collectively, make up the trip covered by the Policy.

**Risk:** the probability of an incident occurring.

**Robbery:** the offense provided for in Article 628 of the Penal Code, committed by anyone who, through violence or threat to a person, takes possession of another person's movable property, taking it away from the person who holds it, to obtain unjust profit for themselves or others. Residence: the place where the individual has their habitual residence.

**Snatch:** theft committed by snatching the thing from the person's hand or body who holds it. Deductible: the amount that remains the responsibility of the Insured, expressed as a percentage of the indemnifiable loss.

**Study Trip/University Transfer:** the trip and stay abroad, as evidenced by a document issued by the Universities, carried out for study, training, exchange, or teaching purposes.

**Terrorism Act:** an intentionally perpetrated or even threatened action by one or more individuals representing organized groups, with the aim of intimidating, conditioning, or destabilizing a State, its population, or a part thereof.

**Tour Operator:** tour operator (also "T.O."), travel agency, hotel, airline, or other legally recognized and authorized operator providing tourist services. Passenger: an individual transported on board means of transport operated by Carriers.

**Travel documents:** travel tickets, hotel vouchers, or other vacation vouchers, passports, identity cards, driver's licenses, other valid personal documents for travel. Health documentation: the originals of the medical record and/or all medical certification, consisting of diagnoses, opinions, and prescriptions from healthcare professionals, X-rays, instrumental and diagnostic tests, and expense documentation (including notes and receipts for medications).

**Travel ticket:** air, rail, or ship ticket. Beneficiary: the heirs of the Insured or other persons designated by the Insured, to whom the Company must pay the insured sum in the event of the Insured's death. Natural Disasters: floods, earthquakes, tsunamis, hurricanes, tornadoes, and other natural phenomena of exceptional nature that cause objectively verifiable and documented serious material damage or are identified as such by internationally recognized organizations.

**Trip Commenced:** the journey from the place of residence/domicile in Italy to the destination of the same

trip covered by the insurance.

**Valuables:** jewelry in general and objects made of gold or platinum or mounted on these metals, precious stones, natural or cultured pearls.

**Values:** legal tender, negotiable instruments in general, meal vouchers, fuel vouchers, and in general, any card, including in electronic format, representing a certain and spendable value.

**Worldwide:** all countries in the world.

**Year:** a period of time equal to 365 days, or 366 days in the case of a leap year.

## **NORMS THAT REGULATE INSURANCE IN GENERAL**

### **Art. 1.1 - Insured**

With this Policy, students, researchers, and professors of Universities who have registered on the Contractor's platform and have joined the Convention are insured, and who are:

- residents or domiciled in Italy and who are undertaking a Study Trip/University Transfer abroad;
- residents abroad who are undertaking a Study Trip/University Transfer in Italy.

**The duration of the insurance policy shall not exceed 365 days.**

For insured persons not resident in Italy, for the purposes of the Guarantees and Benefits of this Insurance, it is agreed to replace the term "Italy" with the country of residence of the Insured.

### **Art. 1.2 - Start and end of guarantees/benefits**

The Benefits/Guarantees begin when the Insured starts using the first travel service and end when the last travel service is fully completed, with a maximum number of days as indicated in the previous Art. 1.1.

The duration of the Policy is the one chosen by the Insured and indicated in the Certificate of Insurance, provided that the corresponding premium has been paid.

The coverage is provided within the limits of the maximum amounts and benefits in the place where the event occurred, provided that it is included in the "DESTINATION" indicated in the Certificate of Insurance.

### **Art. 1.3 - Age limit**

The Insurance is valid for:

- students enrolled in Universities up to the age of 35 at the time of issuing the Policy;
- researchers and professors of Universities up to the age of 45 at the time of issuing the Policy.

### **Art. 1.4 - Territorial extension**

The insurance is valid in the country where the Study Trip/University Transfer takes place, as indicated in the Certificate of Insurance, and where the Destination University is located, where the Insured has suffered the accident that has given rise to the right to benefits. In the case of travel by plane, train, bus, or ship, the insurance is valid from the departure station (airport, railway station, etc. of the organized trip) to the arrival station at the end of the trip.

In the case of travel by car or other means not mentioned above, the insurance is valid beyond 50 km from the place of residence.

### **Art. 1.5 - Declarations regarding risk circumstances**

Inaccurate statements or omissions by the Policyholder regarding circumstances that affect the risk assessment may result in the total or partial loss of the right to Benefits/Guarantees, as well as the termination of the insurance itself, in accordance with articles 1892, 1893, and 1894 of the Civil Code.

### **Art. 1.6 - Modifications to the insurance**

Any modifications to the insurance must be proven in writing.

**Art. 1.7 - Right of subrogation**

In accordance with Article 1916 of the Civil Code, the Company is subrogated, up to the amount paid, in all the rights and actions that the Insured may have against those responsible for the damages.

The Insured undertakes to provide documents and information necessary to exercise the right of recourse and to take all necessary actions to safeguard it.

**Art. 1.8 - Limitation of liability**

The Company assumes no responsibility for damages caused by the intervention of the Authorities of the country where assistance is provided.

**Art. 1.9 - Exclusion of alternative compensation**

If the Insured does not use one or more Benefits, the Company is not obliged to provide any kind of alternative compensation as compensation.

**Art. 1.10 - Subscription limits**

It is not allowed to take out multiple policies with IMA Italia Assistance S.p.A. to cover the same risk in order to increase the maximum limits or extend the current coverage period.

The policy is valid exclusively for the Study Trip/University Transfer whose start date is the same as the effective date indicated in the Certificate of Insurance.

The Insured is not allowed to take out this policy for a Study Trip/University Transfer that has already begun.

**Art. 1.11 - Other insurances**

The Insured is required to declare to the Company the existence or subsequent conclusion, with other insurers, of insurances covering the same risk and the same guarantees provided by this policy, indicating the insured sums.

In the event of a claim, the Insured must notify all insurers, indicating to each of them the names of the others, in accordance with Article 1910 of the Civil Code.

Regarding Assistance benefits, if the Insured requests the intervention of another company, the benefits provided by the policy will be provided exclusively as a reimbursement to the Insured for any additional costs charged by the insurance company that directly provided the service.

**Art. 1.12 - Professional secrecy**

The Insured releases from professional secrecy the doctors who have examined or treated them after or even before the claim.

**Art. 1.13 - Currency of payment**

Indemnities and reimbursements are paid in Italy in Euros. In the case of expenses incurred in countries outside the European Union or belonging to it but not adopting the Euro as currency, the reimbursement will be calculated at the exchange rate determined by the European Central Bank on the day the Insured incurred the expenses.

**Art. 1.14 - Non-insurable individuals**

It should be noted that individuals suffering from chronic alcoholism, confirmed AIDS, drug addiction, or the following mental illnesses are not insurable, regardless of their actual health condition: organic brain syndromes, epilepsy, schizophrenia, manic-depressive disorders, or paranoid states.

In any case, the insurance coverage ceases for the Insured individual upon the manifestation of these conditions within thirty days following the termination date of the insurance. The Company reimburses the Insured individual for the portion of the premium corresponding to the unexpired period of risk, net of tax charges.

**Art. 1.15 - Tax charges**

The present and future tax charges related to the insurance are borne by the Insured, even if the payment has been advanced by the Company.

**Art. 1.16 - Competent jurisdiction**

For any dispute, the competent jurisdiction is that of the place of residence or elective domicile of the Policyholder.

**Art. 1.17 - Reference to legal norms**

For everything not otherwise regulated in this contract, the current legislative and regulatory norms apply.

**Art. 1.18 - Exclusions applicable to all coverage and benefits**

Unless otherwise expressly provided in the individual Coverage/Benefits, the Company is not obligated for any claims caused by or arising from:

- a) willful misconduct, gross negligence, or carelessness of the Insured;
- b) war, including civil war, strikes, revolutions, riots or popular uprisings, looting, and acts of vandalism;
- c) acts of terrorism. This exclusion does not apply to the Travel Assistance and Medical Expenses guarantees;
- d) earthquakes, floods, atmospheric phenomena with characteristics of natural disasters, volcanic eruptions;
- e) air, water, soil, or subsoil pollution, or any environmental damage;
- f) explosions resulting from the possession of explosive materials, as well as from the possession or use of radioactive substances or devices for the acceleration of atomic particles, as well as damages that, in relation to the insured risks, have occurred in connection with nuclear transmutation phenomena or with radiation caused by the artificial acceleration of atomic particles;
- g) accidents resulting from the practice of the following activities. mountaineering involving rock climbing or access to glaciers, free climbing, aerial sports in general; driving and use of hang gliders and other types of ultralight aircraft, parachuting, balloon excursions, paragliding, and similar activities; car and motorcycle races and competitions and related tests and training; bobsleigh, bob, freestyle skiing, ski or hydro-ski jumps, kitesurfing, scuba diving, boxing, wrestling in its various forms, martial arts in general, heavy athletics, rugby, American football, spelunking. For bobsleigh, kitesurfing, and scuba diving, the above exclusion shall not apply if said sports activity is carried out solely for recreational and occasional purposes;
- h) all accidents suffered as a result of sports activities carried out on a professional basis.
- i) acts of recklessness;
- j) infectious diseases if the provision of assistance is prevented by national or international health regulations;
- k) activities involving the direct use of explosives or firearms;
- l) events occurring in countries at war that make it impossible to provide assistance. Countries at war are those designated as such on the website of the Ministry of Foreign Affairs.
- m) illnesses and injuries resulting from the abuse of alcohol and psychotropic drugs, as well as from the non-therapeutic use of narcotics and hallucinogens; psychological disorders, psychiatric, neuro-psychiatric, anxiety, stress, or depression;

- n) Pre-existing illnesses;
- o) illnesses related to pregnancy beyond the 26th week of gestation and related to the postpartum period; abortion; childbirth;
- p) trips undertaken against medical advice or for the purpose of undergoing medical or surgical treatment;
- q) trips to remote areas accessible only by special rescue means;
- r) Suicide or attempted suicide;
- s) epidemics or pandemics as declared by the World Health Organization;
- t) documented quarantines imposed by the Authorities.

The following are also excluded.

- u) expenses for the search for missing/disappeared persons, except in cases where such expenses are incurred by public entities or authorities and within the maximum limit of €1,500;
- v) losses of money, travel tickets, securities, collections of any kind, and samples;
- w) breakage or damage to luggage unless it is a result of theft, robbery, or snatch or caused by the carrier;
- x) losses of unattended items or caused by forgetfulness or loss;
- y) losses, damages, or medical expenses reported to the Company beyond the contractually established deadlines.
- z) Guarantees/Benefits of any kind resulting from claims that occurred in connection with non-compliance with the provisions of Law No. 269 of 1998 "against the exploitation of prostitution, pornography, sex tourism to the detriment of minors, as new forms of slavery reduction".

<b>GUARANTEES</b>
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## **A) TRAVEL ASSISTANCE**

### **ART. A1 – OBJECT OF THE GUARANTEE**

The assistance services listed in the following paragraph "BENEFITS," which the Company undertakes to provide through the Organizational Structure. The Benefits are provided exclusively upon contact with the Organizational Structure.

The Company provides the Insured with the following telephone number for the Organizational Structure, available 24 hours a day:

### **ASSISTANCE PHONE NUMBER**

**+39 02.24128658**

If the Insured is unable to contact the Organizational Structure by phone, they may send a fax to +39 02.24128245 or a telegram addressed to: IMA Italia Assistance S.p.A. - Piazza Indro Montanelli 20 - 20099 Sesto San Giovanni (MI).

## **SERVICES**

### **1. Telephone medical consultation**

Assessment by the medical professionals of the Organizational Structure of the insured person's health status in order to decide on the most appropriate medical treatment, and if necessary, referral to a specialist in the nearest area to where the insured person is located.

## **2. Urgent delivery of medications**

When the insured person urgently requires medications for necessary treatment, for which they have a valid medical prescription, and these medications are not available locally, provided that they are marketed in Italy, the Organizational Structure will arrange for the delivery of the medications. However, the cost of these medications remains the responsibility of the insured person.

## **3. Medical Transport**

The Organizational Structure will arrange for the transportation of the Insured Person, subject to specific operational conditions and considering their health status and needs, with the prior consent of the medical professionals, to: a) the nearest suitable location for emergency care; b) from the medical center where initial emergency care was provided to a better-equipped medical center. The use of air ambulances is limited to local transfers.

## **4. Repatriation of the insured person for medical reasons**

If, according to the medical professionals of the Organizational Structure, the insured person cannot receive appropriate treatment locally due to injury or illness, the Organizational Structure will arrange for the insured person's repatriation to their place of residence or to a suitable hospital. The transportation is fully organized at the expense of the company and includes medical or nursing assistance during the journey, if necessary. Repatriation from non-European countries, except for those in the Mediterranean Basin and the Canary Islands, is exclusively conducted by scheduled commercial flights in economy class, possibly with a stretcher.

## **5. Repatriation of the convalescing insured person**

If the insured person's health condition prevents them from returning home using the originally planned means of travel, the Organizational Structure will arrange for their repatriation.

## **6. Travel of a family member**

If the insured person is hospitalized for more than 5 days and requires the presence of an adult family member to assist them (if not already present), the cost of round-trip airfare or train tickets up to a maximum of €800.00 will be reimbursed, as well as accommodation expenses up to a maximum of €100.00 per day for a maximum of 10 days.

## **7. Early return of the insured person**

If a family member has passed away or is hospitalized with imminent life-threatening conditions, and the insured person requests an early return to their place of residence using a different means of transportation than originally planned, the Organizational Structure will arrange for their early return, up to a maximum limit of €5,000.00.

## **8. Extended stay**

If the insured person's stay is extended due to their own illness or injury, the Organizational Structure will arrange for logistical support for overnight stays, provided there is a valid medical certificate. The company will cover the accommodation expenses for a maximum of 10 days, up to a limit of €100.00 per day.

## **9. Legal representation / Advance of defense costs / Possible bail**

If the insured person is held legally or civilly responsible for negligent acts committed abroad, the Organizational Structure will provide the name of a lawyer and advance the costs for the insured person's defense, subject to adequate bank guarantees, as well as any bail that may be required by the court. The following limits apply per person and per insurance period.

- 1. Legal representation.** Included
- 2. Advance of defense costs.** €2,500.00
- 3. Advance of bail.** €15,000.00.

## **10. Interpreter available abroad**

If the insured person, due to hospitalization or legal proceedings related to negligent acts committed abroad, encounters difficulties communicating in the local language, the Organizational Structure will arrange for an



interpreter and cover the associated costs for the duration of their professional services, up to a maximum limit of €1,500.00."

**11. Advance of essential expenses**

If the Insured Person requires an advance on essential expenses due to unforeseen events of proven severity and beyond their control, the Organizational Structure will provide payment for any invoices on-site or advance the necessary amount of money, up to a maximum of €5,000.00, against adequate bank guarantees.

**12. Transmission of urgent messages**

If the Insured Person is unable to transmit essential messages to individuals residing in Italy, the Organizational Structure will communicate the message to the recipient.

**13. Repatriation of the deceased**

The Organizational Structure will arrange for the transportation of the deceased Insured Person's remains from the place of death to the place of residence. Expenses related to the funeral ceremony and any retrieval and search for the remains are excluded.

**14. Telephone expenses reimbursement**

The company will reimburse documented expenses necessary to contact the Organizational Structure, up to a maximum of €150.00.

## **Art.A2 - PROVISIONS AND LIMITATIONS**

**The services are provided exclusively upon contact with the Organizational Structure and at its sole discretion.**

For the services listed in points: 3-MEDICAL TRANSPORTATION; 4-RETURN OF THE INSURED FOR MEDICAL REASONS; 5-RETURN OF THE CONVALESCENT INSURED; 6-TRAVEL OF A FAMILY MEMBER; 7-EARLY RETURN OF THE INSURED; 13-REPATRIATION OF A DECEASED; if the Insured, for objectively and documentably justified reasons of force majeure, has organized the services on their own and incurred related expenses, the Company, upon presentation of an original medical certificate issued by a hospital facility on site and the expense documents, will reimburse up to the maximum amount indicated in the Certificate of Insurance and in the amount strictly necessary at the sole discretion of the Organizational Structure.

In partial derogation of Article 1.1, for foreigners residing in Italy or temporarily domiciled in Italy, the services listed in points: 3-MEDICAL TRANSPORTATION; 4-RETURN OF THE INSURED FOR MEDICAL REASONS; 5-RETURN OF THE CONVALESCENT INSURED; 13-REPATRIATION OF A DECEASED; are recognized within the cost limits for return/transportation to Italy.

The Insured is required to surrender to the Company any unused travel tickets as a result of the services received.

## **B) TRAVEL MEDICAL EXPENSES**

### **Art. B1 - SUBJECT OF THE GUARANTEE**

The guarantee covers only the reimbursement of medical expenses for healthcare services resulting from accidents or illness, subject to the exclusions indicated in this contract in Article 1.20 "Exclusions valid for all guarantees and benefits" of the "Rules Governing Insurance in General," and net of any deductibles or excesses incurred by the Insured on-site. The necessity for these expenses must arise during the Study Trip/University Transfer and must be essential and cannot be postponed until the return to the place of residence, according to the policy's maximum limits.

### **Art. B2 - MAXIMUM LIMIT PER PERSON AND INSURANCE PERIOD**

The following maximum limit is per person and per insurance period and applies only after contacting the Organizational Structure and exclusively for claims occurring in the country of Destination, as indicated in the Membership Certificate.

#### MEDICAL, HOSPITAL, AND SURGICAL EXPENSES

<p style="text-align: center;"><b><u>Max Limit</u></b></p> <p style="text-align: center;"><b><u>€ 500.000,00</u></b></p>
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The Company, contacted in advance by calling the Organizational Structure at the following number:

**ASSISTANCE TELEPHONE NUMBER**  
**+39 02.24128658**

issues a claim number to the Insured and provides for the direct payment of Medical, Hospital, and Surgical Expenses. The guarantee will be provided until the Insured is discharged or is deemed, based on an official medical opinion provided to the Company, to be in a condition to be repatriated.

However, the guarantee will be valid for a period not exceeding a total of 90 days of hospitalization.

In cases where the Company cannot make direct payment, the expenses will be reimbursed if authorized by the Organizational Structure contacted in advance or, in any case, no later than the date of the Insured's discharge.

Within the above-mentioned maximum limits, the following are also reimbursable:

- **Pharmaceutical expenses.**  
Reimbursement of expenses for pharmaceutical products accompanied by a medical prescription related to the illness/injury that occurred during the Study Trip/University Transfer and incurred on-site.  
**Maximum limit per person and insurance period up to: € 2,000.00.**
- **Post-return medical expenses.**  
Reimbursement of expenses for medical treatments, including physiotherapy, incurred upon return to the place of residence, provided they are a result of an injury that occurred during the Study Trip/University Transfer for which the Organizational Structure was contacted and incurred within 30 days following the injury.  
**Maximum limit per person and insurance period up to: € 500.00.**
- **Urgent dental expenses.**  
Reimbursement of expenses for urgent dental treatments during the Study Trip/University Transfer that cannot be postponed until the return.  
**Maximum limit per person and insurance period up to: € 500.00.**

#### **WARNING!**

***Within the maximum limit mentioned above, medical, hospital, and surgical expenses up to €2,000.00 are also reimbursable without prior authorization, provided they are accompanied by a medical prescription and are a***

***result of an injury or illness that occurred during the Study Trip/University Transfer. The limits mentioned in points a), b), c) above also apply in this case.***

***The lack of a claim number is considered a lack of contact with the Organizational Structure, unless proven otherwise.***

***In case of objective and proven impossibility to contact the Organizational Structure, the Insured must contact the Organizational Structure as soon as possible and before taking any personal initiative.***

***Failure to comply with these obligations may result in the loss of the right to assistance benefits, according to Article 1915 of the Civil Code.***

***In cases where the Company cannot make direct payment, the expenses will be reimbursed if authorized by the Organizational Structure contacted in advance.***

***However, the Insured is responsible for paying any excess over the policy limits and the corresponding deductibles directly on-site.***

#### **Art. B3 - APPLIED DEDUCTIBLE**

All reimbursements will be made with the application of a deductible of €50.00 per claim.

#### **Art. B4 - WHAT TO DO IN CASE OF A CLAIM**

**In the event of an accident, following prompt telephone contact with the Organizational Structure and only after making specific arrangements with the Structure itself, the Insured Person must submit a claim within 15 days from the occurrence of the accident using one of the following methods:**

- by accessing the claims portal at the address. [www.sinistri.imaitalia.it](http://www.sinistri.imaitalia.it); alternatively,
- by email to [sinistri.viaggi@imaitalia.it](mailto:sinistri.viaggi@imaitalia.it), attaching the documents in PDF format; alternatively,
- by sending the original report by registered mail with return receipt to. IMA Italia Assistance S.p.A., Piazza Indro Montanelli 20, 20099, SESTO SAN GIOVANNI (MI); alternatively,
- by calling the dedicated reimbursement request number Tel. +39 02 24128449, active on Monday, Wednesday, and Friday from 9.00 am to 12.00 pm and from 2.00 pm to 5.00 pm.

When making the report, the following information and documents must be provided.

- name, surname, address, phone number;
- policy number;
- emergency room certificate issued at the scene of the accident, stating the suffered condition or medical diagnosis certifying the type and mode of the injury suffered;
- in case of hospitalization, a certified copy of the medical record;
- original invoices, receipts, or fiscal receipts for the expenses incurred, complete with the fiscal data (VAT number or Tax Code) of the issuers and recipients of the receipts;
- medical prescription for the purchase of medicines, along with the original receipts of the purchased medicines;
- copy of the university card/affiliation title of the University;
- travel document issued by the University certifying the Study Trip/University Transfer;
- for Insured individuals from non-EU countries, a copy of the application/residence permit for study purposes.

The Company may subsequently request additional documentation from the Insured in order to proceed with the settlement of the claim.

Failure to comply with the obligations regarding the report of the Accident may result in the loss of the right to compensation, pursuant to Article 1915 of the Civil Code.

## **C) LUGGAGE**

### **Art. C1 - OBJECT OF COVERAGE**

The Company will reimburse losses resulting from theft, robbery, mugging, or fire of the baggage that the Insured Person had with them during the trip, including clothing and personal items worn, as well as for non-delivery or damage to the baggage caused by the carrier to which it was entrusted.

### **Art. C2 - MAXIMUM LIMIT PER PERSON AND INSURANCE PERIOD**

The following Maximum Limits are to be understood per person and per insurance period up to the indicated limit:

<b>Maximum limit</b> per person and per insurance period up to	<b>€ 1.500,00</b>
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**Maximum limit per single object € 200,00.**

**Within the maximum limit stated it is possible to ask reimbursement for:**

#### **a) ESSENTIAL EXPENSES**

In the event of delayed delivery of baggage for a period not less than 8 hours or non-delivery of baggage by the carrier, the Company will reimburse, up to the indicated insured amount below, the documented expenses incurred for essential expenses made before the end of the trip.

<b>Maximum limit</b> per person and per insurance period up to	<b>€ 250,00</b>
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#### **b) RIFACIMENTO DOCUMENTI**

The reimbursement of expenses for the replacement/duplication of the passport, identity card, and driver's license as a result of the events covered in Article C1 "Object of Coverage".

<b>Maximum limit</b> per person and per insurance period up to	<b>€ 300,00</b>
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### **Art. C3 - Provisions and Limitations**

Compensation will be paid based on the commercial value and in no case will sentimental value be taken into account.

The maximum limits applied are those indicated in Article C2.

The guarantee does not cover:

- Jewelry, precious items, watches, furs, and other valuable objects.
- Photocineoptic equipment, radio-television equipment, tablets, smartphones, and electronic devices when included in the baggage delivered to the airline carrier or other transport companies.

- Photocineoptic equipment accessories (lenses, filters, flash units, batteries, etc.) are considered as a single object for the purpose of applying the maximum limits.

Items left in a car, camper, caravan, motorcycle, or other vehicles are only insured if they are stored in the locked trunk, not visible from the outside, and the vehicle is left in a paid guarded parking lot.

#### **Art. C4 - Deductible**

A deductible of €50.00 per claim will be deducted from the amount of compensable damage.

This deductible will not apply to compensation due to supplementation of the reimbursement made by the carrier. In this case, the compensation will be proportional and subsequent to that of the responsible carrier, and only if the obtained reimbursement does not cover the entire amount of the damage.

#### **Art.C5 - WHAT TO DO IN CASE OF AN ACCIDENT**

In the event of damage or loss of luggage, the Insured must report the claim to the Company within 15 days from the date of return. This can be done through one of the following methods:

- By accessing the claims portal at the address: [www.sinistri.imaitalia.it](http://www.sinistri.imaitalia.it); alternatively,
- By sending an email to [sinistri.viaggi@imaitalia.it](mailto:sinistri.viaggi@imaitalia.it), attaching the documents in PDF format; alternatively,
- By sending the original documents by registered mail with return receipt to: IMA Italia Assistance S.p.A., Piazza Indro Montanelli 20, 20099, SESTO SAN GIOVANNI (MI); alternatively,
- By calling the dedicated reimbursement request number Tel. +39 02 24128449, active on Monday, Wednesday, and Friday from 9:00 to 12:00 and from 14:00 to 17:00.

The claim request must be accompanied by the following documents:

- Surname, name, address, Tax Code, policy number, IBAN code;
- Copy of the University card/affiliation title of the University;
- Travel document issued by the University certifying the Study Trip/University Transfer;
- For insured persons who are citizens of non-EU countries, a copy of the study permit/residence permit application;
- Detailed description of the circumstances in which the accident occurred;
- Description, value, date of purchase of the lost or damaged items, repair estimate or declaration of irreparability;
- In case of baggage entrusted to the airline carrier: copy of the loss or damage report (RIB or PIR, to be obtained from the "Lost and Found" office of the Airport Authority) and copy of the complaint letter sent to the airline carrier within the legal deadline, and any response from the carrier. If no response is received within 90 days from the date of sending the complaint letter to the airline carrier, the Insured may notify the Company of the lack of response. In this case, the Company will settle the compensation due according to the policy terms, after applying the deductible indicated in Article C4 "Deductible". The Company's right of recourse against the Carrier remains unaffected. The Insured undertakes to notify the Company of any additional amounts received as compensation for the same damage from any source and to promptly return to the Company any amounts not contractually due;
- In case of baggage entrusted to the maritime or land carrier or hotelier: copy of the complaint duly countersigned for receipt by the carrier or hotelier and their response;
- In case of essential expenses: receipts documenting the cost and nature of the purchased goods.

#### **Art. C6 - ADDITIONAL OBLIGATIONS OF THE INSURED**

The Insured is required to safeguard the Company's right of recourse against the person responsible for the loss or damage of the luggage, therefore, they must immediately file a written claim against the hotelier, carrier, or other responsible party. They must also report cases of theft, snatch theft, or robbery to the local authorities.

## **D) DELAYED DEPARTURE (FLIGHT/TRAIN/SHIP)**

### **Art. D1 - SUBJECT OF THE GUARANTEE**

The Company will compensate if the "first means" of transportation departing from Italy (airplane/ship/train) related to the Study Trip/University Transfer and for which the Insured has validly issued travel documents, departs with a delay exceeding **8 hours** compared to the time indicated on the travel ticket or the last convocation/program sheet transmitted by the Tour Operator to the Insured.

### **Art. D2- MAXIMUM LIMIT PER PERSON AND INSURANCE PERIOD**

The following maximum limits are intended per person and per insurance period up to the indicated limit:

<b><u>Max limit per person and insured</u></b>	<b><u>€ 100,00</u></b>
<b><u>period</u></b>	

### **Art. D3 - EXCLUSIONS**

In addition to Article 1.20 "Exclusions valid for all guarantees and benefits" of the "Common rules for all benefits and guarantees," the following are excluded from coverage:

- Delays caused by overbooking;
- Events known at least 2 working days in advance of the departure of the organized trip;
- Insolvency, default, or non-compliance with pecuniary obligations by the travel organizer and/or service providers;
- Fraud and gross negligence of the travel organizer and the passenger;
- Missed connections due to non-compliance with connecting times;
- Cancellation by the Tour Operator, also as a result of an insured event.

### **Art. D4 - WHAT TO DO IN CASE OF A CLAIM**

In the event of a Delayed Departure, the Insured must report the claim to the Company within 15 days from the date of return. This can be done through one of the following methods:

- By accessing the claims portal at the address: [www.sinistri.imaitalia.it](http://www.sinistri.imaitalia.it); alternatively,
- By sending an email to [sinistri.viaggi@imaitalia.it](mailto:sinistri.viaggi@imaitalia.it), attaching the documents in PDF format; alternatively,
- By sending the original documents by registered mail with return receipt to: IMA Italia Assistance S.p.A., Piazza Indro Montanelli 20, 20099, SESTO SAN GIOVANNI (MI); alternatively,
- By calling the dedicated reimbursement request number Tel. +39 02 24128449, active on Monday, Wednesday, and Friday from 9:00 to 12:00 and from 14:00 to 17:00.

The claim request must be accompanied by the following documents:

- Detailed description of the event;
- Policy number;
- Surname, name, address, Tax Code, IBAN code;
- Flight details;

- Copy of all originally planned travel documents;
- Copy of the University card/affiliation title of the University;
- Travel document issued by the University certifying the Study Trip/University Transfer;
- For insured persons who are citizens of non-EU countries, a copy of the study permit/residence permit application.

#### **Art. D5- RECOVERIES**

The Insured Person undertakes to reimburse the Company for any amounts recovered from any party and/or entity in relation to the events covered by the policy; this commitment will be fulfilled only after the payment of the indemnity has been made.

#### **E) MISSED FLIGHT/TRAIN/SHIP**

##### **Art. E1- OBJECT OF THE GUARANTEE**

In the event of any documented cause or event that directly affects the Insured or a family member or the direct superior of researchers or professors, resulting in delayed arrival at the place of departure, the Company will reimburse 50% of the additional cost of protection incurred for the modification or purchase cost of new replacement travel tickets, necessary to reach the Destination of the planned trip, up to a maximum of 50% of the value of the planned trip and within the maximum limit indicated in the table.

##### **Art. E2 – MAXIMUM LIMIT**

The following maximum limits are intended per person, per event and per insurance period up to the indicated limit:

<b><u>Maximum per person and insurance period up to</u></b>	<b><u>€ 300,00</u></b>
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##### **Art. E3- WHAT TO DO IN CASE OF A CLAIM**

In the event of a claim for reimbursement of additional travel costs, the Insured must report the claim to the Company within 15 days from the date of return. This can be done through one of the following methods:

- By accessing the claims portal at the address: [www.sinistri.imaitalia.it](http://www.sinistri.imaitalia.it); alternatively,
- By sending an email to [sinistri.viaggi@imaitalia.it](mailto:sinistri.viaggi@imaitalia.it), attaching the documents in PDF format; alternatively,
- By sending the original documents by registered mail with return receipt to: IMA Italia Assistance S.p.A., Piazza Indro Montanelli 20, 20099, SESTO SAN GIOVANNI (MI); alternatively,
- By calling the dedicated reimbursement request number Tel. +39 02 24128449, active on Monday, Wednesday, and Friday from 9:00 to 12:00 and from 14:00 to 17:00.

The claim request must be accompanied by the following documents:

- Detailed description of the event;
- Policy number;
- Surname, name, address, Tax Code, IBAN code;
- Copy of all originally planned travel documents;
- Copy of the University card/affiliation title of the University;

- Travel document issued by the University certifying the Study Trip/University Transfer;
- For insured persons who are citizens of non-EU countries, a copy of the study permit/residence permit application.

## **F) INTERRUPTION OF THE TRIP**

### **Art. F1 - OBJECT OF THE GUARANTEE**

The guarantee ensures the reimbursement of the portion of the cost of the trip for only the unused ground services in the event that the Insured is forced to interrupt it for one of the following Insured Reasons:

- Medical repatriation of the Insured for health reasons, arranged and organized by the Organizational Structure.
- Hospitalization of the Insured for more than 24 hours, causing partial or complete interruption of the trip.
- Early return of the Insured to their residence due to the death of a non-participating family member.

### **Art. F2- MAXIMUM LIMIT**

The following maximum limits are intended per person, per event and per insurance period up to the indicated limit:

<u>Maximum per person and insurance period up to</u>	<u>€ 1.000,00</u>
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### **Calculation of the indemnifiable amount:**

**For all Covered Reasons and within the limits of the applicable Maximum Limits, the reimbursement is equal to the cost of the unused days of the originally insured trip, calculated by dividing the total cost of the trip net of registration/insurance/agency fees by the duration of the trip in days: the resulting quotient will be multiplied by the unused days.**

### **Art. F3 – DISPOSITIONS AND LIMITATIONS**

***Claims related to interruptions of the stay due to "Medical Repatriation of the insured person" not organized by the Organizational Structure are not covered by the policy.***

### **Art. F3 – WHAT TO DO IN CASE OF A CLAIM**

In the event of an interruption of the trip for one of the insured reasons, the Insured must report the claim to the Company within 15 days from the date of return. This can be done through one of the following methods:

- By accessing the claims portal at the address: [www.sinistri.imaitalia.it](http://www.sinistri.imaitalia.it); alternatively,
- By sending an email to [sinistri.viaggi@imaitalia.it](mailto:sinistri.viaggi@imaitalia.it), attaching the documents in PDF format; alternatively,
- By sending the original documents by registered mail with return receipt to: IMA Italia Assistance S.p.A., Piazza Indro Montanelli 20, 20099, SESTO SAN GIOVANNI (MI); alternatively,



- By calling the dedicated reimbursement request number Tel. +39 02 24128449, active on Monday, Wednesday, and Friday from 9:00 to 12:00 and from 14:00 to 17:00.

The claim request must be accompanied by the following documents:

- Detailed description of the event;
- Policy number;
- Surname, name, address, Tax Code, IBAN code;
- Copy of all originally planned travel documents;
- Copy of the University card/affiliation title of the University;
- Travel document issued by the University certifying the Study Trip/University Transfer;
- For insured persons who are citizens of non-EU countries, a copy of the study permit/residence permit application.

### **G) TRAVEL INJURY INCLUDED FLIGHT**

#### **Art. G1 – OBJECT OF THE GUARANTEE**

The guarantee covers accidents that the Insured may suffer while traveling in the course of any non-professional activity, with the exception of activities carried out by researchers and professors.

The following are also considered "injuries":

- a) Accidents resulting from the use and operation of all motor vehicles and watercraft;
- b) Non-pathological asphyxia;
- c) Acute poisonings from ingestion or absorption of substances;
- d) Drowning;
- e) Electric shock;
- f) Hypothermia or frostbite;
- g) Sunstroke, heatstroke, or cold-related injuries;
- h) Infections and poisonings resulting from injuries, animal bites, and insect stings;
- i) Accidents suffered while in a state of illness, unconsciousness, or as a result of falling asleep;
- j) Accidents resulting from incompetence, recklessness, or negligence, including serious negligence;
- k) Injuries caused by exertion, excluding hernias of any kind, muscle strains, and subcutaneous tendon ruptures;
- l) Accidents resulting from riots or acts of terrorism, vandalism, or attacks, provided that the Insured Person did not actively participate in them.

#### **Art. G2 – MAXIMUM LIMITS**

The guarantee is active for Death and Permanent Disability within the following limit:

<b>Per person and insured period</b>	<b>€ 25.000,00</b>
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#### **Art. G3 – INJURIES CAUSED BY WAR AND INSURRECTION**

War, insurrection, occupation, and military invasion injuries are covered, which the Insured suffers for a maximum of 14 days from the onset of such events, if and to the extent that the Insured is caught by the outbreak of such events while engaged in the Study Trip/University Transfer.

#### **Art. G4 - EXCLUSIONS**

Subject to what is indicated in Article 1.20 "Exclusions valid for all guarantees and benefits" of the "Common Rules for all benefits and guarantees" and in addition to what is indicated in the individual Guarantees, the following injuries are excluded from coverage:

- caused by driving any motor vehicle or boat, if the Insured does not have the required authorization under the current regulations, except in the case of driving with an expired license, but provided that the Insured meets the requirements for renewal at the time of the accident;
- caused by the operation and use of any type of aircraft, except as provided in the following article "Flight Risk";
- caused by intoxication, use of hallucinogens, non-therapeutic use of narcotics and psychotropic drugs;
- caused by surgical procedures, examinations or medical treatments not necessitated by an accident;
- caused by the Insured's participation in crimes committed or attempted by him;
- caused by floods, floods, earthquakes, and volcanic eruptions;
- caused by war and insurrections, except as provided in Article G3;
- caused by transformations or energy adjustments of the atom, natural or induced, and by accelerations of atomic particles (nuclear fission and fusion, radioactive isotopes, particle accelerators, X-rays, etc.), by radioactive, bacteriological and/or chemical substances when used for non-peaceful purposes;
- caused by the practice of the following sports activities: sports involving the use of aircraft, including those defined by law as "devices for recreational flying" or ultralights, hang gliders, parachutes, paragliding, and similar activities, boxing, heavy athletics, wrestling in its various forms, judo, karate, and martial arts in general, spelunking, ski jumping or hydro-ski jumping, acrobatic skiing in general (freestyle), sledging, skeleton, bobsleigh, rugby, American football, non-apnea diving, mountaineering with rock climbing or access to glaciers, free climbing, ski mountaineering, extreme skiing, river canoeing, white-water rafting, ice or roller hockey, skateboarding;
- caused by the practice of soccer, futsal, cycling, horse riding, skiing, roller skating or ice skating, volleyball, basketball, water polo, handball, modern pentathlon, fencing, baseball, rowing, if the injury occurs during races and competitions (and related tests or training) organized or carried out under the auspices of the respective Sports Federations or Associations equivalent to them."

#### **Art. G5 - WAIVER OF THE RIGHT OF SUBROGATION**

The Company waives, in favor of the Insured or their beneficiaries, the right of subrogation provided for in Article 1916 of the Civil Code against third parties responsible for the accident.

#### **Art. G6 - LIMITS OF COVERAGE FOR ACCUMULATION**

##### **a) Death**

If the accident results in death and it occurs, even after the expiration of the policy, within 2 years from the day of the accident, the Company pays the insured amount to the designated beneficiaries or, in the absence of designation, to the heirs of the Insured in equal parts. The compensation for death is not cumulative with that for permanent disability.

However, if after the payment of compensation for permanent disability, the Insured dies as a result of the same accident, the Company pays the beneficiaries only the difference between the compensation for death, if higher, and the amount already paid for permanent disability.

##### **b) Permanent Disability**

If the accident results in permanent disability, compensation is only due if the disability occurs (even after the expiration of the insurance) within 2 years from the day of the accident.

The compensation for partial permanent disability is calculated on the insured amount for total permanent disability, in proportion to the degree of permanent disability that is determined by referring to the table of disability percentages provided for in Annex 1 of Legislative Decree 30 June 1965, no. 1124, and subsequent amendments made up to the date of the policy.

For impairments of the upper limbs, in the case of left-handedness, the disability percentages provided for the right side will apply to the left side and vice versa.

If the injury results in a reduction rather than total loss, the indicated percentages are reduced in proportion to the lost functionality. In cases of permanent disability not specified in the above table, compensation is determined with reference to the percentages of the indicated cases, taking into account the decreased general work capacity regardless of the Insured's profession.

The total loss, anatomical or functional, of multiple organs or limbs results in the application of a disability percentage equal to the sum of the individual percentages due for each injury, with a maximum of 100%.

#### **Art. G7 - ABSOLUTE DEDUCTIBLE ON PERMANENT DISABILITY**

The settlement of the indemnity due for permanent disability will be determined by applying a deductible of 5%. Therefore, the Company does not pay any indemnity if the permanent disability is not higher than 5% of the total. If, on the other hand, the permanent disability is higher than 5% of the total, the Company only pays the indemnity for the exceeding part.

#### **Art. G8 - FLIGHT RISK**

The coverage is extended to accidents that the Insured suffers during tourist or transfer flights, carried out as a passenger on aircraft or helicopters operated by anyone, except:

- companies/organizations on occasions other than public passenger transport;
- aircraft for recreational or sports flight, such as, for example and not limited to, ultralights, hang gliders, paragliding equipment;
- aeroclubs.

For the purposes of the coverage, the flight is considered to have started when the Insured boards the aircraft and is considered to have ended when the Insured disembarks.

#### **Art. G9 - NATURAL EVENTS**

The Coverage includes accidents resulting from earthquakes, volcanic eruptions, tsunamis, and floods. However, in the event of an event that affects multiple insured persons under the same Insurance Policy, the Company's payout cannot exceed the total amount of €2,000,000.00.

#### **Art. G10 - PRESUMED DEATH**

If the Insured has disappeared as a result of a compensable accident under the terms of the policy and, in accordance with Articles 60 paragraph 3) and 62 of the Civil Code or Article 211 of the Navigation Code, the Judicial Authority has declared the presumed death and such event has been recorded in the civil status records, the Company will pay the insured amount for the case of death to the beneficiaries.

Based on the elements and circumstances related to the accident, the Company may request the following documentation in whole or in part:

- death certificate;
- substitute declaration of notoriety;
- original and current family status certificate;
- autopsy report;
- certificate of non-pregnancy of the surviving spouse of the Insured;
- in the case of indemnities due to minor children, the decree of the Guardian Judge authorizing the collection of the share of the indemnity due to them, with express exemption from any liability of the Company regarding the reemployment of the amount.

#### **Art. G11 - OBLIGATIONS OF THE INSURED**

In the event of an accident, the Policyholder or the Insured or their beneficiaries must give written notice to the Company within 3 days from when they had the opportunity to do so.

The accident report, signed by the Insured or, in case of impediment due to the consequences suffered, by their beneficiaries, must be accompanied by a medical certificate and must contain the indication of the place, day, and time of the event, as well as a detailed description of its occurrence.

The report can be made through one of the following methods:

- by accessing the claims portal at the address: [www.sinistri.imaitalia.it](http://www.sinistri.imaitalia.it); alternatively,
- by email to the address [sinistri.viaggi@imaitalia.it](mailto:sinistri.viaggi@imaitalia.it), attaching the documents in PDF format; alternatively,
- by sending the original report by registered mail with return receipt to: IMA Italia Assistance S.p.A., Piazza Indro Montanelli 20, 20099, SESTO SAN GIOVANNI (MI); alternatively,
- by calling the dedicated reimbursement request number Tel. +39 02 24128449, active on Monday, Wednesday, and Friday from 9:00 am to 12:00 pm and from 2:00 pm to 5:00 pm.

The progression of the injuries must be documented by additional medical certificates. The Insured or, in case of death, the designated beneficiaries or the legitimate and/or testamentary heirs, must allow the Company to carry out the investigations, evaluations, and assessments deemed necessary by the Company. The Insured is also required to undergo medical examinations, visits, and checks ordered by the Company in Italy and to provide all original medical documentation, releasing the doctors and healthcare institutions from professional secrecy for this purpose.

The Insured must also provide:

- identifying data of the Policy;
- copy of the University card/affiliation title of the University;
- travel document issued by the University certifying the Study Trip/University Transfer;
- for Insured persons who are citizens of non-EU countries, a copy of the application/residence permit for study purposes.

Failure to comply with the above obligations may result in the total or partial loss of the right to compensation.

#### **Art. G12 - CRITERIA FOR COMPENSABILITY**

The Company will pay compensation for the direct, exclusive, and objectively verifiable consequences of the accident, which are independent of pre-existing impairments and pathological conditions. In the event of anatomical loss or functional reduction of an already impaired organ or limb, the provided disability percentages are reduced taking into account the degree of pre-existing disability.

If the accident results in death, the Company will pay the insured amount to the designated beneficiaries or, in the absence of designation, to the legitimate and/or testamentary heirs of the Insured in equal parts.

If, after the payment of compensation for permanent disability, the Insured dies as a result of the same accident, the Company will only pay the beneficiaries the difference between the compensation for death, if higher, and the amount already paid for permanent disability.

#### **Art. G13 - LIMIT OF COMPENSATION FOR COLLECTIVE CLAIMS**

It is agreed between the parties that, in the event of a claim affecting multiple insured persons under the same policy, as a result of a single event, the maximum total amount payable by the Company cannot exceed €2,500,000.00. If the total compensation due exceeds this amount, the Company will proportionally reduce the payments.

**SYNOPTIC TABLE OF GUARANTEES**

Up to 12 months of coverage for each individual trip with a maximum duration of 365 days.

Section	Benefits	MAX LIMITS	EXCESS
<b>A</b>	<b>Assistance</b>	<b>Included</b>	<b>NO Excess</b>
	Telephone medical consultation	Unlimited	
	Sending of medicines	Unlimited	
	Medical transportation	Unlimited	
	Repatriation of the insured	Unlimited	
	Repatriation of the recovering insured	Unlimited	
	Travel of a family member	800,00 €	
	Accommodation of a family member	up to 10 days; max 100€/day	
	Early repatriation of the insured	€ 5.000,00	
	Extension of stay	up to 10 days; max 100€/day	
	Legal assistance referral	Included	
	Advance for defense expenses	€ 2.500,00	
	Criminal bail	€ 15.000,00	
	Interpreter available	€ 1.500,00	
	Advance for essential expenses	€ 5.000,00	
	Transmission of urgent messages	Unlimited	
Repatriation of the body	Unlimited		
Reimbursement of telephone expenses	€ 150,00		
<b>B</b>	<b>Medical, Surgical and Hospital Expenses</b>	<b>Included</b>	€ 50,00
	<i>Worldwide Coverage</i>	€ 500.000,00	
	Sub-limit: Pharmaceutical expenses	€ 2.000,00	
	Sub-limit: Expenses for post-return care	€ 500,00	
	Sub-limit: Emergency dental expenses	€ 500,00	
<b>C</b>	<b>Baggage. Loss and damage</b>	<b>Included</b>	€ 50,00
	<i>Worldwide Coverage</i>	€ 1.500,00	
	Sub-limit: Essential expenses (delay over 8 hours)	€ 250,00	
	Sub-limit: Document replacement	€ 300,00	
	Sub-limit: Single item limit	€ 200,00	
<b>D</b>	<b>Delayed departure (by plane, train, ship) exceeding 8 hours</b>	<b>€ 100</b>	<b>NO Excess</b>
<b>E</b>	<b>Missed flight, train, or ship</b>	<b>Included</b>	<b>NO Excess</b>
	<i>Worldwide coverage</i>	€ 300,00	
<b>F</b>	<b>Trip interruption</b>	<b>Included</b>	<b>NO Excess</b>
	<i>Worldwide coverage</i>	€ 1.000,00 per person	
<b>G</b>	<b>Accidents including flight</b>	<b>Included</b>	Permanent disability below 5%
	<i>Per person</i>	€ 25.000,00	
	<i>For collective incidents</i>	€ 2.500.000,00	

NOTE:

- **Maximums apply per person and for the entire duration of the insurance period.**
- **Limits per event. In addition to the maximums per person and for the entire duration of the insurance period, there are maximums per event for the following coverages: F; G.**
- **Sub-limits. Sub-limits are provided for the following coverages: B; C.**
- **Deductibles. Deductibles, if applicable, apply per person and for all coverage levels to which they refer.**

**For the complete details of coverages/limits/exclusions and maximums, it is recommended to carefully read the insurance conditions before subscribing.**