Information notice on insurance policy for mission, travel or training in France or abroad

Academic year 2022/2023 - Insurance policy No. 76345069-30016

Your mission/travel/training policy contains personal insurance and assistance benefits. Depending on whether you need or wish to exercise a cover and/or a benefit, kindly observe the following procedures to the fullest extent possible to ensure that your requests are dealt with as promptly and as efficiently as possible.

Who is insured?

Administrators, employees, project managers, students, and generally any person working on behalf of the FONDATION NATIONALE DES SCIENCES POLITIQUES and/or IEP de Paris who is on a mission or trip in France (including in Overseas Territories) or abroad.

What is the scope of the cover and benefits?

The policy coverage and benefits shall apply worldwide and solely during missions and trips undertaken by an insured on behalf of the FONDATION NATIONALE DES SCIENCES POLITIQUES and/or IEP de Paris.

The term “mission” shall mean as follows:

- For administrators, employees, mission managers: Trips made within the professional framework and under the authority of the policyholder and/or IEP de Paris;
- For students: Travel for training provided by IEP de Paris and under the latter’s authority. It is understood that students shall remain entitled to cover during a gap year/sabbatical/break carried out with the approval of IEP de Paris.

For all trips, the policy cover shall come into effect as soon as the insured leaves his/her usual place of work or home, and shall cease upon his/her return to the first of these two places.

During this period, cover shall be provided 24 hours a day for the duration of the trip.

How to exercise the assistance benefits of your contract?

Exercising assistance benefits

The insured or any person in his/her presence must absolutely and prior to any initiative or personal intervention that may engage the policy cover, contact the Assistance Provider by dialling:

French: +33 1 72 89 70 70 / English: +33 1 72 89 70 71

Any medical information and any medical document required to assist him/her can be sent to medical.assistance.fr@hdi.global

Whatever the case, kindly provide:

- Your first and last names
- The name of the policyholder FONDATION NATIONALE DES SCIENCES POLITIQUES,
- The policy number 76345069-30016,
- The telephone number where the insured can be contacted and a second number if possible,
- The location of the event and the location of the insured,
- The nature of the claim (illness, condition, accident, etc.),
- The telephone number of the contact to be notified in case of emergency.

Assistance benefits covered...
MEDICAL ASSISTANCE BENEFITS

Types of benefits:
- Direct payment of emergency and/or unscheduled hospitalisation costs abroad (threshold of 350€)*,
- Sending a doctor to the insured person if deemed necessary by the Insurer,
- Sending essential goods that cannot be found abroad (medicines) (cost to be borne by the insured),
- Medical advice, information and guidance by telephone,
- Medical follow-up of the insured during hospitalisation,
- Transportation of the insured to the medical centre,
- Repatriation of the insured to his/her home,
- Extension of the insured’s stay if his/her state of health does not require hospitalisation or does not justify emergency medical repatriation by the Insurer,
- Presence of up to 3 family members and/or close friends to enable them to visit the insured in hospital if his/her state of health does not allow his/her repatriation,
- Repatriation of the body in case of death of the insured,
- Accompanying the deceased in the event of the death of an insured if the presence of a relative on the spot is indispensable to identify the corpse and fulfil repatriation or cremation formalities.

* In the event of mission by an Insured Person abroad for trips carried out as part of professional activities or training on behalf of the policyholder, the Insured Person must imperatively:
  a. justify the existence of Social Security insurance cover (government health insurance scheme) or any other collective or individual health insurance scheme, including supplementary health insurance schemes;
  b. depending on the duration of the trips, confirm that the membership to the health insurance scheme or to any other collective or individual health insurance scheme, including supplementary health insurance schemes for the reimbursement of health costs, including mutual benefit organizations, is maintained.

If not, and if these are trips carried out as part of professional activities or training on behalf of the Insured Person it must be noted:
- The guarantee “Direct coverage of the costs of emergency and/or unscheduled hospitalisation abroad” is never not destined to replace the Social Security insurance cover (government health insurance scheme) and health insurance scheme, but to complement them.

TRAVEL ASSISTANCE BENEFITS

Types of benefits:
- Early return of the insured
  o in the event of the death or hospitalisation of a family member for more than 7 consecutive days,
  o in the event of major material damage to the insured’s home requiring his/her presence on the premises,
  o following the occurrence of political or military events, terrorist attacks, declaration of an epidemic or pandemic, natural disasters in the country where the insured is on a mission or trip.
- Transmission of urgent messages at the request of the insured to a recipient in France or abroad,
- Translation services by telephone and contact details for emergency interpreting services provided (fees charged to the insured if the presence of a person or the purchase of services is necessary),
- Referral to legal services,
- Legal assistance and legal costs in case of detention abroad,
- Advance of criminal bail abroad.

PSYCHOLOGICAL ASSISTANCE SERVICES

Types of benefits:
In the event of an accident, illness or unforeseeable crisis in the country where the insured is travelling (expulsion of the insured or his/her declaration as persona non grata by the official government authorities of the country where the insured finds himself, political or military events, terrorist attacks, declaration of an epidemic / pandemic, occurrence of natural disasters causing victims) and after the insured’s return home:
- Psychological counselling up to 5 individual consultations,
- Post-traumatic psychological support - in Metropolitan France, French overseas departments, Italy and Spain only - up to 5 telephone conversations.

Common conditions for assistance benefits

The Assistance Provider agrees to use all the means at its disposal to carry out all the services. However, it is understood that its commitments are based on an obligation of means and not of results, considering the context in which the services may be delivered.

In this respect, the Insurer and the Assistance Provider shall not be held responsible for non-performance or partial performance, or for delays in performance of the services due to:
- civil war or foreign war, whether declared or not;
- general mobilisation, requisition of men and equipment by the authorities;
- any acts of sabotage or terrorism;
- social conflicts such as strikes, riots, popular movements;
- restriction of free movement of goods and persons, regardless of the competent authority imposing it;
- natural disasters;
- effects of radioactivity;
- epidemics and pandemics liable for quarantine or preventive measures or specific surveillance by the WHO and international, national or local health authorities;
- any cases of force majeure making it impossible to perform the contract;
- refusal by attendant physicians or local health professionals to collaborate with the Assistance Provider.
Similarly, the Assistance Provider shall not be held responsible for non-performance or partial performance, or for delays in performance of its services, in the context where
- Its interventions are dependent on:
  - on the one hand, decisions and recommendations made by governments and local, national and/or international health authorities, particularly concerning accessibility to certain areas;
  - and/or on the other hand, the availability of service providers involved in assistance operations who have ceased activity completely due to a decision by a competent authority, or who have partially ceased activity with restricted personnel that are obliged to observe health and/or safety instructions imposed by a competent authority.
- In case an insured refuses treatment or examinations prior to medical transport, in a public or private institution or with a physician requested by the medical team of the Assistance Provider, or in case an insured, as the case may be, refuses medical transport, medical transfer, repatriation, place of hospitalisation proposed by the Assistance Provider’s physicians, or in case a beneficiary objects to the communication of medical data to the Assistance provider’s medical team.

The Assistance Provider shall not be held responsible for any damage arising from the provision or non-provision of medical transport or the choice of a hospital due to erroneous information, opinions or medical diagnoses received from the local medical teams, which the due diligence obligation required under medical regulations and practices could not detect.

### How to exercise the benefits of your policy?

#### Insurance benefits

**TYPES OF BENEFITS:**

- Search and rescue costs charged to the insured by public or private services having carried out the search and rescue operations required following the occurrence of an accident,
- Luggage,
  - Loss, theft or total or partial damage of the insured’s luggage and professional equipment, 
    - a) during transportation by a transport company with which it has been duly registered. The cover kicks in after exhaustion of and exclusively in addition to the compensation payable by the carrier, 
    - b) following theft or attempted theft following an assault, a traffic accident, fire, explosion, lightning, natural disasters or an act of terrorism,
  - theft by break-in of the insured’s luggage and professional equipment transported out of sight in the boot of a non-convertible vehicle, duly closed and locked,
  - theft by burglary in a hotel room or in the hotel luggage room (the compensation payable by the insurer will be paid after deduction of the compensation paid to the insured by the hotel or its insurer under its professional civil liability contract),
  - valuables shall be covered in the event of theft only.

**THE FOLLOWING SHALL BE SYSTEMATICALLY EXCLUDED FROM THE LOSS, THEFT OR DAMAGE TO LUGGAGE AND PROFESSIONAL EQUIPMENT COVERAGE:**

- DAMAGE CAUSED BY NORMAL WEAR AND TEAR, DETERIORATION, INHERENT VICE OF THE ITEM;
- DAMAGE CAUSED BY MOLTS OR VERMIN OR BY A CLEANING, REPAIR OR RESTORATION PROCESS;
- DAMAGE CAUSED BY IMPROPER HANDLING OF THE ITEM BY THE INSURED OR ANY OTHER PERSON;
- DAMAGE ARISING FROM CONFISCATION, SEIZURE OR DESTRUCTION BY ORDER OF AN ADMINISTRATIVE AUTHORITY;
- DAMAGE DUE TO AN ELECTRICAL OR MECHANICAL INCIDENT OR TO NON-FUNCTIONING PROFESSIONAL EQUIPMENT.

- Loss or theft of the insured’s payment cards followed by fraudulent use by a third party of a payment card issued in his/her name and the stop payment requested by the insured to the financial institution that issued the payment card. The stop payment must be requested within 48 hours of the date and time of the loss or theft,
- Costs of replacing keys and/or papers in the event of loss or theft during a mission or a trip by the insured.

**THE FOLLOWING SHALL BE SYSTEMATICALLY EXCLUDED FROM THE COVERAGE:**

- INTENTIONAL OR MALICIOUS MISCONDUCT ON THE PART OF THE INSURED, ONE OF HIS/HER RELATIVES OR ONE OF HIS/HER EMPLOYEES;
- THEFT COMMITTED BY ANY PERSON OTHER THAN A THIRD PARTY;
- FAILURE BY THE INSURED TO COMPLY WITH THE OBLIGATIONS OF HIS/HER PAYMENT OR DEBIT CARD CONTRACT.

**EXCLUSIONS COMMON TO ALL INSURANCE BENEFITS**

**THE FOLLOWING CLAIMS SHALL BE EXCLUDED FROM ALL THE BENEFITS LISTED IN THE ABOVE ARTICLES:**

- SUICIDE OR ATTEMPTED SUICIDE BY THE INSURED,
- PARTICIPATION BY THE INSURED IN OFFENCES OR CRIMES WITHIN THE MEANING OF THE CRIMINAL LAW APPLICABLE IN THE COUNTRY WHERE THE INCIDENT OCCURS,
- DECLARED OR UNDECLARED WAR IN THE INSURED’S COUNTRY OF RESIDENCE,
- ANY CHANGE IN THE ATOMIC STRUCTURE OF MATTER OR THE ARTIFICIAL ACCELERATION OF ATOMIC PARTICLES OR DUE TO RADIATION FROM RADIOISOTOPES.
- ACTS OF TERRORISM COMMITTED BY MEANS OF NUCLEAR, BACTERIOLOGICAL OR CHEMICAL WEAPONS.

LIKEWISE, THE POLICY COVERAGE SHALL NOT BE PROVIDED TO INSUREDS TRAVELLING TO A COUNTRY IN WHICH A CIVIL OR FOREIGN WAR WAS ALREADY IN PROGRESS BEFORE THEIR DEPARTURE FOR THAT COUNTRY.

**Exercising the insurance benefits**

**REPORTING AN INSURANCE CLAIM**

Any request or report must be made to FILHET ALLARD & Cie within 5 working days of the accident, to the following addresses:

FILHET ALLARD & Cie
Rue Cervantes - Merignac
In case a claim is reported after this deadline, and insofar as it is established that the delay has caused loss to the insurer, the insured shall lose the policy cover for the claim concerned, unless the delay was due to a fortuitous event or force majeure.

For any claim, regardless of the type of cover that may be required, the insured must absolutely provide:

- His/her first and last names,
- The name of the policyholder FONDATION NATIONALE DES SCIENCES POLITIQUES,
- The policy number 76345069-30016,
- Copy of the professional mission order (any document, including soft copies, issued by the FONDATION NATIONALE DES SCIENCES POLITIQUES and IEP de Paris or any of its representatives confirming the participation of a person in a professional mission or trip on the instructions or at the invitation of the FONDATION NATIONALE DES SCIENCES POLITIQUES).
- The written statement describing the circumstances of the accident and specifying:
  - the identity of any witnesses,
  - the identity of the authority that drew up the report and the transmission number, if applicable,
- The medical certificate describing the nature of injuries sustained and specifying the date of the accident,
- In case of a traffic accident, specify whether the insured was a driver or a passenger in the vehicle,
- bank details (IBAN) of the beneficiary(ies),

Depending on the coverage, the insured or his/her legal representative must add the following information to his/her report:

- **Search and rescue costs**
  Provide originals of the following:
  - the request for reimbursement of costs advanced by the local authorities to carry out the search and rescue operations,
  - the detailed statement of expenses incurred by the local authorities,

- **Luggage (loss, theft or damage of luggage and professional equipment)**
  In all cases it is imperative to provide:
  - a list of contents of the lost, stolen or damaged luggage, differentiating between professional and private contents, and specifying the price and original date of purchase,
  - the original purchase invoices or pro forma invoices,
  - original repair or replacement invoices.

  As the case may be,
  ✓ in case of loss:
  - the certificate of final loss issued by the carrier and details of the compensation received from the carrier.
  ✓ in the event of theft:
  - a copy of the complaint filed by the competent authorities and the certificate from the air carrier.
  ✓ in case of damage:
  - the air carrier’s certificate and, if applicable, details of compensation received from the carrier.

In case the stolen or lost objects are found and returned to the insured, the latter agrees to notify the insurer and to refund the compensation already paid under the insurance policy.

In case of damaged goods, the insured may be requested to prove the damage at any time, either by sending the damaged goods to the Claims Department or by providing proof of the repair bill for the damaged goods.

The value of lost, stolen or damaged objects is equal to their purchase price, less a depreciation coefficient determined as follows: the first year following the purchase, the value of the reimbursement will be calculated at 75% of the purchase value. From the second year after purchase, the value will be reduced by 10% per year, but will not fall below 5% of the purchase value.

Valuables shall be covered in the event of theft only. The insurer shall reimburse the insured for his/her loss up to 30% of the amount covered by the policy.

- **Means of payment / Keys / Papers**
  In all cases:
  - the list of lost or stolen goods,
  - in case of theft, the original of the complaint filed with the competent local authorities (police or gendarmerie) describing the circumstances of the theft by assault and the stolen items.

  ✓ Payment card
  Provide copies of:
  - the complaint filed with the authorities for fraudulent use,
  - the insured’s bank statements highlighting the fraudulent debits,
  - the insured’s request to the card issuer to stop the card.

  ✓ Keys / Papers
  Provide copies of:
  - Keys: invoices for expenses incurred, differentiating between private and business expenses.
  - Papers: new papers and invoices corresponding to both private and professional expenses.

### Termination of cover

The cover shall cease on the date the insured is no longer part of the insurable workforce.

**IMPORTANT INFORMATION**
This English translation is not contractual and is provided for information purposes only. In the event of a dispute, the original French language policy wording shall be solely applicable and prevail over this translation. Accordingly, this translation should not be relied upon and any disputes arising in connection with the insurance cover granted will be resolved purely by reference to the original French language wording and the meaning of the terms used therein.