

Company: Foyer Global Health S.A., R.C.S. Luxembourg B 134.471 Product: Journey Short

For information purposes only. Full contractual and pre-contractual information can be found in the application form and the Terms and Conditions of Insurance.

What is this type of insurance?

Comprehensive private medical insurance for individuals, living, travelling or working outside of their home country on a temporary basis.



What is insured?

- ✓ Inpatient treatment
- ✓ Inpatient surgery and anaesthetics
- ✓ Cancer treatment
- Parent accommodation during inpatient treatment of a minor child
- ✓ Transport to and from the hospital following an accident or emergency
- ✓ Drugs and dressings
- ✓ Inpatient physiotherapy
- Inpatient therapies, including occupational therapy, light therapy,
 - hydrotherapy, inhalation, packs, medical baths, cryotherapy, thermotherapy, electrotherapy
- ✓ Outpatient consultation and diagnostic services
- ✓ Inpatient therapeutic aids and appliances if needed as a life-saving measure, such as cardiac pacemakers
- ✓ Medical repatriation and evacuation
- ✓ Return of mortal remains
- ✓ Inpatient follow-up rehabilitation
- ✓ Day care



What is not insured?

- Pre-existing conditions including congenital conditions
- Acting or traveling against medical advice/failing to seek advice
- **X** Complications caused by excluded cover
- Cosmetic and plastic surgery and treatment
- Detoxification programmes including therapies
- Developmental disorders
- Experimental treatments
- * Eyesight correction by laser treatment
- Force Majeure
- Genetic testing
- Illnesses, accidents and their consequences caused by intent
- X Injuries caused by military service
- Maternity and childbirth
- ✗ Need for long-term care and custody
- ★ Non-medical hospital expenses
- × Nuclear, chemical and biological contamination
- Post-natal classes
- * Professional sports
- **X** Extreme sport and high-risk activities
- ★ Gender reassignment
- Sleep disorders
- Spa and wellness massages
- ★ Sterilisation, sexual dysfunction and contraception
- Surrogacy
- Termination of pregnancy
- Therapies and treatment in sanatoriums, convalescent and nursing homes as well as specific rehabilitation measures
- Transport costs not related to a medical emergency
- Treatment by wives, husbands, non-marital partners, parents or children
- Vitamins and minerals
- * War, civil unrest and acts of terrorism
- Infertility treatment
- Psychiatric treatment
- Psychotherapy
- Bone marrow and organ transplants
- Dental treatment



Are there any restrictions to cover?

- ! Annual overall limit of EUR 500,000 / USD 650,000 / GBP 420,000 / CHF 465,000
- ! Detailed benefit limits can be found in the Terms and Conditions of Insurance.
- ! Treatment is restricted to the selected geographical



Insurance cover applies only within the selected geographical area.

- ✓ Worldwide including USA
- ✓ Worldwide excluding USA



What are my obligations?

- Insured persons must provide requested information in the application form completely and correctly.
- It is the policyholder's obligation to ensure compliance with local social security provisions and regulations for all insured persons under the insurance policy.
- Any insured person must provide the insurer all the information requested and allow the insurer to gather information needed in order to process claims (especially in terms of releasing medical professionals from their duty of confidentiality).
- The policyholder must inform the insurer immediately about any new address, especially any change in the country of residence, geographical area, any change of nationality or citizenship, or new name of the policyholder and any insured person.
- The policyholder or any insured person must report hospital treatment to the insurer immediately, at the latest within seven days after the treatment begins.
- ✓ The policyholder or any insured person must declare any claim and send the relevant invoices to the insurer immediately when the treatment has ended.
- The policyholder and the insured persons must make every effort to minimize any damage as far as possible and not do anything which may affect their convalescence.
- In case of termination, the policyholder needs to send to the insurer a proof that all insured persons have been informed about the termination of the insurance policy.



When and how do I pay?

- The first premium or premium instalment is due as soon as the insurer has accepted the application form for insurance by sending out the insurance policy.
- Premiums can be paid by credit card, bank transfer or SEPA mandate (EU only).
- ✓ The premium is due in advance.



When does the cover start and end?

Insurance cover starts on the date shown in the insurance policy (start date of insurance), but not before the policyholder has paid the premium.

The insurance coverage ends in the following situations:

- ✓ Insurance cover runs until the end date of insurance shown in the Insurance Certificate.
- ✓ When the home country becomes the country of residence and the insurer does not agree to continue the insurance policy.
- Upon the death of an insured person.
- If the insurer makes a change to the Terms and Conditions of Insurance and the policyholder does not wish to extend the insurance policy.
- ✓ If the insurance policy is terminated or declared void.
- Upon reaching the maximum Policy Period of 9 months. The short-term coverage offered under this Insurance Policy is not subject to automatic renewal.



How do I cancel the contract?

✓ The Insurer must be informed at least 4 weeks prior to the end date of the initial Policy Period of any requests for the extension of the Policy Period and of any changes in the Insured Person's circumstances.



Company: Foyer Global Health S.A., R.C.S. Luxembourg B 134.471 Product: Journey Basic

For information purposes only. Full contractual and pre-contractual information can be found in the application form and the Terms and Conditions of Insurance.

What is this type of insurance?

Comprehensive private medical insurance for expatriates.



What is insured?

- ✓ Inpatient treatment
- ✓ Inpatient surgery and anaesthetics
- ✓ Bone marrow and organ transplants
- ✓ Congenital conditions
- ✓ Cancer treatment
- Parent accommodation during inpatient treatment of a minor child
- ✓ Transport to and from the hospital following an accident or emergency
- ✓ Drugs and dressings
- Inpatient therapies, including ergotherapy, light therapy, hydrotherapy, inhalation, packs, medical baths, cryotherapy, thermotherapy, electrotherapy
- ✓ Inpatient physiotherapy
- ✓ Outpatient consultation and diagnostic services
- ✓ Inpatient therapeutic aids and appliances if needed as a life-saving measure, such as cardiac pacemakers
- ✓ Medical repatriation and evacuation
- Return of mortal remains



What is not insured?

- Acting or traveling against medical advice/failing to seek advice
- * Complications caused by excluded cover
- Cosmetic and plastic surgery and treatment
- Dental treatment
- Detoxification programmes including therapies
- Developmental disorders
- **X** Dialysis
- **x** Experimental treatments
- Eyesight correction by laser treatment
- Force Majeure
- Genetic testing
- **X** Hospice
- Illnesses, accidents and their consequences caused by intent
- * Injuries caused by military service
- Maternity and childbirth
- × Need for long-term care and custody
- Non-medical hospital expenses
- X Nuclear, chemical and biological contamination
- Post-natal classes
- Professional sports
- **X** Extreme sport and high-risk activities
- **X** Gender reassignment
- Sleep disorders
- Spa and wellness massages
- Speech therapy
- * Sterilisation, sexual dysfunction and contraception
- **X** Surrogacy
- Termination of pregnancy
- Therapies and treatment in sanatoriums, convalescent and nursing homes as well as specific rehabilitation measures
- Transport costs not related to a medical emergency
- Treatment by wives, husbands, non-marital partners, parents or children
- Vitamins and minerals
- * War, civil unrest and acts of terrorism
- Infertility treatment
- Psychiatric treatment
- Psychotherapy



Are there any restrictions to cover?

- ! Annual overall limit of EUR 1,500,000 / USD 1,950,000 / GBP 1,260,000 / CHF 1,395,000
- ! Detailed benefit limits can be found in the Terms and Conditions of Insurance.
- ! Treatment is restricted to the selected geographical area.



Insurance cover applies only within the selected geographical area.

- ✓ Worldwide including USA
- ✓ Worldwide excluding USA



What are my obligations?

- Insured persons must answer health questions contained in the application form completely and correctly.
- It is the policyholder's obligation to ensure compliance with local social security provisions and regulations for all insured persons under the insurance policy.
- Any insured person must provide the insurer all the information requested and allow the insurer to gather information needed in order to process claims (especially in terms of releasing medical professionals from their duty of confidentiality).
- The policyholder must inform the insurer immediately about any new address, especially any change in the country of residence, geographical area, any change of nationality or citizenship, or new name of the policyholder and any insured person.
- The policyholder or any insured person must report hospital treatment to the insurer immediately, at the latest within seven days after the treatment begins.
- ✓ The policyholder or any insured person must declare any claim and send the relevant invoices to the insurer immediately when the treatment has ended.
- The policyholder and the insured persons must make every effort to minimize any damage as far as possible and not do anything which may affect their convalescence.
- ✓ In case of termination, the policyholder needs to send to the insurer a proof that all insured persons have been informed about the termination of the insurance policy.



When and how do I pay?

- ✓ The first premium or premium instalment is due as soon as the insurer has accepted the application form for insurance by sending out the insurance policy.
- ✓ Premiums can be paid monthly, quarterly, semi-annually or annually.
- Premiums can be paid by credit card, bank transfer or SEPA mandate (EU only).
- The premium is due in advance.



When does the cover start and end?

✓ Insurance cover starts on the date shown in the insurance policy (effective date), but not before the policyholder has paid the first premium.

The insurance coverage ends in the following situations:

- ✓ When the home country becomes the country of residence and the insurer does not agree to continue the insurance policy.
- Upon the death of an insured person.
- If the insurer makes a change to the Terms and Conditions of Insurance and the policyholder does not wish to renew the insurance policy.
- If the insurance policy is terminated or declared void.
- When the policyholder provides written notice that it wishes to end the insurance cover before the renewal date of the insurance policy.



How do I cancel the contract?

The policyholder may give written notice prior to the renewal date if it does not wish to renew the insurance policy.



Company: Foyer Global Health S.A., R.C.S. Luxembourg B 134.471 Product: Journey Extensive

For information purposes only. Full contractual and pre-contractual information can be found in the application form and the Terms and Conditions of Insurance.

What is this type of insurance?

Comprehensive private medical insurance for expatriates.



What is insured?

- ✓ Inpatient treatment
- ✓ Outpatient treatment
- ✓ Health checks
- ✓ Surgery and anaesthetics
- ✓ Bone marrow and organ transplants
- ✓ Congenital conditions
- ✓ Cancer treatment
- ✓ Kidney dialysis
- ✓ Hospice care
- ✓ Psychiatric treatment
- ✓ Parent accommodation during inpatient treatment of a minor child
- ✓ Transport to and from the hospital following an accident or emergency
- ✓ Drugs and dressings
- Inpatient therapies, including ergotherapy, light therapy, hydrotherapy, inhalation, packs, medical baths, cryotherapy, thermotherapy, electrotherapy
- ✓ Physiotherapy
- Acupuncture, homeopathy, osteopathy, chiropractic and traditional Chinese medicine
- Minor dental services
- Inpatient therapeutic aids and appliances if needed as a life-saving measure, such as cardiac pacemakers
- ✓ Medical repatriation and evacuation
- Return of mortal remains



Are there any restrictions to cover?

- ! Annual overall limit of EUR 3,000,000 / USD 3,900,000 / GBP 2,520,000 / CHF 2,790,000
- ! Detailed benefit limits can be found in the Terms and Conditions of Insurance.
- ! Treatment is restricted to the selected geographical area
- ! Waiting periods apply for psychiatric treatment.



What is not insured?

- Acting or traveling against medical advice/failing to seek advice
- * Complications caused by excluded cover
- Cosmetic and plastic surgery and treatment
- Detoxification programmes including therapies
- **X** Developmental disorders
- **x** Experimental treatments
- **x** Eyesight correction by laser treatment
- * Force Majeure
- Genetic testing
- Illnesses, accidents and their consequences caused by intent
- Injuries caused by military service
- Major dental services
- Maternity and childbirth
- ✗ Need for long-term care and custody
- ★ Non-medical hospital expenses
- × Nuclear, chemical and biological contamination
- Post-natal classes
- * Professional sports
- **X** Extreme sport and high-risk activities
- ★ Gender reassignment
- Sleep disorders
- Spa and wellness massages
- Speech therapy
- Sterilisation, sexual dysfunction and contraception
- Surrogacy
- Termination of pregnancy
- Therapies and treatment in sanatoriums, convalescent and nursing homes as well as specific rehabilitation measures
- * Transport costs not related to a medical emergency
- Treatment by wives, husbands, non-marital partners, parents or children
- * Vaccinations
- × Vision aids
- Vitamins and minerals
- * War, civil unrest and acts of terrorism
- Infertility treatment
- Psychotherapy



Insurance cover applies only within the selected geographical area.

- ✓ Worldwide including USA
- ✓ Worldwide excluding USA



What are my obligations?

- Insured persons must answer health questions contained in the application form completely and correctly.
- It is the policyholder's obligation to ensure compliance with local social security provisions and regulations for all insured persons under the insurance policy.
- Any insured person must provide the insurer all the information requested and allow the insurer to gather information needed in order to process claims (especially in terms of releasing medical professionals from their duty of confidentiality).
- The policyholder must inform the insurer immediately about any new address, especially any change in the country of residence, geographical area, any change of nationality or citizenship, or new name of the policyholder and any insured person.
- The policyholder or any insured person must report hospital treatment to the insurer immediately, at the latest within seven days after the treatment begins.
- ✓ The policyholder or any insured person must declare any claim and send the relevant invoices to the insurer immediately when the treatment has ended.
- The policyholder and the insured persons must make every effort to minimize any damage as far as possible and not do anything which may affect their convalescence.
- In case of termination, the policyholder needs to send to the insurer a proof that all insured persons have been informed about the termination of the insurance policy.



When and how do I pay?

- The first premium or premium instalment is due as soon as the insurer has accepted the application form for insurance by sending out the insurance policy.
- Premiums can be paid monthly, quarterly, semi-annually or annually.
- ✓ Premiums can be paid by credit card, bank transfer or SEPA mandate (EU only).
- The premium is due in advance.



When does the cover start and end?

✓ Insurance cover starts on the date shown in the insurance policy (effective date), but not before the policyholder has paid the first premium and not before the end of the waiting periods.

The insurance coverage ends in the following situations:

- ✓ When the home country becomes the country of residence and the insurer does not agree to continue the insurance policy.
- Upon the death of an insured person.
- If the insurer makes a change to the Terms and Conditions of Insurance and the policyholder does not wish to renew the insurance policy.
- ✓ If the insurance policy is terminated or declared void.
- When the policyholder provides written notice that it wishes to end the insurance cover before the renewal date of the insurance policy.



How do I cancel the contract?

✓ The policyholder may give written notice prior to the renewal date if it does not wish to renew the insurance policy.



Company: Foyer Global Health S.A., R.C.S. Luxembourg B 134.471 Product: Journey Advanced

For information purposes only. Full contractual and pre-contractual information can be found in the application form and the Terms and Conditions of Insurance.

What is this type of insurance?

Comprehensive private medical insurance for expatriates.



What is insured?

- ✓ Inpatient treatment
- ✓ Outpatient treatment
- ✓ Surgery and anaesthetics
- ✓ Bone marrow and organ transplants
- ✓ Maternity care and childbirth
- ✓ Newborn care
- ✓ Congenital conditions
- ✓ Cancer treatment
- ✓ Kidney dialysis
- ✓ Hospice care
- ✓ Parent accommodation during inpatient treatment of a minor child
- ✓ Transport to and from the hospital following an accident or emergency
- ✓ Drugs and dressings
- ✓ Health checks
- ✓ Physiotherapy
- Therapies, including ergotherapy, light therapy, hydrotherapy, inhalation, packs, medical baths, cryotherapy, thermotherapy, electrotherapy
- ✓ Speech therapy
- ✓ Psychiatric treatment and psychotherapy
- ✓ Vaccinations
- Acupuncture, homeopathy, osteopathy, chiropractic and traditional Chinese medicine
- ✓ Vision aids
- ✓ Dental treatment
- ✓ Therapeutic aids and appliances
- Medical repatriation and evacuation
- Return of mortal remains



Are there any restrictions to cover?

- ! Detailed benefit limits can be found in the Terms and Conditions of Insurance.
- ! Treatment is restricted to the selected geographical
- ! Waiting periods apply for maternity care, childbirth, psychiatric treatment, psychotherapy and major dental services.



What is not insured?

- Acting or traveling against medical advice/failing to seek advice
- * Complications caused by excluded cover
- Cosmetic and plastic surgery and treatment
- Detoxification programmes including therapies
- **X** Developmental disorders
- Experimental treatments
- **X** Eyesight correction by laser treatment
- * Force Majeure
- **X** Genetic testing
- Illnesses, accidents and their consequences caused by intent
- Injuries caused by military service
- Need for long-term care and custody
- Non-medical hospital expenses
- X Nuclear, chemical and biological contamination
- ✗ Post-natal classes
- Professional sports
- Extreme sport and high-risk activities
- **X** Gender reassignment
- Sleep disorders
- X Spa and wellness massages
- ★ Sterilisation, sexual dysfunction and contraception
- **X** Surrogacy
- Termination of pregnancy
- Therapies and treatment in sanatoriums, convalescent and nursing homes as well as specific rehabilitation measures
- Transport costs not related to a medical emergency
- ★ Treatment by wives, husbands, non-marital partners, parents or children
- × Vitamins and minerals
- ★ War, civil unrest and acts of terrorism
- Infertility treatment



Insurance cover applies only within the selected geographical area.

- ✓ Worldwide including USA
- ✓ Worldwide excluding USA



What are my obligations?

- Insured persons must answer health questions contained in the application form completely and correctly.
- It is the policyholder's obligation to ensure compliance with local social security provisions and regulations for all insured persons under the insurance policy.
- Any insured person must provide the insurer all the information requested and allow the insurer to gather information needed in order to process claims (especially in terms of releasing medical professionals from their duty of confidentiality).
- The policyholder must inform the insurer immediately about any new address, especially any change in the country of residence, geographical area, any change of nationality or citizenship, or new name of the policyholder and any insured person.
- The policyholder or any insured person must report hospital treatment to the insurer immediately, at the latest within seven days after the treatment begins.
- ✓ The policyholder or any insured person must declare any claim and send the relevant invoices to the insurer immediately when the treatment has ended.
- The policyholder and the insured persons must make every effort to minimize any damage as far as possible and not do anything which may affect their convalescence.
- ✓ In case of termination, the policyholder needs to send to the insurer a proof that all insured persons have been informed about the termination of the insurance policy.



When and how do I pay?

- ✓ The first premium or premium instalment is due as soon as the insurer has accepted the application form for insurance by sending out the insurance policy.
- Premiums can be paid monthly, quarterly, semi-annually or annually.
- ✓ Premiums can be paid by credit card, bank transfer or SEPA mandate (EU only).
- The premium is due in advance.



When does the cover start and end?

Insurance cover starts on the date shown in the insurance policy (effective date), but not before the policyholder has paid the first premium and not before the end of the waiting periods.

The insurance coverage ends in the following situations:

- ✓ When the home country becomes the country of residence and the insurer does not agree to continue the insurance policy.
- Upon the death of an insured person.
- If the insurer makes a change to the Terms and Conditions of Insurance and the policyholder does not wish to renew the insurance policy.
- ✓ If the insurance policy is terminated or declared void.
- When the policyholder provides written notice that it wishes to end the insurance cover before the renewal date of the insurance policy.



How do I cancel the contract?

The policyholder may give written notice prior to the renewal date if it does not wish to renew the insurance policy.



Company: Foyer Global Health S.A., R.C.S. Luxembourg B 134.471 Product: Journey Premium

For information purposes only. Full contractual and pre-contractual information can be found in the application form and the Terms and Conditions of Insurance.

What is this type of insurance?

Comprehensive private medical insurance for expatriates.



What is insured?

- ✓ Inpatient treatment
- ✓ Outpatient treatment
- ✓ Surgery and anaesthetics
- ✓ Bone marrow and organ transplants
- ✓ Maternity care and childbirth
- ✓ Newborn care
- ✓ Congenital conditions
- ✓ Cancer treatment
- ✓ Prophylactic mastectomy surgery
- ✓ Kidney dialysis
- ✓ Hospice care
- Parent accommodation during inpatient treatment of a minor child
- ✓ Transport to and from the hospital following an accident or emergency
- ✓ Drugs and dressings
- ✓ Health checks
- ✓ Physiotherapy
- ✓ Therapies, including ergotherapy, light therapy, hydrotherapy, inhalation, packs, medical baths, cryotherapy, thermotherapy, electrotherapy
- ✓ Speech therapy
- ✓ Psychiatric treatment and psychotherapy
- ✓ Vaccinations
- Acupuncture, homeopathy, osteopathy, chiropractic and traditional Chinese medicine
- ✓ Vision aids
- ✓ Infertility treatment
- ✓ Dental treatment
- ✓ Therapeutic aids and appliances
- ✓ Medical repatriation and evacuation
- Return of mortal remains



What is not insured?

- Acting or traveling against medical advice/failing to seek advice
- * Complications caused by excluded cover
- Cosmetic and plastic surgery and treatment
- Detoxification programmes including therapies
- Developmental disorders
- Experimental treatments
- **X** Eyesight correction by laser treatment
- ★ Force Majeure
- Genetic testing
- Illnesses, accidents and their consequences caused by intent
- Injuries caused by military service
- Need for long-term care and custody
- Non-medical hospital expenses
- X Nuclear, chemical and biological contamination
- Post-natal classes
- Professional sports
- Extreme sport and high-risk activities
- **X** Gender reassignment
- Sleep disorders
- Spa and wellness massages
- ★ Sterilisation, sexual dysfunction and contraception
- **X** Surrogacy
- Termination of pregnancy
- Therapies and treatment in sanatoriums, convalescent and nursing homes as well as specific rehabilitation measures
- Transport costs not related to a medical emergency
- Treatment by wives, husbands, non-marital partners, parents or children
- Vitamins and minerals
- War, civil unrest and acts of terrorism



Are there any restrictions to cover?

- ! Detailed benefit limits can be found in the Terms and Conditions of Insurance.
- ! Treatment is restricted to the selected geographical area.
- ! Waiting periods apply for maternity care, childbirth, psychiatric treatment, psychotherapy, prophylactic mastectomy surgery, infertility treatment and major dental services.



Insurance cover applies only within the selected geographical area.

- ✓ Worldwide including USA
- ✓ Worldwide excluding USA



What are my obligations?

- Insured persons must answer health questions contained in the application form completely and correctly.
- It is the policyholder's obligation to ensure compliance with local social security provisions and regulations for all insured persons under the insurance policy.
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- ✓ Premiums can be paid by credit card, bank transfer or SEPA mandate (EU only).
- The premium is due in advance.



When does the cover start and end?

✓ Insurance cover starts on the date shown in the insurance policy (effective date), but not before the policyholder has paid the first premium and not before the end of the waiting periods.

The insurance coverage ends in the following situations:

- ✓ When the home country becomes the country of residence and the insurer does not agree to continue the insurance policy.
- Upon the death of an insured person.
- If the insurer makes a change to the Terms and Conditions of Insurance and the policyholder does not wish to renew the insurance policy.
- ✓ If the insurance policy is terminated or declared void.
- When the policyholder provides written notice that it wishes to end the insurance cover before the renewal date of the insurance policy.



How do I cancel the contract?

The policyholder may give written notice prior to the renewal date if it does not wish to renew the insurance policy.