

Important changes to your policy

Effective from 1st January 2021, a number of changes have been applied to the Indigo Expat International Healthcare Plans. These changes are outlined below in this document and, where applicable to your plan(s), apply from the renewal date indicated on your Insurance Certificate.

Our Individual International Healthcare Plans for France, Benelux or Monaco Benefit Guide has been updated to reflect these changes and is available to download from the Allianz Care website (www.allianzcare.com). To be clear about which of these changes apply to your plan(s), it is important that you read this document in conjunction with your Table of Benefits. Please note that we have included an updated Table of Benefits with your renewal documents.

If you have any queries regarding the changes outlined in this document, please do not hesitate to contact Assurances Indigo Expat:

Telephone: +33 (0)1 53 16 42 61
Email: info@indigo-expat.com

POLICY WORDING CHANGES

- We have changed the “Adding dependants” section of our Benefit Guide to indicate that you must be insured with us for a minimum of eight continuous months (previously six months) before a newborn can be added to your policy without medical underwriting. In addition, all babies born by surrogacy will be subject to full medical underwriting and cover will only commence from the date of acceptance.
- We have amended the “paying premium” section of the Benefit Guide to indicate that in some countries you may be required to apply withholding tax. If that is the case, it is your responsibility to pay this amount in addition to your premium.
- We have amended our wording describing the cover for babies born by surrogacy to indicate that in-patient treatment is limited to £24,900/€30,000/US\$40,500/CHF39,000 per child for the first three months following birth. Out-patient treatment is paid within the terms of the Out-patient Plan. The amended wording is as follows:

For multiple birth babies born as a result of medically assisted reproduction and all babies born by surrogacy, in-patient treatment is limited to £24,900/€30,000/US\$40,500/CHF39,000 per child for the first three months following birth. Out-patient treatment is paid under the terms of the Out-patient Plan.

CHANGES TO DEFINITIONS

- We have amended the definition for “Travel costs of insured family members in the event of the repatriation of mortal remains” to clarify that the benefit covers round trip transport costs. The definition now reads:

Travel costs of insured family members in the event of the repatriation of mortal remains refers to reasonable transportation costs of any insured family members who had been living abroad with the insured person who died, to travel to the country of burial of the deceased. Reasonable transportation costs are considered to be round trip transport costs at economy rates. Cover does not extend to hotel accommodation or other related expenses.

- Similarly, we have also amended the definition for “Travel costs of insured members to be with a family member who is at peril of death or who has died”: The new definition is:

Travel costs of insured members to be with a family member who is at peril of death or who has died refers to the reasonable transportation costs of insured family members to be with a first-degree relative who is at peril of death or who has died (up to the amount specified in your Table of Benefits). Reasonable transportation costs are considered to be round trip transport costs at economy rates. A first-degree relative is a spouse or partner, parent, brother, sister or child, including adopted children, fostered children or step-children. When claiming, please include copies of the travel tickets and the death certificate or a doctor’s certificate supporting the reason for travel. We will cover one claim per lifetime of the policy. Cover does not include hotel accommodation or other related expenses.

- We have updated the definition for Chronic condition to indicate that “prolonged supervision or monitoring” is no longer considered a characteristic of a chronic condition. The new definition is:

Chronic condition is defined as a sickness, illness, disease or injury that lasts longer than six months or requires medical attention (such as check-up or treatment) at least once a year. It also has one or more of the following characteristics:

- Is recurrent in nature.
- Is without a known, generally recognised cure.
- Is not generally deemed to respond well to treatment.
- Requires palliative treatment.
- Leads to permanent disability.

Please refer to the “Notes” section of your Table of Benefits to confirm whether chronic conditions are covered.

ANNUAL PREMIUM RATE REVIEW

As a member of an Indigo Expat Plan, you benefit from specific premiums which are mutualised with other Indigo Expat members. Technical results of the whole group are considered every year to review premiums as well as other factors, such as the cost of healthcare and medical inflation, including healthcare staff wages, the geographical region in which the treatment takes place, as well as new medical technologies, treatments, drugs and diagnostic procedures. We want our members to have access to high quality medical care and so, these factors will be taken into consideration when we calculate your renewal premium.

When your renewal premium is calculated, we also take into account any changes to the premium rates of your Healthcare Plan(s), your country of residence, the age of each member on the policy and your chosen payment frequency. Your renewal premium is shown in your invoice.

IF YOU HAVE ANY QUERIES, PLEASE DO NOT HESITATE TO CONTACT US:

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