

**CLAIMS PROCEDURE FOR TRAVEL CARE INSURANCE**



Dear Customer,

Welcome to the AIG Egypt family! We thank you for choosing us for your Travel Insurance Policy and we wish you a safe and pleasant trip! We invite your attention to the following table, which will help you in the event of any loss, accident or sickness.

Zone	Assistance Company	Claims Administrator	Corporate office
<b>Europe</b>	<b>Europ Assistance ( Suisse) S.A</b> Tel.:+41 22 341 02 04	<b>Golden Care</b> 31,bd. Helvetique, 1207, Geneva Tel.:+ 41 22 786 1200, Fax:+ 41 22 786 1220 e-mail: travelegypt@egoldencare.com	<b>AIG Egypt Insurance Company, S.A.E.</b> <b>Nile City - North Tower, 26th Floor – 2005 Corniche El Nile Ramlet Beaulac, Cairo – Egypt,</b> <b>Tel.: + (202) 4617000</b> <b>Fax. : + (202) 4617010</b> <b>e-mail : travel.claims@aig.com</b>
<b>USA &amp; Canada</b>	<b>AIG Assist</b> Tel: +1-800-626-2427	<b>AIG Assist Claims Services</b> ATTN: Travel Care 6464 Savoy Dr Suite 200, Houston TX 77036, United States Tel:+1-877-804-3506 or +1-713-267-7555 Fax:+1-713-953-7506 e-mail: aigisclaims@aig.com	
<b>Rest of the world</b>	<b>AIG Assist</b> Tel: +1-713-267-2525		

Our Service Center is equipped to provide you with the necessary guidance in your situation, and will direct you on claims procedure.

***#This is a General check-list of documents, please check for availability of coverage under the policy.***

Type of claim	Documents required *	Procedure
Medical Accident & Sickness Expenses** (Outside Egypt)	<ol style="list-style-type: none"> <li>1. Claim form (Overseas Travel claim form, as attached)</li> <li>2. Treating Doctor's report</li> <li>3. Original Admission/discharge card, if applicable</li> <li>4. Original Bills/Receipts/Prescription</li> <li>5. Original X-ray reports/Pathological/Investigative reports, if any</li> <li>6. Copy of passport/Visa with Entry &amp; exit stamp</li> <li>7. A copy of the Certificate of insurance</li> </ol>	<ol style="list-style-type: none"> <li>1. Please use the attached Claim Form and fill in. <b>It is necessary to obtain the attending physician's signature on the Form.</b></li> <li>2. Please collect all bills/receipts/invoices and send all documents to our Corporate Office at the address mentioned above for out patient claims. For Inpatient claims Assistance Company will co-ordinate with the hospital for processing the claim.</li> </ol>
Medical Sickness Dental Relief **	DOCUMENTS REQUIRED ARE AS IN MEDICAL ACCIDENT & SICKNESS EXPENSES	<ol style="list-style-type: none"> <li>1. Please contact the Assistance Company at the number given above and obtain a Claim Form from them and fill in. <b>It is necessary to obtain the attending physician's signature on the Form.</b></li> <li>2. Please collect all bills/receipts/invoices and send all documents to our Corporate Office at the address mentioned above</li> </ol>
Emergency Medical Evacuation	DOCUMENTS REQUIRED ARE AS IN MEDICAL ACCIDENT & SICKNESS EXPENSES	<ol style="list-style-type: none"> <li>1. For any assistance/Guidance, immediate contact with the Assistance Company at the number given above, should be done as soon as possible. Assistance company will provide all guidance/advise</li> </ol>
Repatriation of remains	<ol style="list-style-type: none"> <li>1. Claim form (Overseas Travel claim form, as attached)</li> <li>2. Hospital admission/discharge card, if hospitalized</li> <li>3. Medical Reports/Investigative (coroners / Post mortem) Reports</li> <li>4. Death Certificate</li> <li>5. Funeral Certificate along with original bills/receipt towards funeral expenses.</li> <li>6. Copy of passport/Visa</li> </ol>	<ol style="list-style-type: none"> <li>2. For any assistance/Guidance, immediate contact with the Assistance Company at the number given above, should be done as soon as possible. Assistance company will provide all guidance/advise</li> </ol>
Hijack	<ol style="list-style-type: none"> <li>1. Claim Form (Overseas Travel claim form, as attached)</li> <li>2. Full statement of the events in writing</li> <li>3. Airline correspondence /copy of Passenger List etc.</li> <li>4. Copy of ticket/ Boarding Pass</li> </ol>	<ol style="list-style-type: none"> <li>1. Claim Form can be obtained from our Service Center.</li> <li>2. Submit all documents to our Corporate office at the address given above.</li> </ol>
Personal Liability	<ol style="list-style-type: none"> <li>1. Full statement of the facts in writing along with Witness statements</li> <li>2. Any other documents relevant to the incident, including Summons, Legal Notice etc.</li> <li>3. Any other information you would like to share with us.</li> </ol>	<ol style="list-style-type: none"> <li>1. Inform our Corporate Claims Dept. immediately (at the address given above) giving full details of the incident.</li> <li>2. Do not commit any benefit/compensation or enter into any agreement.</li> </ol>
Overseas in-hospital Indemnity Accident Benefit	<ol style="list-style-type: none"> <li>1. Duly Completed Overseas Travel Claim form and documents as mentioned in Medical Accident &amp; Sickness Expenses, along with admission discharge card indicating the number of days Hospitalized.</li> </ol>	<ol style="list-style-type: none"> <li>1. Claim Form can be obtained from our Assistance Company</li> <li>2. Fill in the Claim Form and send all documents to our Corporate Office at the address given above.</li> </ol>

Accidental Death & Dismemberment (Permanent Total Disability) *Common carrier	<u>ACCIDENTAL DEATH</u> 1. Claim form (Personal Accident claim form as attached) 2. Original Death Certificate 3. Original/ Attested Post Mortem/ Coroner's report 4. Police Inquest report, where applicable 5. Copy of Passport/visa <u>For Dismemberment /Permanent Total Disability</u> 1. Claim form (Personal Accident claim form as attached) 2. Original Disability Certificate from the Doctor 3. Medical/ Investigation/ Lab reports (x-ray etc.) 5. Admission/ discharge card, if hospitalized 6. Police Inquest report, where applicable 7. Copy of Passport/visa	1. Claim Form can be obtained from Assistance Company. 2. Fill in the Claim Form and send all documents to our Corporate Office at the address given above. * Collect all documents pertaining to the loss including correspondence with Common Carrier and send to our Corporate Office at the address given above
Loss of Baggage	1. Claim form (Overseas Travel claim form, as attached) 2. Property Irregularity Report (obtained from Airline) 3. Copies of Correspondence with the Airline authorities/others confirming the loss and details of compensation. 4. Individual list of items in each baggage with approximate cost of each item. 5. Copy of the passport/Visa with Entry & exit stamp 6. A copy of the Travel certificate/ policy	1. Intimate the airline about your loss and lodge complaint, obtain the PIR Property Irregularity report. 2. Claim Form can be obtained from our Service Center. 3. Fill in the Claim Form and send all documents to our Corporate Office at the address given above. <b>NOTE:</b> Damage to the luggage or partial loss of its contents are not covered under the policy
Delay of Baggage (12 hours)	1. Claim form (Overseas Travel claim form, as attached) 2. Property Irregularity Report (obtained from Airline) 3. <b>Original bills/receipts/invoices pertaining to expenses incurred/purchases made towards necessary personal effects, during the delay period</b> 4. Copies of Correspondence with the Airline authorities/others and details of compensation. 5. Copy of the passport/Visa with Entry & exit stamp 6. A copy of the Travel certificate/ policy	1. Obtain confirmation of the delay from the airline 2. Claim Form can be obtained from our Service Center. 3. Fill in the Claim Form and send all documents to our Corporate Office at the address given above. <b>NOTE:</b> Baggage delay in Egypt is not covered
Loss of Passport	1. Claim form (Overseas Travel claim form, as attached) 2. Copy of new passport & previous passport (if available) 3. <b>Original bills/invoices of expenses incurred for obtaining a new passport</b> 4. Copy of FIR/ Police Report	1. File a complaint with the local police & Contact with the respective Embassy, where ever necessary 2. Submit all documents to our corporate office at the address given above, along with a detailed statement.
Trip Delay	1. Claim Form 2. Original Bills of purchases made/ Expenses incurred during the period of delay 3. Copy of Ticket & Boarding Pass 4. Copies of Correspondence with the Airline authorities certifying about the delay	1. Please contact the Assistance Company at the number given above 2. Fill in the Claim Form and send all documents to our Corporate Office at the address given below
Bail Bond	You will be advised as soon as we received your claim notification.	1. Please collect all documents and send to our Corporate Office at the address mentioned above along with covering letter briefing the circumstances of loss.
Home Insurance	1. Police report. 2. Prosecutor decision. 3. Detailed list for the stolen/damaged/lost items with its value (invoices if any).	1. Please collect all documents and send to our Corporate Office at the address mentioned above along with covering letter briefing the circumstances of loss.

**\* Note: We may call for additional documents/ information as relevant.**

**\*\* If any hospital does not submit a bill to you for the treatment/service rendered, please intimate our Assistance Company before you leave the hospital.**