

**Hotline :**  
**+33 (0)3 28 04 69 85**

ZONE D'ACTIVITE ACTIBURO  
99 Rue Parmentier  
59650 Villeneuve d'Ascq  
Tél. +33 (0)3 20 34 67 48  
Fax +33 (0)3 20 64 29 17  
contact@assur-travel.fr

[www.assur-travel.fr](http://www.assur-travel.fr)



# International Private Medical Insurance for Foreign Expatriates in France

**Health, Life & Disability, Assistance and Private Liability  
for foreign expatriates in France.**

**2021** Conditions



## ASSUR-TRAVEL, wholesale insurance broker and specialist of international mobility offers:

- A wide range of health plans at a very attractive price.
  - **BASIC HEALTH PLAN**
  - **PREMIUM HEALTH or PREMIUM ACCESS PLANS**
  - **CONFORT HEALTH or CONFORT ACCESS PLANS**
  - **SUMMUM HEALTH PLAN**
- Repatriation assistance with **VYV INTERNATIONAL ASSISTANCE**.
- Third-Party Liability, vital to protect you and your family.
- Life & Disability: Life Insurance, Total and Irreversible Loss of Autonomy, Sick leave.



## Ten reasons to choose ASSUR-TRAVEL EXPATRIATES:

### Products tailored to your needs

- 1 Products with reimbursements of up to 100% of real costs.
- 2 Advance on payment of hospital bills with just a call.
- 3 Your reimbursements within 48 hours by bank transfer in the currency of your choice.
- 4 Keep track of your reimbursements easily: payment details sent by e-mail, follow your reimbursements on our administrator's website: [www.gapigestion.com](http://www.gapigestion.com).
- 5 Medical assistance helpline available 24/7.
- 6 With Gapi Adhérents Application on your smartphone, you manage your International private Medical insurance, your claims, and you contact the Medical Assistance helpline.

### Simple registration procedure

- 7 A simple registration form and medical questionnaire to return to us signed.
- 8 You can pay your premiums by direct debit, credit card or bank transfer in a local currency (33 currencies available) via the secure site [www.gapigestion.com](http://www.gapigestion.com). Payment expenses are reduced because transactions are the same as for domestic bank transfers.
- 9 A team of expatriation specialists on hand to give advice about our products according to your needs.

### Very competitive prices

- 10 From €26 per month and per person as an individual customer and €62 per month for a family. Or choose a policy with an annual deductible and benefit from a further reduction of between 9 and 18%. Or choose our PACK PLUS offer (Health + Life + Assistance) and get 10% off your health bills.

**Download  
your GAPI Members  
application and manage  
your contract and  
your repayments  
on your mobile**



GAPI adherents





Teleconsultation

**médecin**direct

à vos côtés, où que vous soyez

**A health issue? Consult a general practitioner or specialist in writing, by telephone or video 24 hours a day, 7 days a week.**

**The MédecinDirect medical teleconsultation service is 100% supported by your insurer.**



## HOW IT WORKS

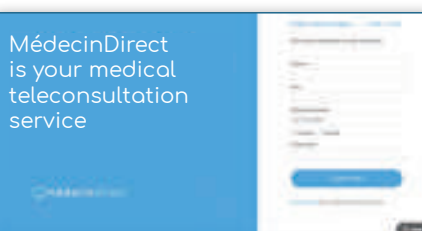
**To benefit from the MédecinDirect medical teleconsultation service:**

1



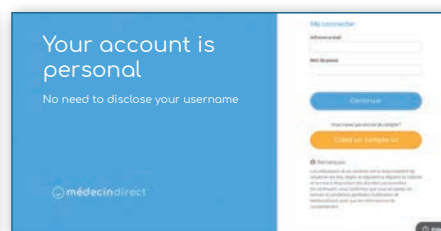
Go to the website [www.medicindirect.fr](http://www.medicindirect.fr) or the free MédecinDirect app (available on iOS and Android).

2



Fill in the registration form and enter your GAPI membership number. Your registration will be automatically recognized and free of charge.

3



Log in with your email address (your username) and the password you chose when you registered.

4

Enter the validation code, (not to be confused with your password) that will be asked for each connection, to ensure the total security of your personal data. You can choose to receive it by email or SMS.

5

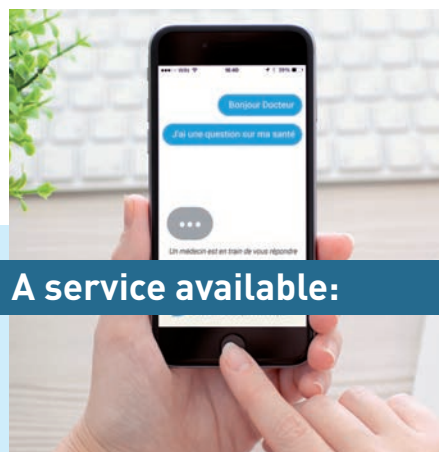


Once your account is created, confirm your identity. This step is mandatory if you wish to receive a prescription.

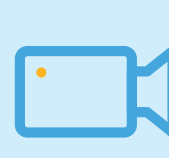
6



Click on «new consultation» to get in touch with a doctor.



**A service available:**

**24/7****In writing****By telephone****By video**





## MANAGEMENT TOOLS TAILORED FOR INTERNATIONAL MOBILITY

Assur Travel provides customers with connected tools to facilitate the management of their remote contracts.

A new website: [www.gapigestion.com](http://www.gapigestion.com)



On your personal space, you have access to your contract, to make changes online (email address, bank details etc.).



You have access to your refunds and can download your benefit slips.



You have access to all your documents, information sheets, care sheets and prior agreement forms necessary for your contract.

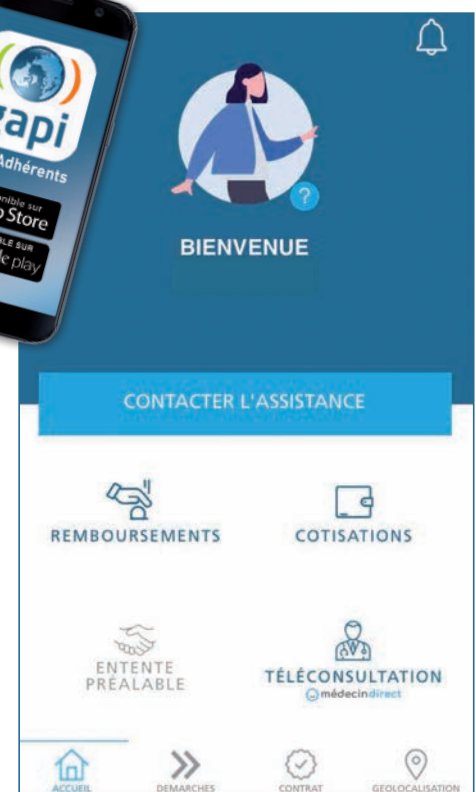


You can pay your membership fees on-line.

## A new Gapi Member app

With this application, insured parties have access via their smartphone to all the features of their personal space on the site: [www.gapigestion.com](http://www.gapigestion.com).

- You have access all the information of your contract.
- You pay your membership fees online via a totally secure space.
- You follow your repayments.
- You have access to all the emergency telephone numbers: Repatriation assistance if option has been subscribed, direct settlement system.
- With a simple photograph and a click, you send your care bills to the management center.
- You have access the care network of your zone.





## HOW SHOULD YOU CHOOSE YOUR PLAN?

We recommend choosing your health plan according to your needs and your country of expatriation.

	BASIC	PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
Hospitalisation	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs
Cancer treatment	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs
AIDS treatment	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs
Organ transplant	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs
Emergency treatment all over the world	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs	100% of real costs
Ambulance costs	90% of real costs	90% of real costs	90% of real costs	100% of real costs	100% of real costs	100% of real costs
General practitioner / specialist consultations	NO	90% of real costs	90% of real costs	100% of real costs	100% of real costs	100% of real costs
Pharmacy	NO	90% of real costs	90% of real costs	100% of real costs	100% of real costs	100% of real costs
Maternity	NO	NO	Annual maximum €2500	NO	Annual maximum €5000	Annual maximum €7500
Maternity with surgery	NO	NO	Annual maximum €5000	NO	Annual maximum €10000	Annual maximum €15000
Sterility treatment	NO	NO	NO	NO	Annual maximum €1000	Annual maximum €1500
Alternative medicine: Osteopathy, etc.	NO	Annual maximum €240	Annual maximum €240	Annual maximum €1000	Annual maximum €1000	Annual maximum €1600
Optical	NO	NO	Annual maximum €300	NO	Annual maximum €500	Annual maximum €700
Dentistry	NO	NO	Annual maximum €1000	NO	Annual maximum €2000	Annual maximum €3000
Medical prostheses	NO	NO	Annual maximum €300	NO	Annual maximum €600	Annual maximum €1000

### Level of coverage

- Basic level
- Medium level
- Maximum level

**BASIC:** You want to be covered only for Hospitalisation.

**PREMIUM - PREMIUM ACCESS - CONFORT ACCESS:** Your priority is maximum security at a very competitive price. You are looking for insurance that gives you 100% coverage for major risks like hospitalisation, and for your doctors' and medicine bills. In return, your coverage for other elements is less wide-ranging, but you benefit from the most competitive price.

**CONFORT:** You are looking for a guarantee of comfort, offering you a very good level of coverage on all elements.

**SUMMUM:** You are looking for a high quality insurance that offers you the best coverage for all risks in any country of expatriation.

If you are looking for a highly competitive price, choose our PREMIUM, CONFORT or SUMMUM offers with an annual deductible (see pages 11, 12, 13).

## WHAT TERRITORIES ARE COVERED?

The geographic area of your contract is assigned to the Zone A.

In case of emergency (accident or unexpected illness), the health costs incurred in countries outside this Zone will be granted if they are exposed by You or by your Assignees during a private or business trip of up to 60 days, and if they were not foreseeable before the trip.

The geographic area can be upgraded on request. You can contact us by phone at 03 28 04 69 85 or by email [contact@assur-travel.fr](mailto:contact@assur-travel.fr) for any request for a health quote covering the zones B, C or D.



# BENEFITS / REIMBURSEMENTS

## 1<sup>st</sup> Euro Health PLANS



### REIMBURSEMENT RATES CORRESPONDING TO CHOSEN AND ACCEPTED COVERS AS APPEARING ON THE REGISTRATION CERTIFICATE

#### GARANTEES 1/2

The warranties made include refunds of C.F.E., the French Social Security or the 1<sup>st</sup> Euro of costs incurred, within the limits of actual costs

FORMULAS	BASIC	PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
Maximum limit by policyholder and calendar year	€ 750 000	€ 750 000	€ 1 500 000	€ 1 500 000	€ 2 000 000	€ 2 500 000
<b>H Hospitalisation (in% of real costs)</b>						
Medical or surgical hospitalisation <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Outpatient Hospitalisation <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Psychiatric hospitalisation (limited to 30 days/year) <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Medical and surgical fees <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Tests, analyses and pharmacy <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Private room <sup>(1) (4)</sup>	€50 / day	€60 / day	€60 / day	€120 / day	€120 / day	€180 / day
Bed in room with child under 16 (limité à 30 jours/an) <sup>(1) (4)</sup>	€30 / day	€30 / day	€30 / day	€45 / day	€45 / day	€60 / day
Daily rate <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Outpatient consultations related to Hospitalisation / outpatients surgery <sup>(1)</sup>	100%	100%	100%	100%	100%	100%
Physiotherapy immediately after Hospitalisation (up to 30 days/year) <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Reconstructive dental surgery after an Accident <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Organ transplant <sup>(1) (4)</sup>	100%	100%	100%	100%	100%	100%
Transport by land ambulance <sup>(1)</sup>	90%	90%	90%	100%	100%	100%
<b>M Maternity in% of real costs)</b>						
Maternity	not covered	not covered	100%	not covered	100%	100%
- Childbirth costs and pre- and post-birth sessions <sup>(1) (4)</sup>			(max. €2500 /year)		max. €5000/year	max. €7500/year
- AIDS screening test					(€3000/year in	(€4000/year in
- Diagnostic of chromosomal anomalies					Zone A + France)	Zone A + France)
Childbirth surgery <sup>(1) (4)</sup>	not covered	not covered	100%	not covered	100%	100%
			(max. €5000 /year)		max. €10000/year	max. €15000/year
					(€6000/year in	(€ 6000/year in
					Zone A + France)	Zone A + France)
IVF - Sterility (pharmacy, in-vitro fertilisation, analyses, follow-up tests <sup>(1)</sup> for women under 45	not covered	not covered	not covered	not covered	100%	100%
					(max. €1000 year	(max. €1500/year
					and max. 3 IVF/	and max. 3 IVF/
					duration of policy)	duration of policy)
Transport by land ambulance in case of Hospitalisation <sup>(1)</sup>	not covered	not covered	90%	not covered	100%	100%

(1) Request for preliminary agreement obligatory

(2) Request for preliminary agreement obligatory for a series of procedures (>10 sessions)

(3) Request for preliminary agreement obligatory for treatment or procedures costing over €1000






(4) Possible direct payment



## BENEFITS / REIMBURSEMENTS

### GARANTEES 2/2

The warranties made include refunds of C.F.E., the French Social Security or the 1<sup>st</sup> Euro of costs incurred, within the limits of actual costs

FORMULAS	BASIC	PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
Maximum limit by policyholder and calendar year	€ 750 000	€ 750 000	€ 1 500 000	€ 1 500 000	€ 2 000 000	€ 2 500 000
 <b>Out patient Services (in% of real costs)</b>						
GP consultation	not covered	90% (max. €40/consultation)	90% (max. 40 €/consultation)	100% (max. €100/consultation)	100% (max. €100/consultation)	100% (max. €150/consultation)
Specialist consultation	not covered	90% (max. €60/consultation)	90% (max. €60/consultation)	100% (max. €130/consultation)	100% (max. €130/consultation)	100% (max. €170/consultation)
Treatment by medical auxiliary <sup>(2)</sup>	not covered	80% (max. €40/procedure)	80% (max. €40/procedure)	100% (max. €80/procedure)	100% (max. €80/procedure)	100% (max. €120/procedure)
Teleconsultation  <small>à vos côtés, où que vous soyez</small>	not covered	€30/act	€30/act	€30/act	€30/act	€30/act
Technical medical treatment (outside hospital) <sup>(3)</sup>	not covered	80%	80%	100%	100%	100%
Medical analyses <sup>(5)</sup>	not covered	80%	80%	90%	90%	100%
Radiology (including IRM) <sup>(5)</sup>	not covered	80%	80%	100%	100%	100%
Pharmaceutical expenses and vaccines	not covered	90%	90%	100%	100%	100%
Alternative medicine: chiropractic, osteopathy, acupuncture, homeopathy, and traditional Chinese medicine (limited to China, Thailand, Hong Kong, Singapore and Vietnam)	not covered	80% (max. €30 per procedure and €240/year)	80% (max. €30/ procedure and €240/year)	100% (max. €70/ procedure and €1000/year)	100% (max. €70/ procedure and €1000/year)	100% (max. €100/ procedure and €1600/year)
Check-up (one check-up every two years)	not covered	not covered	not covered	€100 (max. €300/year)	€100 (max. €300/year)	€100 (max. €400/year)
 <b>Medical prostheses (in% of real costs)</b>						
Medical prostheses, small equipment and treatment accessories <sup>(1)</sup>	not covered	not covered	90% within limit of €300/year	not covered	100% within limit of €600/year	100% within limit of €1000/year
 <b>Vision Care (in% of real costs)</b>						
Lenses and frames	not covered	not covered	90% within limit of €300/year	not covered	100% within limit of €500/year	100% within limit of €700/year
Contact-lenses	not covered	not covered	90% within limit of €100/year	not covered	100% within limit of €260/year	100% within limit of €300/year
Refractive eye surgery <sup>(1)</sup>	not covered	not covered	90% within limit of €300/year	not covered	100% within limit of €500/year	100% within limit of €700/year
 <b>Dental care (in% of real costs)</b>						
Dentistry limit by policyholder and by year)	-	-	€1000/year (€500 the first year)	-	€2000/year (€1000 the first year)	€3000/year (€1500 the first year)
Dental treatment <sup>(3)</sup>	not covered	not covered	90%	not covered	100%	100%
Dentures (including inlays and onlays) <sup>(1)</sup>	not covered	not covered	90% (max. €200 per tooth)	not covered	100% (max. €400 per tooth)	90% (max. €600 per tooth)
Orthodontia (children under 16, maximum of 3 years for entire duration of the policy). <sup>(1)</sup>	not covered	not covered	90% (max. €600/ year)	not covered	100% (max. €1000/ year)	100% (max. €1200/ year)

(1) Request for preliminary agreement obligatory

(2) Request for preliminary agreement obligatory for a series of procedures (>10 sessions)

(3) Request for preliminary agreement obligatory for treatment or procedures costing over €1000

(4) Possible direct payment



## BENEFITS / REIMBURSEMENTS

## Life and Disability COVERAGE



	COVERAGE
Death from any cause	Choose by levels of €30,000 (between € 30,000 and €300,000)
Total and Irreversible Loss of Autonomy (PTIA)	The above amount will be paid in advance if policyholder suffers PTIA. This cancels the Death from any cause.
Temporary Total incapacity to work / Permanent invalidity	Choose by levels of €30 (Daily annuity: between €30 et €150)

Death from any cause: Maximum of €90,000 if you are self employed

Maximum of 300% of your annual salary if you are a salaried employee

Temporary total incapacity to work / Permanent invalidity: limited to 1000th of your life insurance capital.

## Optional COVERAGE



## Repatriation assistance



	COVERED OR ADVANCED
Medical contact	
Transport / Repatriation	Real costs
Return of accompanying beneficiary	Return trip
Accompaniment of children	Round-trip for accompanying person
Presence during Hospitalisation	Return trip and hotel expenses of up to €125 a night
Hospital expenses	Advance on expenses of up to €150,000
Early return in case of hospitalisation of a close family member	Round trip
Transport of deceased (organisation and expenses)	Real costs
Return of accompanying person or family members	Real costs / Return trip
Coffin costs	€2,300
Recognition of body	Round trip
Early return in case of decease of close family member	Round trip
Advance on bail costs	€30,500
Advance and coverage of legal costs	€7,700
Assistance in case of theft, loss or destruction of identity papers	
Replacement by colleague	Round trip
Advance of funds (theft, loss of means of payment)	€2,300

## Third-Party Liability



	COVERAGE
All damages	€4,500,000
Resulting material and immaterial damages	€450,000
Deductible	€150



**BENEFITS / REIMBURSEMENTS****DEFINITION OF GUARANTEES****SCOPE OF THE HEALTH BENEFIT**

The aim of the Health guarantee is to reimburse all or part of your expenses and those of your beneficiaries for medical-surgical, optical or dental treatment, and expenses due to maternity. The expenses taken into account are exclusively those figuring in the table of Health guarantees.

For You and your Beneficiaries, expenses are paid for treatment for which the starting date occurs between the dates of application of the contract and the date of the policy closure (or cancellation of registration), on condition that the medical treatment that gave rise to these expenses has been prescribed and carried out by doctors authorised and approved to do so, or by Eligible Health Establishments.

For treatment in France, the conditions required for reimbursement are those defined for medical procedures for professionals by the French Social Security or by any other similar organisation.

**HEALTH PRODUCTS WITH OR WITHOUT DEDUCTIBLES**

To benefit from a deduction of 9 to 18% on your health subscription, choose a product with an annual deductible.

**DEFINITION OF ANNUAL DEDUCTIBLE**

**Annual amount to be paid by you.**

**By annual deductible is understood the deductible by calendar year.**

Reimbursements are made within the limits shown in the table of guarantees and within the limit of real costs. Reimbursements are made after the deduction of the annual deductible:

- Individual: €150 or €300
- Couple (2 adults, ou 1 child + 1 adult): €300 € or €600
- Family: €450 € or €900



**BENEFITS / REIMBURSEMENTS****SCOPE OF THE LIFE AND DISABILITY COVER****ALL-CAUSE DEATH BENEFIT**

The purpose of the All-Cause Death Benefit is to pay to the Beneficiary (ies) you have designated up on your death, the Death benefit that you have chosen.

You choose the amount of the Death benefit per increment of € 30,000:

- up to € 90,000 if you are not a salaried employee;
- within the limit of 300% of your gross annual salary, with a maximum of € 300,000, if you are a salaried employee.

**TOTAL AND IRREVERSIBLE LOSS OF AUTONOMY (PTIA)**

If you suffer a Total and Irreversible Loss of Autonomy (PTIA), the Insurer will pay you, in advance, the Death benefit taken out in case of an all-cause death.

The PTIA cover cannot be combined with the All-cause death cover. As a result, the Death Benefit paid to you in advance terminates the All-Cause Death Benefit.

Whatever the case, you are considered to have PTIA status when:

- you are definitively recognized as being incapable of engaging in any occupation or work liable to be gainful or profitable;
- you are obliged to be assisted by a third person to perform the ordinary acts of everyday life;
- and it is established that your condition, being definitive in nature, is not susceptible to improve in any way.

**TEMPORARY WORK DISABILITY / PERMANENT DISABILITY**

The Total Temporary Incapacity to Work - Permanent Disability cover can only be taken out in addition to the compulsory all-cause death cover, provided you are a salaried employee.

**Total Temporary Incapacity to Work (ITT)**

If you have ITT status, the Insurer will pay you a daily allowance as of the 1st Euro.

You choose your deductible at the time of your membership in your membership form. You have the choice between the following deductibles:

- 30 days;
- 60 days;
- 90 days.

You also choose the amount of the daily allowance.

You are considered to have ITT status, when due to an accident or illness, your state of health prohibits you from doing any work.

**Permanent Disability**

If you have partial or total permanent disability, the Insurer will pay you a disability pension as of the 1st Euro.

The annual amount of the full disability pension is the amount you have chosen for the per diems multiplied by 360. It serves as the basis for calculating the disability pension.

You are considered to have a partial or total permanent disability when, following an illness or an accident resulting in the payment of daily allowances by the Insurer, you are unable to exercise all or part of your professional activity and simultaneously have, after your state of health is medically stationary, a functional disability and a professional disability:

- **the functional disability** is determined by the nature of your infirmity, your general condition, your age, as well as your physical and intellectual faculties. It is assessed on the basis of the indicative functional scale for common law disabilities;
- **the professional disability** is assessed on the basis of the rate and nature of the functional disability in relation to the occupation, the conditions of normal practice, the remaining opportunities for work, the possibilities of reclassification in a socially equivalent profession and the possibilities of rehabilitation.

The nature and the rate of invalidity are fixed by the administration medical adviser.



## PREMIUMS

### CALCULATION OF PREMIUMS

The premiums are given in euros, according to:

- type of contract: Individual, Family (we take into account the age of the oldest person in the family), or Couple (two adults or one adult and one child),
- the policyholder's age,
- the chosen Health insurance plan: BASIC, PREMIUM ACCESS, PREMIUM, CONFORT ACCESS, CONFORT, SUMMUM, with or without an annual deductible;
- the chosen Life and Disability scheme,
- the guarantee geographic Zone A, B, C, D.

The premiums are revised on April 1<sup>st</sup> of each year by THE COMPANY. The policyholder is informed of the new rates 1 month before April 1<sup>st</sup>.

### PAYMENT OF PREMIUMS

The premiums are payable in advance, by quarter, biannually or annually, within 10 days of the due date. They can be paid by automatic bank transfer or via the secure website of our administrator [www.gapigestion.com](http://www.gapigestion.com) by credit card or domestic bank transfer. 33 currencies are available to simplify procedures and avoid all excessive bank charges.

## 1<sup>st</sup> Euro Health Monthly Premium Rates



		BASIC	PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A							
INDIVIDUAL	0 to 32 years old	63,00	89,00	135,00	125,00	184,00	218,00
	33 to 42	90,00	128,00	195,00	169,00	253,00	303,00
	43 to 50	117,00	172,00	265,00	235,00	350,00	428,00
	51 to 60	197,00	252,00	385,00	351,00	522,00	617,00
	61 to 64	301,00	368,00	565,00	515,00	766,00	906,00
FAMILY	0 to 32	163,00	217,00	332,00	302,00	450,00	532,00
	33 to 42	225,00	333,00	496,00	465,00	692,00	819,00
	43 to 50	298,00	444,00	660,00	623,00	923,00	1092,00
	51 to 60	461,00	586,00	897,00	819,00	1219,00	1440,00
	61 to 64	660,00	813,00	1183,00	1137,00	1693,00	2002,00

It is agreed that policyholders' acceptance of the guarantees will bring about automatic membership of the ASPI association (Association Santé et Prévoyance internationale) and the request for annual membership rights of 23 euros by family.

## CPAM - complementary Health Monthly Premium Rates



		BASIC	PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A							
INDIVIDUAL	0 to 32 years old	26,00	41,00	68,00	67,00	95,00	110,00
	33 to 42	34,00	59,00	97,00	95,00	132,00	157,00
	43 to 50	43,00	79,00	131,00	124,00	172,00	218,00
	51 to 60	71,00	113,00	215,00	187,00	267,00	362,00
	61 to 64	110,00	170,00	301,00	276,00	389,00	462,00
FAMILY	0 to 32	62,00	100,00	166,00	163,00	228,00	273,00
	33 to 42	84,00	152,00	238,00	206,00	292,00	360,00
	43 to 50	108,00	205,00	354,00	295,00	419,00	602,00
	51 to 60	167,00	272,00	445,00	437,00	618,00	811,00
	61 to 64	245,00	375,00	620,00	597,00	841,00	978,00

It is agreed that policyholders' acceptance of the guarantees will bring about automatic membership of the ASPI association (Association Santé et Prévoyance internationale) and the request for annual membership rights of 23 euros by family.



You are looking for very competitive prices and high quality service: we put at your disposal our PREMIUM, CONFORT and SUMMUM products with an ANNUAL DEDUCTIBLE.

#### How the annual deductible works:

At the beginning of each calendar year, we reimburse your health costs after you pay the annual deductible.

- Annual deductible 150:
  - The deductible applies up to €150 in individual subscription.
  - The deductible applies up to €300 in couple subscription.
  - The deductible applies up to €450 in family souscription.
- Annual deductible 300:
  - The deductible applies up to €300 in individual subscription.
  - The deductible applies up to €600 in couple subscription.
  - The deductible applies up to €900 in family subscription.

### Monthly Rates for 1<sup>st</sup> Euro Health Deductible 150\*



		PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A						
INDIVIDUAL	0 to 32 years old	78,00	122,00	112,00	168,00	197,00
	33 to 42	112,00	171,00	153,00	230,00	275,00
	43 to 50	152,00	232,00	214,00	319,00	389,00
	51 to 60	222,00	339,00	319,00	476,00	562,00
	61 to 64	323,00	497,00	469,00	697,00	823,00
FAMILY	0 to 32	190,00	293,00	275,00	408,00	485,00
	33 to 42	294,00	437,00	424,00	631,00	743,00
	43 to 50	392,00	581,00	567,00	838,00	994,00
	51 to 60	515,00	791,00	743,00	1108,00	1310,00
	61 to 64	717,00	1041,00	1036,00	1540,00	1822,00

\*9% tax included

### Monthly Rates for 1<sup>st</sup> Euro Health Deductible 300\*



		PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A						
INDIVIDUAL	0 to 32 years old	74,00	110,00	104,00	156,00	186,00
	33 to 42	104,00	162,00	143,00	215,00	261,00
	43 to 50	142,00	217,00	200,00	297,00	366,00
	51 to 60	206,00	316,00	298,00	444,00	530,00
	61 to 64	302,00	461,00	438,00	653,00	780,00
FAMILY	0 to 32	175,00	272,00	258,00	382,00	458,00
	33 to 42	273,00	406,00	397,00	589,00	702,00
	43 to 50	365,00	541,00	529,00	784,00	940,00
	51 to 60	480,00	735,00	696,00	1036,00	1238,00
	61 to 64	668,00	969,00	967,00	1440,00	1723,00

\*9% tax included





## Monthly Rates for CPAM Health Deductible 150\*\*



		PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A						
INDIVIDUAL	0 to 32 years old	35,00	54,00	58,00	82,00	96,00
	33 to 42	48,00	77,00	82,00	113,00	137,00
	43 to 50	66,00	106,00	106,00	148,00	192,00
	51 to 60	95,00	172,00	162,00	229,00	316,00
	61 to 64	139,00	240,00	239,00	337,00	405,00
FAMILY	0 to 32	82,00	129,00	138,00	194,00	231,00
	33 to 42	125,00	187,00	175,00	246,00	310,00
	43 to 50	166,00	278,00	250,00	354,00	515,00
	51 to 60	219,00	349,00	371,00	524,00	694,00
	61 to 64	303,00	489,00	508,00	714,00	837,00

\*\*15,27 tax included

## Monthly Rates for CPAM Health Deductible 300\*\*



		PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A						
INDIVIDUAL	0 to 32 years old	33,00	49,00	54,00	75,00	92,00
	33 to 42	43,00	70,00	75,00	104,00	127,00
	43 to 50	60,00	96,00	99,00	137,00	178,00
	51 to 60	87,00	159,00	148,00	211,00	294,00
	61 to 64	128,00	222,00	220,00	311,00	378,00
FAMILY	0 to 32	75,00	120,00	127,00	178,00	217,00
	33 to 42	113,00	171,00	160,00	228,00	288,00
	43 to 50	152,00	257,00	230,00	326,00	481,00
	51 to 60	200,00	321,00	341,00	481,00	649,00
	61 to 64	278,00	447,00	467,00	657,00	781,00

\*\*15,27 tax included



## PREMIUMS/RATES

## Life and disability monthly Rates (9% tax included)



## Death by any cause / Total and irreversible loss of autonomy (PTIA)

Age of policyholder	For a capital of €30,000
18 to 32	€3,18
33 to 37	€4,29
38 to 42	€5,84
43 to 46	€9,18
47 to 50	€12,88
51 to 55	€19,74
56 to 60	€31,42
61 to 65	€46,18

Select the capital you want (a multiple of €30,000 with a maximum of €300,000).

Example: you want a capital of €90,000 and you are 35 years old: your monthly premium will be €12.87 (4.29 X 3).

Please note: if you not a salaried employee, the maximum authorised capital is set at €90,000.

## Total Temporary Incapacity of Work / Permanent Invalidity

Age of Policyholder	For a daily annuity of €30 Deductible period 30 days	For a daily annuity of €30 Deductible period 60 days	For a daily annuity of €30 Deductible period 90 days
18 to 32	€17,77	€14,51	€12,62
33 to 37	€20,51	€17,00	€14,94
38 to 42	€26,27	€22,06	€19,48
43 to 46	€34,85	€29,61	€26,61
47 to 50	€46,69	€39,91	€36,05
51 to 55	€54,08	€46,09	€41,72
56 to 60	€62,83	€53,22	€48,32
61 to 65	€72,96	€61,54	€56,05

Choose the amount of your daily annuity (a multiple of €30 with a maximum of €150).

Please note: this guarantee must be contracted with the above Life Insurance guarantee, and the Life Insurance guarantee must be at least equal to 1000 times the daily annuity.

Example: if you are on sick leave and you want to receive a daily annuity of €90, your Life Insurance capital must be at least €90,000.

If you are aged 35 and you opt for a deductible period of 30 days, your monthly sick leave contribution will be €61.53 (€20.51 X 3).

If you are not a salaried employee, you cannot benefit from the Total Temporary Incapacity from Work / Permanent Invalidity guarantee.

## Optional covers monthly Rates



## ASSISTANCE RATES

## ZONE 1

INDIVIDUAL	€20
FAMILY	€51

## THIRD-PARTY LIABILITY RATES (including 9% insurance tax)

## ZONE A

INDIVIDUAL	€10
FAMILY	€16



## Monthly PACK PLUS Rates

**PACK PLUS: 1st Euro Health without deductibles + €150,000 Life Insurance Guarantee + €90 Sick Leave Guarantee + deductible period of 30 days + Assistance.**

**CHOOSE THE PACK PLUS AND GET 10% OFF YOUR HEALTH PLAN PRICE.**

**This special offer is reserved for policyholders in zones A, B and C.**

**The PACK PLUS includes a simplified registration procedure limited to a health questionnaire.**

1 <sup>ST</sup> EURO HEALTH RATES		PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A - France and Belgium						
INDIVIDUAL	0 to 32	79,00	124,00	110,00	166,00	196,00
	33 to 42	115,00	175,00	152,00	227,00	273,00
	43 to 50	157,00	237,00	211,00	315,00	385,00
	51 to 60	226,00	347,00	316,00	470,00	556,00
	61 to 64	332,00	508,00	462,00	689,00	817,00
FAMILY	0 to 32	195,00	298,00	273,00	404,00	479,00
	33 to 42	299,00	445,00	419,00	624,00	736,00
	43 to 50	400,00	595,00	559,00	831,00	983,00
	51 to 60	527,00	807,00	736,00	1095,00	1296,00
	61 to 64	731,00	1065,00	1024,00	1524,00	1801,00

\* including 9% insurance tax

CPAM HEALTH RATES		PREMIUM ACCESS	PREMIUM	CONFORT ACCESS	CONFORT	SUMMUM
PAYS ZONE A - France and Belgium						
INDIVIDUAL	0 to 32	37,00	61,00	61,00	84,00	99,00
	33 to 42	54,00	88,00	84,00	119,00	141,00
	43 to 50	71,00	119,00	110,00	153,00	198,00
	51 to 60	104,00	194,00	168,00	237,00	323,00
	61 to 64	150,00	271,00	249,00	350,00	417,00
FAMILY	0 to 32	90,00	148,00	146,00	206,00	243,00
	33 to 42	138,00	214,00	186,00	260,00	326,00
	43 to 50	185,00	318,00	266,00	376,00	542,00
	51 to 60	242,00	400,00	393,00	557,00	729,00
	61 to 64	337,00	558,00	539,00	760,00	879,00

\* including 9% insurance tax

## Death by all causes / Total and Irreversible Loss of Autonomy (PTIA)

Age of Policyholder	For a capital of €150,000
18 to 32	€15,88
33 to 37	€21,46
38 to 42	€29,18
43 to 46	€45,92
47 to 50	€64,38
51 to 55	€98,71
56 to 60	€157,08
61 to 65	€230,89

## Total Temporary Incapacity to Work / Permanent Invalidity

Age of Policyholder	For a daily annuity of 90 euros – Deductible period 30 days
18 to 32	€53,30
33 to 37	€61,54
38 to 42	€78,80
43 to 46	€104,55
47 to 50	€140,08
51 to 55	€162,23
56 to 60	€188,49
61 to 65	€218,88

## ASSISTANCE PRICES

ZONE 1 - France	
INDIVIDUAL	€20
FAMILY	€51



## HOW TO REGISTER?

### SIMPLIFIED REGISTRATION PROCEDURE

For your registration to be taken into consideration, it must include:

- a fullfilled registration form,
- a health questionnaire for each individual to be insured.

**Choose our PACK PLUS: a package including Health plan + Assistance + €150,000 Life Insurance + Sick Leave, and get 10% off your health plan price, with a simplified registration procedure limited to a health questionnaire.**

Return these documents to GAPI, our insurance administrator, ZONE D'ACTIVITE ACTIBURO - 99 Rue Parmentier - 59650 VILLENEUVE D'ASCQ - France.

After your registration form and health questionnaire have been processed, our administrator, GAPI, will contact you to:

- inform you of any medical formalities to be undertaken with a list of practitioners to facilitate the procedure,
- your guarantee acceptance conditions,
- and communicate procedures for reimbursement and for payment of premiums.

### CANCELLATION OF APPLICATION

You can cancel your application by exercising your right to annulation in the terms and conditions outlined in the following articles:

**Article L.112-9, first paragraph of the French insurance code** stipulates that: *"Any individual who is offered a service at his home, place of residence or workplace, even at his own request, and who signs an insurance proposal or a Contract unrelated to his commercial or professional activity, has the right to cancel it by registered letter with request for a proof of delivery during a period of 14 completed calendar days from the day on which the contract was concluded, with no obligation to give reasons of justification or to incur any penalties. (...) If the individual becomes aware of a loss or incident bearing on the guarantee of the Contract, the individual can no longer exercise the right of cancelation".*

We advise you that if you wish to exercise your right to cancelation, you should write a letter in the following terms:

I, the undersigned (First and Last Names of the Policyholder), residing at (main residence), declare that I cancel my acceptance of the **Assur Travel Health Contract** n° A 4916 (followed by your registration number), which I signed on (DD/MM/YYYY).

*(If premiums have been received)* Please reimburse the premiums already paid, according to the conditions outlined by the article L. 112-9 of the French insurance Code, after deduction of the premiums attributable proportionally for the period of guarantee.

*(In case of online commercialisation)* I promise, for my part, to reimburse the funds that may have been paid to me.

At ....., on ..... Policyholder's signature

**Consequences in case of an applicant exercising the right to cancellation in the terms of the article L. 112-9 of the French insurance Code:**

Exercising the right to cancellation leads to acceptance of the Contract being revoked from the date of receipt of the registered letter. However, when an applicant discovers a loss or incident bearing on the guarantee of the Contract, the right to cancellation can no longer be exercised.

In case of cancellation, the Administrator will carry out the reimbursement of premiums within thirty days of the date of cancellation, after deduction of the amount corresponding to the duration during which the policy was effective. All premiums are still due to the Administrator if the right to cancellation is exercised when a loss or incident bearing on the guarantee of the policy and of which he had no prior knowledge occurs during the cancellation period.

**In the event of exercise of the right to cancellation according to the terms of the articles L. 112-2-1 of the Insurance code and L. 121-20-8 of the Consumer code (remote sale or provision of services):**

In compensation for the complete and immediate execution of the registration before the expiry of the cancellation period, the premiums owed by you are equal in proportion to the annual premiums for the period between the date of effect scheduled for the end of the registration period and the date that the cancellation is received.

If funds have been paid, you promise to reimburse the amounts received to the Administrator within 30 days.

If premiums have been received, the Administrator will refund them, after deduction of the premiums in proportion to the guarantee period within 30 days.



**PEOPLE COVERED****Registration conditions****You, the Policyholder**

- are aged from 18 to under 65 on the day of application;
- are of a nationality other than the country of expatriation;
- have paid the membership fees to the Association to become a member of it.

**Your beneficiaries****■ your partner:**

- your spouse, from whom you must not be legally separated (subject to providing formal confirmation of non-separation),
- your partner in a PACS civil partnership (subject to providing a copy of the partnership from the district court service of your common place of residence),
- the person you live with (subject to providing proof of joint residence and a formal declaration of your enduring relations), aged under 65 on the date of registration.

■ **dependent children:** your children and/or those of your partner, fiscally dependent on you and/or your partner, until their 16th birthday in all cases, and until their 26th birthday if they are in higher education (subject to providing a university attendance certificate or a photocopy of a valid students card, at the moment of registration and at each yearly renewal) and not in full-time work. Your disabled children and/or those of your partner are also included, if they are holders of an invalidity card as outlined in the article L.241-1 of the French Code of social action and families.

**Your beneficiaries must reside in the same zone of expatriation as you in order to benefit from the chosen guarantee option.**

**START OF COVERAGE****You, the Policyholder**

Your policy becomes effective from the date indicated on your registration Certificate. It begins, at the earliest, on the day after the date of reception of the completed application by the Administratore, subject to:

- acceptance of your application after the medical selection;
- payment in full of the first premium;
- acceptance of any supplementary premium that the insurance administrator has proposed;

**Your beneficiaries**

The registration of your beneficiaries takes effect on the same date and in the same conditions as your own registration.

In case of modifications in your family situation (marriage, PACS, establishment of a stable relationship, birth or adoption of a child), the registration of your beneficiaries will take effect at the earliest on the first day after the formal acceptance of their registration by the Administrator and in the same conditions as your own registration.

Your children born after acceptance of the Contract are considered to be admitted, without medical formalities, subject to their birth being declared to the Administrator in the month following their date of birth. In this case, their registration will be dated from the day of their birth. If the period of one month is over, their registration will be dated at the earliest on the day after the receipt of their birth certificate by the Administrator.

**Your enrolment and the registration of your Beneficiaries are effective until 31st December of the current year. They are then renewed by tacit agreement on 1st January of each year for successive periods of one year.**

**However, you have the right to cancel your policy at the time of its annual renewal by sending a registered letter to the Administrator at least two months before the due date. Moreover, if, during the period of application of the policy, you should be affiliated to a mandatory insurance system in your country of expatriation, you may cancel the policy by sending a registered letter to the Administrator along with any document proving the obligatory affiliation to the insurance system.**

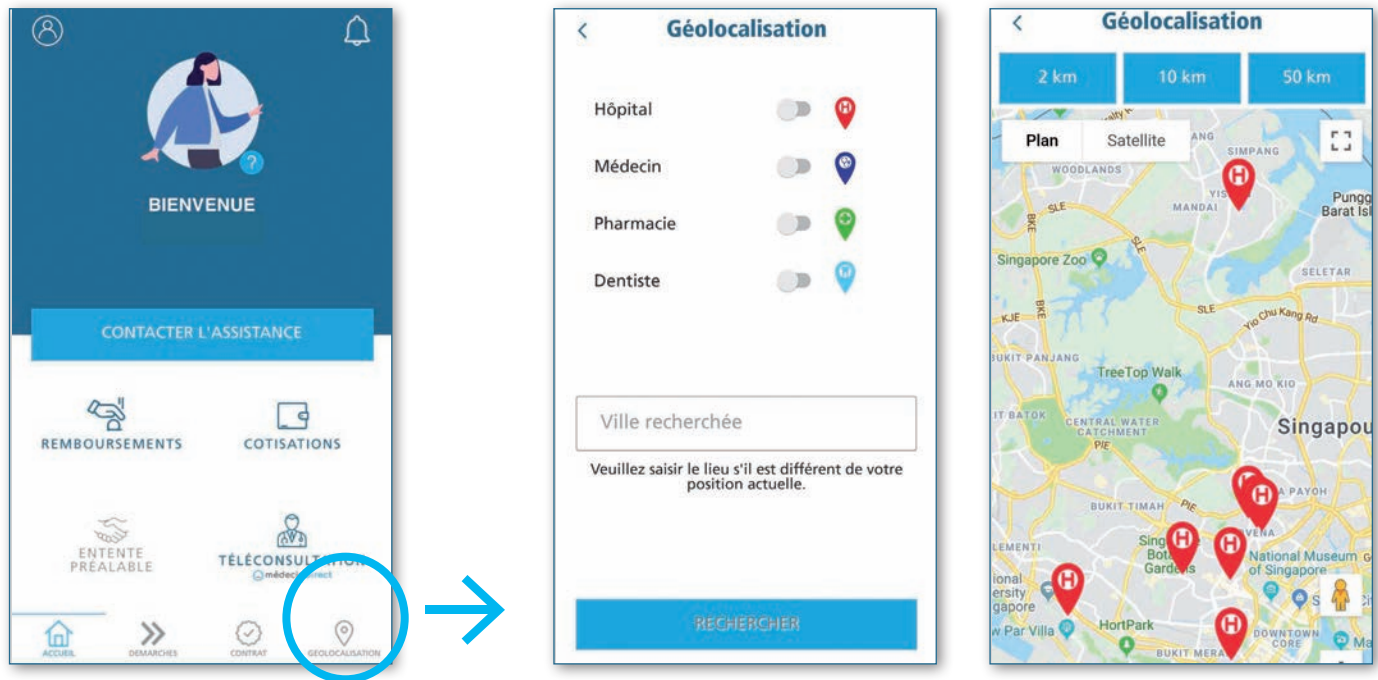
**Your chosen guarantees**

The guarantees in the Contract that you have chosen take effect at the date of your enrolment (and that of the registration of your Beneficiaries), subject to a waiting period. **The Administrator will only accept the engaged amounts from the date of effect of the guarantees and for the duration of the Period of coverage.**



## WHERE CAN I HAVE TREATMENT?

With Gapi Adhérents Application, you have the practitioners, hospitals, drugstores and dentists available in your area.



## HOW IS MY TREATMENT PAID?

### IN AN EMERGENCY

For any request for an advance on hospital costs, you have access to a hotline giving you access to a third-party payer anywhere in the world.

In case of repatriation needs, you have access to a Medical Assistance Helpline available 24/7, 365 days a year anywhere in the world.



### DIRECT PAYMENT

Direct payment means that your health costs are directly paid by the Administrator to the Eligible Health Establishment, without you needing to make any payment in advance.

Subject to respecting the procedure of prior agreement, the Administrator assures direct payment for the following costs:

#### **Hospitalisation**

■ All costs linked to a Hospitalisation **excepting outpatient consultations directly arising from Hospitalisation (post- and pre-hospitalisation), restorative surgery following an Accident, transport by land ambulance and Hospitalisations for less than 24 hours.**

#### **Maternity**

- childbirth costs;
- surgical childbirth costs.



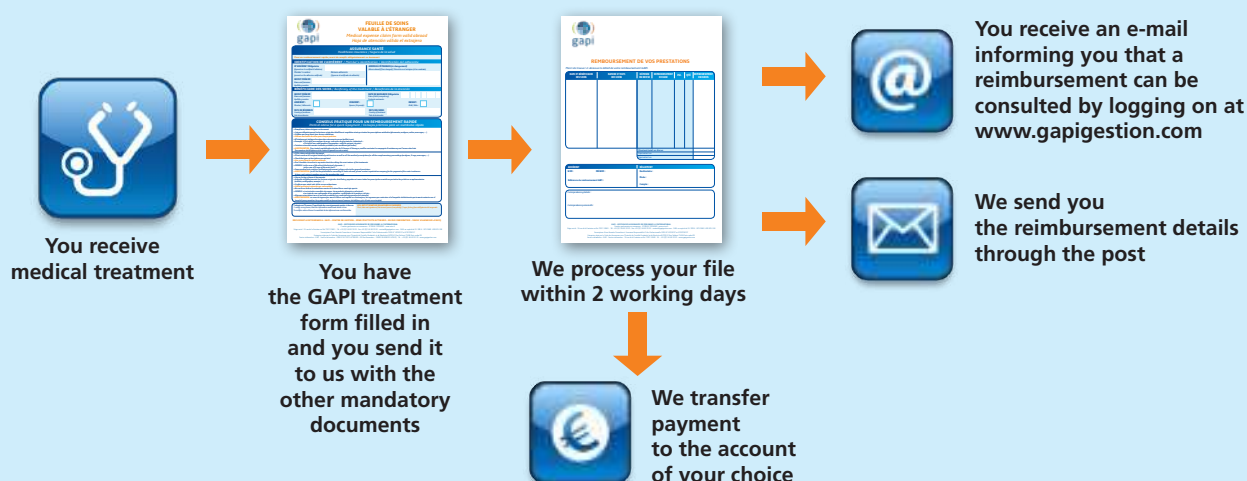
## HOW TO BE REIMBURSED?

Our insurance administrator **GAPI** will reimburse your funds within 48 hours, after receipt of your claims form and your justification for reimbursement.

Log on to your account at [www.gapigestion.com](http://www.gapigestion.com) to keep track of your reimbursements and to pay your premiums online.



### Reimbursement procedure for treatment



To be reimbursed, you need to send a request to the insurance administrator, together with the following documents:

- The **prescription**;
- The **detailed, paid invoice**, as well as the **invoice of fees** from any medical practitioner or Eligible Health Establishment;

■ For **treatment in France**: the **CERFA document** filled in by the doctor, the pharmacy or the Eligible Health Establishment;

■ The **receipts given by pharmacies** for the prescription in question;



## ASSUR-TRAVEL, your mobility partner.

Led by insurance professionals, ASSUR-TRAVEL, wholesale broker, is specialised in conceiving and managing insurance programmes linked to international mobility.

**ASSUR-TRAVEL is partner of the Caisse des Français de l'étranger (Fund for French People Overseas)**, and has over 12000 expat clients all over the world. Each month 100 new expats chose our health insurance plans. De nombreuses entreprises, PME ou groupes internationaux font confiance à ASSUR-TRAVEL.

Many companies - small and medium-sized firms or international conglomerates - are signed up to ASSUR-TRAVEL. Thanks to the trust they have placed in us, ASSUR-TRAVEL has extended its range of contracts to students, to short-term foreign visitors to France and abroad, as well as to people taking short business trips and holidays. ASSUR-TRAVEL insures travel for over 2.000.000 people a year.

### ASSUR-TRAVEL TRAVEL is associated with some of the major names in international mobility:



#### SWISS LIFE

With its 19 billion euro turnover in 2014, the SWISS LIFE group is one of the European leaders on the markets of life insurance, of pension, financial and health insurance investments for business and individual clients.



#### VYV INTERNATIONAL ASSISTANCE

Subsidiary of the VYV group created in 2017, the leading health insurer in France (MGEN, Harmonie Mutuelle, etc.), with 40,000 employees, protects 10 million people for more than 72,000 public and private employers. It totals a turnover of 10 billion euros in health insurance, providence, care and support services and retirement savings..



**GAPI**, (Gestion des Assurances de Personnes à l'International, Administration of the Insurance of Individuals Overseas) is one of the major names in health cost management in France. A partner of ASSUR-TRAVEL and of the Caisse des Français de l'Etranger, and helping over 12,000 expats all over the world, GAPI brings transparency and personalisation to the insurance administration via its multilingual platform.



#### TOKIO MARINE HCC

Subsidiary of Tokio Marine and Nichido Fire Insurance, Tokio Marine is the most important and oldest non-life insurance company in Japan in the field of Company, Maritime and transport risks.

### CONTACT OUR SALES DEPARTMENT

For more information:

By telephone on +33 (0)3 28 04 69 85 from 9 am to 6 pm.

By e-mail: [contact@assur-travel.fr](mailto:contact@assur-travel.fr)

To ask for an online estimate or to register online on our site: [www.assur-travel.fr](http://www.assur-travel.fr)



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Partenaire de votre mobilité

**ASSUR-TRAVEL - Courtier Grossiste en assurances** - N° ORIAS 07030650 - [www.orias.fr](http://www.orias.fr)

Siège social : ZONE D'ACTIVITE ACTIBURO - 99 Rue Parmentier - 59650 VILLENEUVE D'ASCQ - France - Tél: 03 20 34 67 48 - Fax: 03 20 64 29 17

SAS au capital de 100.000 € - RCS LILLE 451 947 378

Entreprise régie par le Code des assurances sous l'Autorité de Contrôle Prudentiel et de Résolution (ACPR) 4 place de Budapest CS92459 - 75436 Paris cedex 09

Souscripteur d'une assurance Responsabilité Civile et Garantie financière ALLIANZ N°53271725-29

Conformément aux dispositions de l'article L.520-1-II b du code des assurances, Assur-travel exerce comme courtier en assurances.

La liste des compagnies d'assurance avec lesquelles nous travaillons est à votre disposition sur simple demande.

Service réclamation : ASSUR TRAVEL- Service Réclamation - ZONE D'ACTIVITE ACTIBURO - 99 Rue Parmentier - 59650 VILLENEUVE D'ASCQ - Tél: 03 20 34 67 48

Délais de traitement des réclamations : sous 10 jours ouvrables à compter de la réception de la réclamation.

Si notre service réclamation ne vous donne pas satisfaction, vous pouvez saisir le Médiateur de l'Assurance :  
par courrier simple à : LA MEDIATION de L'ASSURANCE - POLE PLANETE CSCA - TSA 50110 - 75441 PARIS cedex 09  
ou par email à [le-mediateur@mediation-assurance.org](mailto:le-mediateur@mediation-assurance.org) ou à partir du site : <https://www.mediation-assurance.org/>