

INSURANCE GUIDELINES 2006

valid from 01.01.06 till 31.12.06

Introduction

These guidelines summarise the levels of cover provided by an insurance policy held by SCI with Winterthur, an insurance company based in Switzerland. It provides world-wide cover for cases of accident, illness and third party liability arising during the course of voluntary projects run by SCI branches and other organisations (hereafter referred to as "organisations"). It is intended to be complementary to other insurances, i.e. it should be used only for those risks that are not covered under a private or state insurance scheme. SCI can also arrange cover for those people for whom state or private insurance is difficult to access. Those without any other insurance should be aware of the coverage limitations provided under these arrangements.

Our ability to keep the insurance premiums low depends on the full co-operation of the participating organisations, particularly with regard to keeping claims to a minimum (by promoting responsible attitudes to matters of safety etc.), declaring the full numbers of insured days and the prompt settlement of accounts.

SCI only "passes on" the cover from Winterthur against their premium, plus a fee for administration. Winterthur accepts that we include volunteers from other organisations as well as those from SCI. Since SCI is not an insurance company or broker, we cannot issue insurance certificates or contracts. Nevertheless, we are able to provide written confirmation of insurance cover for specified volunteers. Please contact us for more details.

Coverage

Insurance cover normally only applies to those people (national and foreign) on the projects run by and in the same country as the "host" organisation. Thus, an organisation running workcamps in France is only covered for the volunteers (French and foreign) on its own workcamps in France. However, insurance coverage can be provided for volunteers participating in projects run by other organisations (in the same country or abroad) if all relevant information is passed to the Insurance Administrator in advance. Also, for coverage of long term volunteers (>90 days), notification in advance is required. Equally, coverage for events different from workcamps (e.g. study tours, seminars, (inter)national meetings) is provided **only** if notified in advance.

Coverage for accidents

- full cost for doctors, medicines and hospitalisation, for a maximum period of 10 years following the accident (for spectacles the upper limit is 200 euro)
- up to a maximum of 111,000 Euro (standard = 49,600 Euro) for total or partial disability (depending upon the extent of disability to be established by a doctor appointed by the insurers)
- up to a maximum of 12,500 Euro for death, plus 3,000 Euro in case of 1 dependent child (up to and including 18 years of age) or 6,000 Euro in case of more dependent children.
- full cost for repatriation in case of medical necessity

Coverage for illness

- up to a maximum of 9,400 Euro for doctors, medicines and hospitalisation up to 1 year for the same case
- up to a maximum of 3,100 Euro for repatriation in case of medical necessity

Coverage for Third Party Liability

For accidental damage to property or personal injury as a direct result of the actions of insured volunteers or workers during the period of insurance (e.g. during the workcamp or project), the maximum cover is 3,720,000 euro for injury or death in the same accident or for material damage. Cover does not extend to property loaned to or connected with the organisation or project, the personal property of volunteers or workers in the same project (insured or not) or to personal injury to uninsured volunteers or workers on the same project.

The Insurance does not cover:

- (1) people younger than 16 and people older than 70 years of age (for the accidents coverage there is no upper age limit);
- (2) costs for medical treatment if the doctor in charge is not officially registered with the medical authorities in the country concerned;
- (3) costs for illness or accidents arising from special physical or mental conditions (e.g. epilepsy, physical handicap, chronic illness) existing prior to the period of insurance. People who fall into this category should seek advice on alternative insurance arrangements;
- (4) costs arising from accidents or illnesses related to the abuse of drugs, alcohol or other narcotic substances;
- (5) medical expenses related to pregnancy after the first 5 months of the pregnancy;
- (6) costs for illness resulting from exhaustion or nervous and psychiatric disorders;
- (7) material damage when caused by volunteers to other volunteers or people belonging to the organisation or when caused to goods that were given to the workcamp for temporary use e.g. cars, tools, bikes;
- (8) theft of goods that were given for temporary use;
- (9) costs arising from the cancellation of projects;
- (10) costs arising from accidents while undertaking high risk leisure activities (such as paragliding, canoeing, skiing, diving). Claims will only be considered where participants have received professional training and are properly supervised;
- (11) temporary loss of earnings due to accident or illness;
- (12) dental costs and costs for spectacles not resulting from an accident;
- (13) costs from accidents or injuries arising from civil disturbances, war etc., even if the people insured have no part in the actions;
- (14) travel from home to the project and back.

For the last two exclusions, the Insurance Administrator can be contacted to widen the coverage from the normal basic coverage. **In exceptional cases, the International Insurance Commission may decide to make ex-gratia payments.**

Important Notices

- (15) Public medical facilities should be used whenever possible. Treatment in private clinics will only be compensated for if there is no reasonable alternative available.
- (16) Costs of emergency transport resulting from accidents or illnesses are covered completely, subject to the limits set out above, but the reimbursement of other transport costs resulting from accidents or illnesses is limited to the cost of public transport.
- (17) Coverage only extends to the direct costs of medical assistance which results from illnesses contracted or accidents that took place DURING the project. Moreover, the insurance provides compensation for death occurring only in case of ACCIDENTS.
- (18) The Insurance Commission reserves the right to reject the claim if there is evidence of an accident arising as a result of negligence or during the course of an illegal activity (e.g. whilst using a vehicle with inadequate insurance coverage).

Premiums

Tariff per person per day	From the same continent		From a different continent	
	SCI (4)	Non-SCI (4)	SCI (4)	Non-SCI (4)
Location and period of the insured activity	SCI (4)	Non-SCI (4)	SCI (4)	Non-SCI (4)
< 48 hours anywhere	€ 0.25	€ 0.40	€ 0.25	€ 0.40
In low rate Europe (1)	€ 0.30		€ 0.55	
In Asia (3) and Africa	€ 0.25		€ 1.00	
In Latin America	€ 0.55			
< 90 consecutive days in high rate area (2)	€ 0.70			
> 90 consecutive days in high rate area (2)	€ 1.00			

Please note that the minimum premium per insured event (meeting, seminar, workcamp, volunteer service) is 5 EURO. Organisations that pay the premiums in advance can have a discount of 5%.

In Western Europe people normally resident in CEE (see note 1) count as people from a different continent.

Notes:

- (1) Greece, Ireland, Italy, Malta, Spain, Portugal, UK and CEE (Central and Eastern Europe: Poland, Czech Republic, Slovakia, Hungary, Romania, Bulgaria, Slovenia, Croatia, Bosnia, Serbia and Montenegro, Macedonia, Albania, Estonia, Latvia, Lithuania, the European part of Russia, Moldova, Ukraine and Belarus.)
- (2) Europe (except those under (1)), USA, Canada, Japan, South Korea and Oceania
- (3) Asia also includes the Asian part of Russia and Kazakhstan, Kyrgyzstan, Armenia, Azerbaijan, Georgia and Tajikistan but excludes Japan and South Korea
- (4) The separation into SCI / Non-SCI refers to the organisation taking out and paying for the insurance, not to the volunteer or the host project (unless they are the ones taking out the insurance).

The SCI Insurance Commission

The SCI Insurance Commission oversees the administration of the insurance scheme on behalf of the SCI International Committee. It is comprised of SCI's International Treasurer, up to 4 lay members and a medical doctor. It meets at least once per year to review financial and administrative arrangements, including premiums and coverage, and to consider pending cases. In addition, members are in regular touch with the Insurance Administrator in the International Secretariat regarding particular claims etc.

Administrative procedures

Application for insurance coverage

Any organisation which needs insurance coverage under this scheme (and who has not used it in the previous year) should apply to the Insurance Administrator well in advance, indicating the approximate number of people and types of project for which they require coverage and over what period of time. The Insurance Commission will then confirm whether or not it is possible to include them in the scheme.

Notification of coverage required

Since voluntary service organisations do not normally know for certain how many people are going to participate in their projects until they are finished, final notification of the coverage required is retrospective. This is the exceptional characteristic of this scheme and it necessitates a considerable degree of mutual trust between SCI and the organisations concerned.

The Insurance Administrator should be informed of the workcamps' precise data (location, data, number of volunteers) at the end of each year. Special notification forms are available.

The data should be sent to the Insurance Administrator in advance for:

- long term volunteers
- volunteers sent to Asia, Africa, Latin America
- special cover for travel days
- cover for special events (seminars, study tours, meetings)

What to do in case of illnesses or accidents

Before proceeding with a claim to the Insurance Administrator, it is vital to check with the person(s) concerned whether there is any other insurance scheme (private health insurance, reciprocal state schemes etc.) to which a claim could be made. Where such a possibility exists, a claim must also be placed with the appropriate authority in addition to notifying the Insurance Administrator. The SCI Insurance Commission will only take responsibility for those items not covered by alternative schemes.

Please note that it is not possible for the SCI Insurance Administrator to give immediate confirmation (whether over the telephone or my email or fax) whether or not a particular claim will be met. In the case of a serious accident or illness, involving hospitalisation, air ambulance etc the case will need to be referred by the Insurance Administrator to SCI's insurers in Switzerland for further action.

1. If you think you may need to claim under the SCI scheme, you should take the Notification Form with you to the doctor in charge. The doctor should fill in the "medical report". Make sure (s)he signs it! The Notification Form (63/64) is used to claim medical costs. In the case of third party responsibility, no special form exists. A clear report with all useful data must be made.
2. Check whether all questions are filled in an understandable way. If the medical report is not written in English, French, German or Dutch, try to get a translation. If this would cause any delay, you can send the translation later.
3. The front page of the form has to be filled in and signed by the insured person and the project leader.
4. Make a copy of the form and send the original by fax or mail to: SCI-IS Insurance Department, Sint-Jacobsmarkt 82 B-2000, Antwerpen, Belgium. **Send your form within 2 days after your FIRST visit to a doctor.** The name of the volunteer should be mentioned on every document.
5. Make sure that you have a copy of all bills and send the original (or a copy, if the original has to be put in with another insurance) to the Insurance Administrator. No claims can be considered unless accompanied by verifiable receipts from a doctor, chemist, hospital etc.

In serious cases (death, possible disability) you must warn the Insurance Administration within 24 hours (by telephone, fax, or telegram). Emergency phone numbers are:

SCI International Secretariat : 32.3.226.57.27 Fax: 32.3.232.03.44
Nico Verzijden (home) : 31.10.432.63.80
Willy Dries (home) : 32.3.232.36.36

In case of a serious accident, make sure that an official report about the circumstances and causes is made (preferably by the police). If not possible, prepare at least a list of witnesses (names and addresses). The list might be needed later to decide whether a case will be accepted.

6. Project leaders and insured persons should always inform the national secretariat of their organisation.

Payment of claims

Small claims (under 100 Euro) can be settled on the spot from the organisation's own funds. Provided the settlement is accepted by the insurance scheme, this amount will then be credited to the organisation's current account with the SCI's International Secretariat. The scheme does not accept responsibility for the local settlement of claims that are not covered by the scheme. In case of doubt, enquiry should be made to the Insurance Administrator before settlement of claims.

The immediate settlement of larger claims must be avoided, to enable the Insurance Commission to carry out investigations if necessary. A phone call to the Insurance Administrator (for telephone numbers see above) is recommended. When the size of an accepted claim exceeds the availability of local funds, the claim may be settled directly by the SCI International Secretariat.

When medical costs are paid on the spot, the organisation must take steps to ensure that these costs are partially or totally recovered from any alternative insurance cover (state or commercial) which the volunteer may have. If the insured person lives in another country, the Insurance Administrator may co-ordinate the refund (e.g. with the co-operation of the sending organisation).

Pending bills: bills should be sent to the Insurance Administrator within 4 months after the occurrence of the accident or illness. If the branch or organisation still expects bills for a case after that period, it should inform the Insurance Administrator.

Settlement of accounts

SCI branches/groups only

A pink slip will be issued by the Insurance Administrator for each claim accepted by the scheme and settled by the branch/group from its own funds. At the end of each year, the premium will be settled by an automatic payment through the Volunteer Exchange Fee (VEF), or by pink slip for some categories of volunteers.

Other organisations only

At the end of the year the Insurance Administrator will deduct the amount paid out in claims by the organisation concerned from the amount due for premiums (this will not, of course, include "pending" cases or claims met directly by the International Secretariat). The organisation will then be asked to settle its account by cheque or by transfer to one of the bank accounts of SCI International Secretariat:

From Belgium: Tridos 523-0801949-28; Triodos Bank, Hoogstraat 139/3, 1000 Brussel
From abroad: IBAN BE37 5230 8019 4928; BIC TRIOBE91
In Switzerland: Coop 045000.29.00.10-8; CoopBank in Zürich
In Netherlands: Postbank 4047513

In some countries it is also possible for non-SCI organisations to pay to the national SCI branch to avoid international bank charges. **NOTE: organisations paying by cheque will be charged 7,50 euro extra to cover the costs of cashing the cheque.** If a particular organisation is owed more for claims than is due for premiums, the organisation concerned will receive a credit against next year, or, if the sum involved is large, it may be paid directly by SCI's International Secretariat.

Special note

These guidelines form no part of a contract between SCI, its insurers, the SCI International Insurance Commission, the SCI International Committee, SCI branches, other voluntary organisations participating in the insurance scheme, or individual volunteers for whom coverage is being provided under the scheme. They are intended to provide general guidance on the type of cover provided under the scheme, its costs and administrative arrangements.

Although these guidelines may be translated into other languages, the English version is the original and it is recommended that it is consulted in the first instance over issues of interpretation etc.