

FAQ - Frequently Asked Questions

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1. What is covered under this EMSP 'Erasmus Mundus Student Protection' insurance?

You are covered for all worldwide travels required for the participation in the Erasmus Mundus Programme by the insurer and Assistance Provider Europ Assistance in Belgium. Marsh is the insurance broker.

Erasmus Mundus Student Protection 'EMSP' covers you for accident and/or illness occurring for the first time during the period of coverage, for urgent dentistry fees, permanent disability third party liability, loss/ theft of travel documents abroad, loss/ theft of luggage (optional: please have a look at your insurance certificate in order to check if the luggage option was subscribed), etc....

It also covers you for expenses such as repatriation and medical transport.

There is no limit of indemnity (= reimbursement of the real costs incurred) and no deductible to pay on medical costs. You have to pay for all medical costs, treatment first and claim for a refund. If hospitalized, you need to stay in a common ward or semi-private room (not a private room).

You are not covered for pre-existing medical conditions (medical conditions for which treatment can be postponed until your return home), some illnesses (such as AIDs, malaria, typhus,...) and non-urgent dental care.

The summary of the insurance coverage and the Terms & Conditions are available on the information website <http://www.marsh.be/emsp>. We advise you to read these documents carefully.

If you would have queries on the cover for which no answer can be found in this FAQ document you can send an email to Marsh (= the broker) to emis2.info@marsh.com or you can reach us through the 'Contact Us' section on the website <http://www.marsh.be/emsp>.

2. Where am I covered? Does this include cover in my Home Country?

You are covered for all worldwide travels outside your country of official residence (=country where your ID or passport is issued), required for the participation in the Erasmus Mundus mobility programme.

Reasons for travel may be: departure to the destination where the action will take place, travel between the participating higher education institutions, return trip home following completion of the action or during the academic breaks within the specific eligibility period of the action, preparatory meetings, mid-term evaluation meetings, final evaluation meeting, courses, internships, conferences, seminars, research, cultural and intercultural sessions.

In the event of a return trip home for private reasons during the period of coverage you will remain covered for medical costs and urgent dental care for a limited period up to 4 weeks, starting as from the moment you returned home. This limit also applies in case you have returned home and are participating in the courses by studying on-line.

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- 3. On my certificate is indicated cover starts two months prior to the start date and continues for 2 more months after the end of the programme. Does this mean that I am covered in my home country before starting the programme?**

The cover can start up to two months before the schedule date for the beginning of your Erasmus Mundus programme but only in so far as you are abroad and present in the host country in order to prepare your participation in the programme. You are covered from the point at which you leave your residence of your home country to travel abroad to begin your participation in the programme, and not before.

The additional cover of two months after the date mentioned on your certificate is only valid if your extended stay is due to a delay in graduation. Cover will not apply for private stays, or activities that are not related to the Erasmus Mundus programme.

In the event of a return trip home during your period of insurance you will remain covered for medical costs and urgent dental care for a limited period up to 4 consecutive weeks, starting as from the moment your travel to return home commences.

- 4. Do I have to pay anything when getting medical treatment, how does the cover work?**

You have to pay for all medical costs, treatment first and claim for a refund. The insurer will decide based on your claim refund request (including a medical report, reason of medical treatment and description of illness or injury) if your case is covered within the terms and conditions.

The claims procedure is explained und on the information website <http://www.marsh.be/emsp> in the "Claim Procedure" section. We advise you to be as precise and complete as possible when completing the declaration.

In case of hospitalization, you have to contact the Assistance provider on the number indicated on your insurance certificate and ask if they can arrange a direct payment of the bill (under the condition all parties agree) to avoid that you would have to pay the hospitalization bill. If you do not inform the Assistance Provider you will have to advance the money and/or pay the bill and submit a claim to the Claims Handler Services provided by the Insurer for the reimbursement of your medical treatment costs.

- 5. I was ill / I had an accident and went to the doctor/the hospital to be treated. What is the procedure for the reimbursement of the costs incurred?**

The claims procedure is explained in the information website <http://www.marsh.be/emsp> in the Claim Procedure section. The insurer Europ Assistance handles the claim refunds.

Marsh does not handle claim refund requests. In respect with GDPR rules Marsh may not have access to your personal medical data, meaning Marsh cannot assist you on queries relating to the status of your claim. Claim declarations surer that are sent to the e email address emis2.info@marsh.com will not be treated and will be immediately deleted.

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Fill in the claim form:

- Add a copy of the doctor bills; invoices and all proof of costs (always KEEP the ORIGINAL bills at least 1 year after refund in your possession, in case the insurer will require these).
- Add a copy of the diagnosis and/or prescription of medication or appliances (always KEEP the ORIGINAL bills at least 1 year after refund in your possession, in case the insurer will require these).
- Provide your account number including IBAN-code, BIC/SWIFT code and the name and address of your bank, as well as your home address.
- Clearly indicate date and description of the illness/injury. (If the Insurer doesn't know why you went to the doctor they don't reimburse).

6. Does my insurance refund medical treatment due to an epidemic - COVID-19?

Your EMSP insurance policy will refund the medical treatment costs prescribed by a doctor due to an epidemic, such as COVID-19. Excluded are the costs resulting from a decision/organized by public authorities during a contamination/pandemic such as and not limited to:

- Tests to check for the virus,
- Tests to obtain for travel visa,
- Quarantine measures,
- Confinement precautions,
- Safety measure precautions,
- Vaccines / vaccinations,
- Costs that are born/refunded by local public instances.

7. Do you have a specific list of doctors and hospitals for covered services? Which hospital should I go to? Must it be a public hospital, or a private one?

You are free to go to the doctor, specialist, dentist, clinic or hospital of your choice. If you have no idea where to find one in your area, you can contact the Assistance Provider on the number indicated on your insurance certificate. They will assist you in finding someone from their network. You can also contact the International student service of your university. You have to pay for all medical costs, treatment first and claim for a refund.

You have the choice of going to a public or private hospital. Please remember that in case of hospitalization, you must immediately (or let the hospital) call the Assistance Provider and request a common room or semi-private room (not a private room).

The assistance provider can arrange a direct payment of the bill (if all parties agree). If you do not inform the Assistance Provider you will have to pay the bill you receive from the clinic and submit a refund request to the insurer for the reimbursement of your medical treatment costs.

The claims procedure is explained und on the information website <http://www.marsh.be/emsp> in the "Claim Procedure" section. We advise you to be as precise and complete as possible when completing the declaration.

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8. I need to receive the E311 or S1 form as proof I am insured with a Social Security insurer. Can you provide me with this document or the EHIC card?

No, we cannot provide you with the E311 or a S1 document or EHIC Card as the insurance solution is a solution provided by a private insurer, and not with a Social security insurer.

Private insurance companies cannot issue the EHIC. You can obtain your card by contacting a health insurance institution where you live as each individual country is responsible for producing and distributing the card in its own territory to each person covered by the state social security system.

Please go to <http://ec.europa.eu/social/main.jsp?catId=563&langId=en#nationalinfo> and click on the link “health insurance institution where you live” for more information.

EMSP intervenes for the reimbursement of medical expenses incurred due to an accident or sickness covered by the general conditions (= private insurance principles). Once a claim is accepted, no deductible and no limit of indemnity will apply and the full amount of the covered costs will be refunded. The EMSP cover is granted to the insured person as from the date of arrival into the programme, on the basis of list of insureds transmitted by the coordinator of the university to Marsh.

A Social Security insurance will intervene for all the reimbursable services listed in the legal nomenclature, whether for costs related to a pre-existing medical condition or for the costs related to a sickness or accident taking place after the registration to the Social Security System, HOWEVER limited to a legal ceiling. As a result, a certain part of the costs for the services provided is left to be paid by the insured person.

Usually, the insured person has to complete an obligatory waiting period - which may vary from country to country – before he could be reimbursed of medical costs (i.e. all the costs incurred by an insured person during the waiting period will not be reimbursed).

We recommend (when possible) to combine the registration to a Social Security and the EMSP insurance coverage, to get the broadest coverage. If the social security and the EMSP insurance coverage should intervene for the same claim, then the insured person only has to send the evidence of refund issued by the Social Security along with the EMSP claim form. The EMSP reimbursement will take into account the amount already reimbursed by the Social Security.

9. I have the opportunity to take part in the programme but I am 3 months pregnant.

If you have not reached the third trimester (28th week) of pregnancy when joining the programme, childbirth expenses will be reimbursed by the Insurer.

There is no limit on the amount payable and no excess to pay on medical costs (as long as, if hospitalized, you stay in a semi-private room or common ward, not a private room) in accordance with the insurance policy terms and conditions.

You are covered for medical costs in case of illness or issues during your pregnancy. Excluded are vitamin supplements, check-up visits, etc....

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See the detailed description in the EMSP downloadable general conditions, section Health Care '14. Reimbursement of medical expenses. A) Medical expenses following illness, accident or pregnancy”.

When you are admitted to the hospital for childbirth, please call (or let the hospital call) the Assistance Provider. They can contact the hospital to set up a direct payment, if all parties agree, to avoid you have to pay the bill. If the Assistance Provider is not informed you will have to advance the money to pay the bill yourself, and submit a claim to the Insurer to ask the refund of your medical treatment costs.

10. I need to go to the doctor / dentist / gynecologist for a medical check-up visit. Does my insurance cover these costs?

Your EMSP insurance policy does not cover routine check-up doctor visits. A routine medical checkup visit is neither an accident nor an illness and therefore, these medical costs will not be reimbursed under the EMSP insurance policy.

If your visit to the doctor / gynecologist is related to get a prescription of your medication for a pre-existing medical condition or for contraceptive pills, the medical visit costs will not be reimbursed.

If your medical check-up visit is related to obtain your travel visa, these costs will not be reimbursed.

11. I am suffering from a chronic illness and I will pursue my medical treatment during my stay abroad within the Erasmus Mundus programme. Will my treatment costs be reimbursed?

No. This type of medical treatment is related to an illness that exists before the EMSP cover coming into effect. Any cost related to pre-existing medical conditions will not be reimbursed by the Insurer.

The purpose of the EMSP cover is to reimburse the costs incurred for accidents/ illnesses occurring (for the first time) during the period of insurance in accordance with the EMSP general conditions.

12. Are physiotherapy and psychotherapy expenses reimbursed?

The insurer reimburses the physiotherapy and psychotherapy expenses under the condition this treatment is prescribed/imposed by a physician and related to a covered illness or accident.

The insurer will decide if the treatment is covered or not based on the medical report, and sessions are for a limited number of consultations per insurance year:

- Physiotherapy = maximum of 12 consultations per insurance year
- Psychotherapy = maximum of 9 consultations per insurance year.

See detailed description in the downloadable EMSP general conditions “Section Health Care '14. Reimbursement of medical expenses. b) Physiotherapy and psychotherapy”.

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13. I went to the doctor for a vaccination. Will I be reimbursed by my insurance for these medical expenses?

No, because the insurance will only intervene in cases of illness/ accident occurring during the period of coverage. In this case, it is neither an accident nor an illness. Therefore, these medical costs will not be reimbursed under this insurance policy.

14. I was hospitalized and had to pay a hospital bill of 1.500 EURO. How much will be reimbursed by the Insurer?

Provided that the claim is covered (in other words provided that it is not part of the general exclusions of the EMSP cover – see general conditions) and as long as for your hospitalization you stayed in a semi-private room, the medical costs related to your hospitalization will be 100 % reimbursed (no limit of indemnity, no deductible).

15. I need to fill out a claim form to ask the reimbursement of my costs and I was wondering if I need to convert the currency in euro? Which currency rate should I use?

You do not have to convert the amount indicated on the bill. The insurer has the program needed to do it.

16. I have a toothache. Will my visit to the dentist be reimbursed?

Yes. Costs for urgent dental treatment are reimbursed up to maximum 400 EURO. See detailed description in the downloadable EMSP general conditions, section Health Care '14. Reimbursement of medical expenses. 3) Dental treatments".

17. I have fixed braces on my teeth. I would like to go to the dentist to clean my teeth and change the elastic modules. Will my visit to the dentist be reimbursed?

No, these costs will not be reimbursed under the EMSP policy. A simple consultation for control, teeth cleaning, etc. is not considered as an urgent treatment and the insurer may refuse to intervene in these dental costs.

The change of your elastic modules is considered as the follow-up of a treatment that was prescribed before your arrival in the programme and are covered. If you benefit from the social security system, we advise you to contact your social security administration to see if these costs are wholly or partially refundable.

18. Accidentally my dental braces were broken. I would like to know if the repair costs will be refunded?

The Insurer reimburses the costs of urgent dental treatment in case of an acute medical necessity, and covers the repair or the replacement of a denture or of artificial elements of the denture. Dental braces are not considered as a denture, and are thus not covered by your EMSP insurance.

See detailed description in the downloadable EMSP general conditions, section Health Care '14. Reimbursement of medical expenses. c) Dental treatments".

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19. My wisdom tooth really hurts. If I go to the dentist to extract it, will I be reimbursed for the costs incurred?

If the dental care treatment is urgent, you will be reimbursed to max 400 EUR. If the dental care is not urgent or if the dental care treatment is not a consequence of a covered accident, this is not covered.

You have to pay for the treatment, fill in the Medical Expenses Claim Form, and send the claim form with the bills to the insurer. The Insurer will analyze your claim based on the information mentioned on your claim form (+invoices, medical certificate if any, etc.).

If your treatment is covered you will be refunded for your dental care costs, up to maximum 400 EUR per insurance year.

See detailed description in the downloadable EMSP general conditions, section Health Care '14. Reimbursement of medical expenses. c) Dental treatments'.

20. I went to an optician yesterday. He advised me to wear glasses all the time. Will my visit to the optician be reimbursed? How much can I expect to be reimbursed for my glasses?

The EMSP insurance covers the reimbursement of the medical expenses incurred following an accident or disease occurring for the first time during your period of insurance.

If your visit to the optician is not linked to a covered disease or accident, then you will not be reimbursed. The purchase of glasses/lenses because the eyesight diminishes with time is not considered as an illness and is thus not covered.

21. Am I covered for winter sports activities, like skiing or ice hockey?

No, the practice of winter sports is not covered under your EMSP insurance, and there is no possibility to get an extension on the insurance package for these sports.

We recommend you to purchase an additional insurance with a local insurance company if you are planning a winter sports holiday.

22. A family member is seriously ill / passed away during my participation in the programme. I would like to return home for a few days to support my family or attend the funeral. What do I need to do? Who is considered a family member under this policy?

Please call the **Assistance Provider**. You will have to provide your policy number and your full name as indicated in your insurance certificate.

The Assistance handler will detail the procedure and the documents that need to be provided (i.e. death certificate, general claim form, etc.). The Assistance Provider will take care of everything (ticket reservation, etc.). Please note that only the costs related to your return home will be covered, not the costs related to the return of your wife and kids.

Never buy travel tickets yourself in case of an early return without their prior approval. You may run the risk of not being fully reimbursed by the Insurance Company.

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The general conditions of the EMSP insurance policy provides reimbursement of the travel costs in case of death, serious sickness or physical injury of the following insured's relatives : partner, children, parents, brothers, sisters, grandparents or grandchildren.

See detailed description in the downloadable EMSP general conditions "Section Assistance '16. Assistance related to the insured person 3.3. Early return in case of death of a relative".

23. In the summary of benefits is stated that Travel and accommodation expenses for family members are paid up to a max amount of 7.500 EUR. How and when can I claim for this type of costs?

"Travel and accommodation expenses for family members" is applied in case of hospitalization of the Insured on account of sickness or physical injury. In this case, the **Assistance Provider** needs to be contacted to organize the transportation and accommodation of one family member going abroad to visit the student in the hospital where he/she is treated, up to a max. amount of 7.500 EUR.

See detailed description in the downloadable EMSP general conditions, section Assistance '16. Assistance related to the insured person 3.7. Travel accommodation expenses for family members of a relative".

24. My flight was cancelled. Will you buy me new tickets?

Please kindly note that the EMSP cover does not contain a classic Travel cancellation benefit.

Cover only applies when a flight was cancelled in the event of a terrorist attack, natural disaster and epidemics in the country of destination, and you cannot undertake the planned return journey on the planned date.

Excluded are travel booked when the risk of travel to be canceled already existed, meaning the epidemic/pandemic, natural disaster, terrorist attack was a known fact.

You can find the information in Article 3.10 of the Terms and Conditions available on the website.

In case of a covered situation, you can ask for a refund up to maximum 1.250 EUR for the combined costs of:

- justified hotel costs for the extension of the stay up to € 125/day for a maximum of 10 consecutive days
- costs the airline will charge for the re-booking of the flight tickets (same itinerary and class as your originally planned flight).

For all other reasons of cancellations of travel, cover will not apply.

25. Someone stole my wallet and I have to go to the Embassy and apply for a new passport.

The insurer refunds the administrative costs up to maximum 250 EUR in the country where it occurred for their replacement, on condition that you have observed all the necessary formalities in that country (declaration to the competent authorities, police, embassy, consulate, ..). No other expenses are reimbursed.

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See detailed description in the downloadable EMSP general conditions, section Assistance '15. Assistance related to the insured person 3.8. Theft and loss of identification documents and travel tickets'.

26. I lost my phone or maybe it was stolen? Will the luggage insurance buy me a new one?

The simple loss, theft without violence, or theft without any traces of breaking and entering, damages caused by wear and tear are not covered. In case of burglary/theft of luggage and/or personal items you need to report this to the police within 24 hours.

If your insurance contains the baggage/household benefit (see insurance certificate summary of insured benefits) you have insurance for:

- Luggage against total or partial damage, theft and non-delivery of luggage when entrusted to transportation company.
- Delayed delivery of luggage when entrusted to transportation company:
 - minimum 6 hours : total of maximum 250 EUR for purchase of immediate necessity
 - minimum 12 hours : total of maximum 500 EUR for purchase of immediate necessity
- Luggage carried in a private vehicle against total or partial damage, resulting from a road accident
- Luggage carried in a private vehicle against theft only when stored out of vision (in the boot of a completely closed vehicle)
- Luggage attended and objects worn against total or partial damage when resulting from a physical accident, or theft with violence
- Household goods damaged by fire, lightning, storm, water and burglary, robbery and extortion

As to more details on the cover and the exclusions we advise you to read the General conditions section "OPTIONAL Insurance - Baggage and Household furniture".

27. What does « Civil liability » mean ?

It means that you are insured against damage (bodily injury or property damage) caused to a third party, damage for which you are personally held liable (i.e. responsible), due to an involuntary and unforeseen event.

28. Last week I hit a pedestrian with my bicycle. The man was brought to the hospital. Will my cover "civil liability in private life" intervene for his treatment costs?

Your EMSP insurance policy foresees a cover for damage caused to a third-party, when you are held legally responsible. The insurance cover is provided:

- In the event of physical injury, up to the amount of 12.500.000 EUR;
- In the event of material loss or damage, up to the amount of 1.250.000 EUR per incident.

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29. I am lagging behind with my thesis and I won't have my thesis completed by my graduation date. Will I remain covered by this programme?

Yes, the coverage is automatically extended for a maximum of two months after the official end date of your coverage if you are taking up an activity linked to your Erasmus Mundus programme. The coverage still remains available only during the extension period of the programme. This information is also mentioned on your insurance certificate.

30. I have completed my study programme but I would like to stay one more year in Europe to undertake a one-year postgraduate course which has nothing to do with Erasmus Mundus programme. Can I get one-year extension of coverage?

No, this is not possible. It is a tailor-made insurance product developed for universities involved in Erasmus Mundus programme.

If you will continue other studies there is an insurance solution that provides adequate cover during your stay in Europe. The product is called Student Insurance Program or SIP. You will find all the information you need on www.sipinsurance.eu. Please note that the application for SIP depends on the combination of countries (departure country vs. destination country).

If you will remain in Europe for private reasons we cannot assist you with an insurance solution, and you will need to look for a solution locally.