

Whether during mountaineering, your leisure time or travelling on vacation, with the AVS insurance protection we provide cover to take good care of you. In the case of medically necessary initial care within 24-hours, a rescue, therapeutic treatment, medical recovery and transport costs, Alpenverein's insurance protection includes all this in the membership fee, and therefore offers comprehensive protection worldwide.

Overview of cover sums

| COVERAGE | HOME COUNTRY* | ABROAD** |
|----------------------------------|--|---|
| Rescue Costs | a maximum of 25.000 € | |
| Therapeutic treatment | a maximum of 2.000 € for medically necessary initial care within 24-hours | a maximum of 10.000 €; for out-patient treatment a maximum of 2.000 € |
| Repatriation service from abroad | | a maximum of 100% of the costs |
| Transport in the home country | a maximum of 25.000 € incl. rescue costs | |
| Transport of deceased person | a maximum of 25.000 € incl. rescue costs | |
| Emergency service | With the Tyrol Air Ambulance (TAA) bei repatriation, transport and in-patient treatments | |

*Home country: Home country of the member

**Abroad: Worldwide protection excluded north of the Arctic Circle (with the exception of the territories of Norway, Sweden and Finland) or south of the Antarctic Circle.

The insurance protection is valid for all leisure time accidents as well as illness worldwide in the first 8 weeks of each trip abroad.

The following benefits are included in the insurance protection:

Rescue costs

Rescue costs are the costs of authorized rescue organisations for the search and/or rescue and transport to the nearest passable road or to the nearest medical facility of an insured party who is injured, uninjured or deceased as a result of an insured event.

The maximum compensation per person and insured incident is EUR 25,000.

Repatriation service from abroad

Reimbursement of the costs of medically justified transport of the insured individual, within the first eight weeks of a trip abroad, from abroad to a hospital in the home country or to the place of residence, plus the costs of transportation of a person with a close relationship to the claimant.

The following requirements apply for repatriation, in addition to the insured party's medical condition allowing transport:

- a) that there is a life-threatening medical condition or
- b) that medical care provided on-site does not guarantee treatment equivalent to the domestic standard or
- c) that the treatment required from a medical point of view is not provided locally or cannot be obtained, or
- d) that in-patient treatment of more than three days is to be expected.

The transport described here must be carried out by the TAA (TyrolAirAmbulance) printed on the membership card. Otherwise a maximum of EUR 750 must be reimbursed.

Verlegung des Versicherten im Heimatland

Reimbursement of the costs of transferring the insured party from a hospital in the home country to another hospital close to the place of residence or to the place of residence, plus the costs of transportation of a person with a close relationship to the claimant. The maximum compensation per insured incident is EUR 25,000.

The transport must be carried out by a rescue organisation that has been authorized by the insurer.

Transport of deceased persons

Reimbursement of costs of transferring the deceased insured person to the place of burial within Europe, plus the costs of transportation of a person with a close relationship to the deceased person. The maximum compensation per insured incident is EUR 25,000.

The transport must be carried out by an institution authorized by the insurer.

If the transport or repatriation was preceded by a rescue, the maximum compensation in the case of this insurance benefit shall be within the scope of the maximum compensation for rescue costs, i.e. a maximum of € 25,000.

Costs for therapeutic treatment abroad

Reimbursement of costs incurred abroad – within the first eight weeks of a trip abroad - for

- a) medically necessary therapeutic treatment that cannot be postponed, including therapeutic products prescribed by a doctor
- b) medically necessary transportation to the nearest suitable hospital

The maximum compensation per person and trip abroad is EUR 10,000, of which EUR 2,000 is available for out-patient treatment including prescribed medication.

Costs for therapeutic treatment in the home country

Reimbursement of treatment costs incurred in the home country for medically necessary initial treatment (within 24 hours of the occurrence of the insured event). The maximum compensation per person and insured incident is EUR 2,000.

Exclusions

There shall be no insurance protection for insured events:

1. involving the insured party as a pilot (including sports pilots), where they require a permit for this under Italian law, and as other crew members of aircraft and when using spacecraft. However, we provide insurance protection for insured events suffered by the insured party as a passenger in powered aircraft. These aircraft must be licensed for passenger transportation.
 2. suffered by the insured party as a result of participating as a driver, passenger or occupant of a motor vehicle in driving events, including official training and qualification runs, in which the aim is to cover a specified distance as quickly as possible or to surmount obstacles or challenging terrain.
 3. during participation in state, national or international competitions in Nordic and Alpine skiing, snowboarding and freestyling, bob, ski-bob, skeleton or luge as well as official training for these events; the exception being climbing competitions as a member of the Italian Association of Climbing Sports (FAIS);
 4. which occur when the insured party attempts or commits acts punishable by law and for which intent is a constituent element of the offence;
 5. caused directly or indirectly by war or civil war events. However, insurance protection is provided if the insured party is unexpectedly affected by war or civil war events during trips abroad (passive war risk). This insurance protection shall expire at the end of the 7th day after the start of the war or civil war on the territory of the state in which the insured party is staying. The extension shall not apply to travel to or through countries where war or civil war is already underway. The insurance protection also does not apply to active participation in such an event or to accidents caused by NBC weapons or in connection with a war or warlike situation between the countries of China, France, Great Britain, India, Japan, Russia or the USA.
 6. due to civil unrest if the insured party has participated in it on the side of the instigators of the unrest;
 7. that is caused directly or indirectly
 - by any use of nuclear, chemical or biological weapons,
 - by nuclear energy,
 - or by the influence of ionizing radiation within the meaning of the prevailing version of the Radiation Protection Act, except those caused by therapeutic treatment due to an insured incident;
 8. of the insured party due to
 - a suicide attempt,
 - a disturbance of consciousness, insofar as this is due to alcohol, narcotics or medication.
 9. due to damage to health during therapeutic treatment or interventions on the body of the insured person. However, insurance protection shall be provided if the therapeutic treatment or interventions were caused by insured events.
 10. There shall also be no insurance protection for injuries or the consequences of injuries sustained by the insured party in the course of a physical altercation with one or more persons if the insured party participated actively in this altercation or exposed himself - even if only by negligence - to the risk of such injury by active action (e.g. through physical or verbal provocation, an attempt to settle a dispute in the course of a physical altercation between third parties or similar).
- In any case, the insurer shall not be liable if the insured party has been convicted under criminal law or the criminal proceedings have been terminated by diversion as a result of his/her act(s) in the course of a physical altercation in which he/she was injured and is seeking insurance protection for this injury or the consequences of this injury.
11. which the insured party suffers during work-related or other professional activities for rescue organisations during organized rescue operations or other activities on behalf of the rescue organization. However, paid activities of members of the South Tyrolean Mountain Guides Association (Südtiroler Bergführerverband) in their role as qualified mountain and ski guides and as officially approved and qualified hiking/mountain biking guides are also covered by the insurance. Other activities on behalf of the rescue organisation are also covered by the insurance.
 12. as a result of a paid sporting activity and the training for it.
Paid activity is deemed to take place if the insured party receives more than mere reimbursement of expenses from practising the sport.

13. resulting from the use of motor vehicles: However, exceptions to this are insured events resulting from the use of motor vehicles and the use of cable cars and lifts on the way between the insured party's place of residence and places where the statutory purpose of the association is pursued and/or where mountain sports activities serving the statutory purpose of the association, e.g. hiking and mountain tours, climbing, skiing, ski touring, snowboarding, white water paddling, canyoning take place and/or sports bikes, mountain biking and trekking bikes are used as a hobby. These locations may be reached directly or indirectly from and to the insured party's place of residence, even if there are interruptions.

Furthermore, there shall be no insurance protection for:

14. Therapeutic treatments which have already started before starting the journey.
15. Therapeutic treatments of chronic illnesses, except as a consequence of acute attacks or flare-ups.
16. Therapeutic treatments that are the purpose of the stay abroad.
17. Dental treatments that do not serve as initial care for immediate pain relief.
18. Therapeutic treatment, repatriation and transport in the case of abortions, pregnancy examinations and births, except if premature when they happen at least two months before the natural due date.
19. Cosmetic treatments, spa treatments and rehabilitation measures.
20. The insurance shall not cover pathological disorders resulting from psychological reactions (e.g. psychoses, neuroses), even if these were caused by an insured event.
21. Tests for detection of viral infections (e.g. molecular biological tests, antigen tests and antigen self-tests)
22. Vaccinations
23. Events that occur above an altitude of 6,000 meters or north of the Arctic Circle (with the exception of the territories of Norway, Sweden and Finland) or south of the Antarctic Circle.
24. For students, pupils and children, the insurance cover applies exclusively outside universities, schools of all kinds or kindergartens and day care centres and outside the events, teaching programmes, excursions and childcare activities organised and carried out by these institutions. Events that occur on the way to and from the aforementioned institutions are also excluded.

Duration of insurance

The insurance protection is guaranteed provided that the membership fee is paid prior to the event resulting in a claim. Insurance protection shall commence one day after payment of the membership fee and shall end on January 31 of the following year, provided that payment has been made by that time for the new membership year. Otherwise, insurance protection shall be valid only until December 31.

Should the event of an injury be sustained between January 1st and January 31st and the membership fee for the current year has not yet been paid, then a benefit shall be rendered only if the membership fee for the current year is paid and the membership fee for the year prior had been paid.

Who is insured?

Every member of the AVS who has paid their membership fee for the current year and is resident in Europe in the geographical sense or in a country bordering the Mediterranean shall be insured. Non-fee-paying members are also insured, provided they are registered with AVS and in possession of a valid membership card.

What to do if something happens?

You must contact the 24-hour emergency service of Tyrol Air Ambulance before repatriation, transfer and relocation, otherwise a maximum charge of € 750 will be applied.

Please contact the national AVS headquarters if you wish to register a claim for rescue, outpatient therapeutic treatment or concerning matters relating to third party liability and legal protection. The claim report form can be obtained from www.alpenverein.it in the downloads section. The accident notification must be in writing and must include all relevant information, enclosing all relevant documentation.

Global rescue service



Emergency services of the Tyrol Air Ambulance (TAA)
T +43 (0)512 / 22422
taa@taa.at – www.taa.at

The contact details are printed on the membership card!

- 24h emergency service
- worldwide medical diagnosis by a specialized team of doctors
- medical and emergency psychological support
- advance payment for in-patient treatments abroad
- specialized emergency jets

ONLY FOR ASSOCIATION'S ACTIVITIES

Third-party liability insurance

AVS members are insured worldwide against liability for damages to persons and objects for a total amount of up to €15,000,000, when the claim is caused by any of the association's activities.

Legal protection

AVS members in Europe are entitled to legal and extra judicial assistance for a total amount of up to € 30,000 per person and loss in the case of an accusation of a breach of the penal provisions due to negligence, if the accusation arises from the association's activities.

By association's activities we mean:

Participation in any events or activities advertised by the individual sections or the whole AVS association.

Contractual basis

The contractual basis consists of the framework contracts agreed between AVS and the insurers, as well as the general conditions to which the respective contract is subject.

Insurance coverage is secondary. Accordingly, services are only provided if and to the extent that no other insurance policy (social insurance, private insurance) is obligated to make payments or actually makes payments. A claim cannot be made if a service has been or were to be provided to the insured person free of charge.

Contact

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