



Please call the 24-hour telephone number

+27 11 991 8610 immediately:

- Before you are admitted as an inpatient
- Outpatient when treatment is more than R10,000
- Specialist tests, for example: CT scan
- As soon as you have been stabilised in the ER

## **Submit your claims online:**



- 1. Medical Claims UNDER R10,000
  - a. Pay the bill with your credit card
  - b. Ask for a detailed invoice, receipt, and report



Online URL to submit your claim: www.hollardtravel.com



## 3. Baggage claims:

- a. Check for damage or loss before you leave the baggage area
- b. Get a letter from the airline to confirm damage or

- loss before you leave the baggage area
- c. Ask the airline to confirm in a letter whether they paid for any of the damage or loss



## 4. Delay and/or Missed Connection claims

- a. Immediately ask for a letter from the airline to confirm the reason for the delay and whether they paid any amounts to you as compensation
- b. Keep all receipts and pay for any expenses with vour credit card

## **Important Information:**



You must read the policy wording. If you have any questions about the cover, please email us: travelinsurance@hollard.co.za



The intention of our cover is to stabilise and repatriate you. This policy does not provide cover for treatment in your home country after repatriation. For example, if you fall and break your leg while skiing in the USA and it needs further operations and physiotherapy you must return to your home country immediately for further treatment. This policy does not cover any of the costs incurred after you return to your home country.



United States of America: Urgent care centres are different from emergency rooms. You **MUST visit an URGENT CARE CENTRE** before you go to the

emergency room, unless you are unconscious, or it is a life-threatening medical condition that requires inpatient treatment.



We do **NOT** cover specialist tests if not authorised by us.



We do **NOT** cover follow-up treatment, or chronic medication.



Health: Your policy contains restrictions regarding Pre-existing medical conditions.



Policy Excess: Claims are subject to an excess. This means that you **MUST** pay the excess amount to the hospital or doctor **BEFORE** you receive treatment.

