



UDENRIGSMINISTERIET
MINISTRY OF FOREIGN AFFAIRS OF DENMARK

Terms and Conditions of Coverage

Staff posted with a posting allowance and Seconded National Experts (SNEs) as well accompanying family members and mission-employed staff:

Terms and conditions of coverage regarding the administration scheme pertaining to illness and repatriation and the full-time collective accident coverage.

Terms and conditions regarding the administration scheme pertaining to damages occurring during transport of household goods.



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1 INTRODUCTION

This document constitutes the administrative foundation/the internal terms and conditions that all inquiries coming from the covered group of people, regarding illness and damages as well as the reimbursement of expenses must be processed in accordance with.

The administration scheme covers:

- Illness and repatriation
- Full-time collective accident coverage
- Damages involving the transport of household goods

The administration scheme applies to staff posted by the Ministry of Foreign Affairs and their accompanying family members and Seconded National Experts (hereinafter referred to as SNEs) and their accompanying family members.

Mission-employed staff (locally employed staff) are covered by the full-time collective accident coverage.

Other terms and conditions apply for posted Danida advisers and individuals posted via the Deployment Facility for Peace and Democracy (DFPD).

These terms and conditions are available in Danish and English. In cases of doubt, the Danish version takes precedence. The same applies with regard to any local translations of the terms and conditions.

2 THE COVERED GROUP OF PEOPLE

Cf. point 5.1.1 for Illness and repatriation; point 5.2.1 for full-time collective accident coverage; and point 6.1 for coverage regarding Damage during transport.

3 SCOPE OF COVERAGE

The entire world, though with restrictions that may affect specific groups of people. If there is existing coverage via other schemes e.g., the Danish healthcare system or another healthcare system in Europe (EEA), the specific health care scheme in question must be made use of prior to using the Ministry of Foreign Affairs'.

4 PERIOD OF COVERAGE

Cf. point 5.1.2 for Illness and repatriation; point 5.2.2 for full-time collective accident coverage; and point 6.3 for Damage during the transport of household goods.



5. ILLNESS AND REPATRIATION AND FULL-TIME COLLECTIVE ACCIDENT COVERAGE

5.1 ILLNESS AND REPATRIATION

5.1.1 The covered group of people

5.1.1.1 MFA staff

All MFA staff posted with a posting allowance. Accompanying spouses/partners or equivalent cohabitants eligible for the posting allowance. Accompanying children under the age of 21 eligible for the posting allowance.

During private stays in third countries, posted staff members and their accompanying spouses/partners or equivalent cohabitants and children under the age of 21 are similarly covered under the scheme.

The insured person's coverage ceases if the person is absent from the post for more than 90 days within a 12-month period counting from the date of posting (cf. definition in the HR instruction), also if the absence relates to illness or for the treatment of illness.

Spouses/partners or equivalent cohabitants who do not reside permanently at the place of posting are covered by the scheme during temporary stays at the staff member's place of posting, but this does not apply in third countries. The same applies to children under the age of 21 who do not reside permanently at the place of posting.

Temporary staff or others that are posted based on the terms set out regarding business travel (tjenesterejsevilkår) are not covered by this scheme.

The insurance provider¹ is obliged to inform the Ministry of Foreign Affairs regarding any medical evacuations of ambassadors and/or in cases when there is only one staff member from the MFA deployed to a post.

5.1.1.2 SNEs

Seconded national experts (SNEs) employed by the Ministry of Foreign Affairs and their accompanying spouses/partners or equivalent cohabitants and children under 21 years of age.

During private stays in third countries, SNEs and accompanying spouses/partners or equivalent cohabitants and children under 21 years of age are similarly covered by the scheme.

The insured person's coverage ceases if the person is absent from the post for more than 90 days within a 12-month period, counting from the date of posting (cf. definition in the HR instructions), also if the absence is related to illness or medical treatment.

Spouses/partners or equivalent cohabitants who do not reside permanently at the place of posting are covered by the scheme during temporary stays at the staff member's place of posting, but this does not apply in third countries. The same applies to children under the age of 21 who do not reside permanently at the place of posting.

¹ The current provider is Europæiske Rejseforsikring (ERV).



5.1.2 Period of coverage

The scheme is in force 24 hours a day - both during working hours as well as during leisure time. The scheme comes into force 3 days prior to the date that the staff member assumes their duties at the post and 3 days following the date of recall. If an earlier arrival at the post is required due to children attending school (from 1st grade), coverage can begin three days prior to the start of school, provided that the Ministry of Foreign Affairs' HR has approved this in advance.

The scheme does not cover leave without pay, either in or outside of the country of posting.

5.1.3 Refunds

100% of all expenses covered within the scope of health insurance and for repatriation in connection with illness are reimbursed.

Staff and their accompanying families posted to EEA countries are covered by the EEA scheme. According to article (13(2)(c), in the Council's regulation (ECC) nr. 1408/71 of 14 June 1971 regarding the use of social health insurance schemes for employees, self-employed persons and their family members who move within the Community are deemed to be civil servants and thus enjoy equal status and are covered by the legislation in the Member State under whose administration they are employed. In this connection, the employee must fill out an S1 form with the home municipality. Employees posted after 1 July 2000 are also, as a general rule, covered by the Danish health insurance scheme and retain their yellow health card.

The Provider must take the above into account when assessing to what extent the treatment of any major/very costly illness can/must be treated in Denmark.

Benefits from public health insurance, including the EEA scheme, must be fully made use of. If the employee has taken out additional private insurance, the total cost can be covered by a maximum of 100%.

Reimbursement for illness can only be paid out in accordance with the rules mentioned below. Payments may only take place upon the presentation of the appropriate documentation in the form of original or scanned invoices and receipts or equivalent forms of documentation, which must be written in one of the main languages and translated into Danish or English.

When it is not clearly stated, the insured persons must themselves include the names of any medicines and drugs, supplemented by information about the nature of the illness that they are being treated for.

In case of expected major medical expenses, the Provider's approval must be obtained. The decision of the Provider can be appealed to the Ministry of Foreign Affairs.

In cases when the insured persons themselves cover expenses that are significantly out of the ordinary e.g., in cases of hospitalisation and long-term treatment, because, for practical reasons, the Provider cannot provide a guarantee or pay a deposit directly to the hospital, doctor, etc., an advance can instead be made paid to the insured person until the settlement of the expenses has taken place.

Any extraordinarily high costs associated with international transfers in connection with forwarding an advance from the Provider may be included in the total settlement.



The insured person can only present a reimbursement request when the total expenses exceed DKK 2,500. However, a refund can always be requested at the end of a quarter. As far as possible, the insured persons must present their reimbursement requests for a given year to the Provider prior to the end of the relevant calendar year.

All expenses must be submitted no later than one year following the end of the posting.

5.1.4 Scope of coverage

Reasonable and necessary expenses are covered anywhere in the world in accordance with the below-mentioned overview under point 5.1.5.

To a large extent, the terms and conditions are closely aligned with the treatment that could be provided by the Danish health insurance scheme. This means that if treatment is offered locally that is significantly better and more expensive with regard to what is offered by the Danish health insurance scheme, it will not necessarily be covered. In such cases – and in the case of major treatments or with regard to major or more expensive courses of illness – it is the Provider that assesses whether treatment should take place at the place of posting, in a third country, or in Denmark.

Similarly, treatment offered locally will not always correspond to Danish standards.

The insured staff member and their family members do not have to provide individual health information.

If the insured person has an expectation of a need for medical treatment, it is recommended that the insured person contacts the Provider prior to departure in order to plan a course of treatment.

5.1.5 Illness and repatriation

The aim of the scheme is to ensure that the group of people mentioned in 5.1.1.1 and 5.1.1.2 receive the best and quickest possible treatment in the event of illness abroad. The scheme includes medical treatment, hospital stays, and other medically prescribed treatments in accordance with the overview below.

Scope of coverage	DKK / Coverage
Illness, repatriation etc.	
Illnesses /repatriation	<p>General consultations and treatment by a general practitioner must normally take place locally and does not require prior contact with the Provider.</p> <p>In case of illnesses that require treatment and expenses beyond the routine, the insured person must agree with the Provider as to where and how the treatment should take place. If the Provider assesses</p>



Scope of coverage	DKK / Coverage
	<p>that the treatment should be carried out in Denmark or elsewhere, either for health and/or financial reasons, the recommendation must be followed, otherwise the coverage will lapse.</p> <p>If the Provider considers a given treatment in a given country to be medically sound, conditions such as limited or no language knowledge will not give cause to change the country of treatment.</p> <p>If additional information is needed in order to be able to assess the case, the Provider will obtain the necessary information from the injured party, relevant practitioners, or the MFA.</p> <p>Advice from the medical personnel associated with the Provider may, in certain cases, be provided without any possible costs for treatment being covered.</p>
<p>Treatment costs (medical treatment and medically prescribed treatment)</p>	<p>In countries with a very limited number of acceptable health care providers, where the only option for proper medical treatment is often foreign clinics that have been established in the country of residence, it is possible to seek to have the cost of signing up for compulsory memberships at such clinics for the purpose of medical treatment reimbursed.</p> <p>Expenses for periods of convalescence are not included. However, if it clearly concerns a medically indicated term of convalescence that exceeds the insured's financial capacity, the MFA can, however, be requested to consider to provide a subsidy (hrudeteam@um.dk).</p> <p>Costs for experimental treatments are not included.</p>
<p>Hospitalisation</p>	<p>Hospitalisation, the choice of where to be treated, and any travels must be arranged and approved by the Provider.</p> <p>Coverage also includes travel for medical treatment if the costs for being treated locally exceed the overall costs for the journey and treatment in Denmark or another place where proper treatment can be obtained.</p> <p>In addition, after approval by the Provider, travel expenses will be refunded if the journey is necessary due to the fact that Provider does not deem that proper treatment can be obtained at the location.</p> <p>In case of illnesses that require treatment and expenses beyond the routine, the insured person must agree with the Provider as to where and how the treatment should take place. If the Provider assesses</p>



Scope of coverage	DKK / Coverage
	<p>that the treatment should be carried out in Denmark or elsewhere, either for health and/or financial reasons, the recommendation must be followed, otherwise the coverage will lapse.</p> <p>Reimbursement for travel for medical treatment includes reasonable and necessary additional expenses upon providing documentation i.e., plane tickets, accommodation, meal allowances, and necessary local transport.</p> <p>The choice of the location for treatment is based on an overall medical and financial assessment as to where the necessary and proper treatment can best be obtained.</p> <p>In the case of treatment in Denmark, insured persons will be referred for examination and treatment in hospital as follows:</p> <ul style="list-style-type: none"> • Insured persons <i>with</i> a Danish health card can choose a public hospital under the Danish public health insurance scheme in accordance with the free choice of hospitals. • For insured persons <i>without</i> a Danish health card, the Provider furnishes the necessary payment guarantee. Payment is then made in accordance with a tariff catalogue, which is updated once a year in January. Invoices are sent to the Provider.
<p>Pregnancy, birth, and prenatal care</p>	<p>Check-ups and examinations, including scans for pregnant women in accordance with the Danish programme.</p> <p>For example, expenses for consultations with a doctor and midwife in connection with pregnancy, including consultations with a general practitioner, a gynaecologist, consultations with a midwife as well as a midwife for home births, Nuchal Translucency scan, scan for malformation, placenta biopsies (for mothers over 35) and amniocentesis testing.</p> <p>Expenses for prenatal care and breastfeeding courses, to the extent that it is offered in Denmark under the public Danish health insurance scheme.</p> <p>Expenses for fertility treatments and diagnosing infertility are not covered.</p> <p>Reasonable and necessary travel expenses (incl. accommodation) relating to check-ups, examinations,</p>



Scope of coverage	DKK / Coverage
	<p>and birth are covered for the pregnant woman if treatment in Denmark or a third country is medically indicated by the Provider.</p> <p>If the Provider deems that a given course of treatment in a particular country is medically sound, circumstances such as limited or no language knowledge will not give cause for the country of birth to be changed.</p>
General health check-ups	<p>Upon being posted to and when returning from a posting in a country outside of Europe and North America, expenses for a general health examination by a general practitioner in Denmark are covered <u>prior to</u> posting and within the first month following the return from the post. Expenses are reimbursed to the extent that they are not covered by the public Danish health insurance scheme.</p> <p>Prior to posting, during a stay, or in immediate connection with returning to Denmark, examinations that are prescribed in the existing Policy regarding security and/or health-related hardship posts should, in general, be covered by the Danish public health insurance scheme, or alternatively by the Provider. Expenses for such examinations for accompanying children are only covered in cases when medical reasons dictate it.</p> <p>Health examinations for children who are sent to posts where such examinations are mandatory prior to, for example, starting school, are covered.</p>
Preventive health check-ups	<p>In accordance with the general practice in Denmark, including:</p> <p>Annual blood pressure check-ups for persons over 40 - and younger if there is a family predisposition.</p> <p>Annual checks of fats (cholesterol) in the blood if there is a family predisposition.</p> <p>Screening for bowel cancer by examination for blood in the stool every 2 years for people aged 50-74.</p> <p>Screening for breast cancer with mammography every 2 years for women aged 50-69.</p> <p>Screening for cervical cancer (smear-cell test) every 3 years for women aged 23-49 and every 5 years for women aged 50-65.</p>



Scope of coverage	DKK / Coverage
	<p>Gynaecological examinations and smear checks following a cone biopsy.</p> <p>Routine check-ups as a follow-up to cancer when the patient has been declared healthy e.g., mammography up to once a year for breast cancer patients, endoscopic examinations for bowel cancer, and blood tests for leukaemia patients.</p> <p>Endoscopic examinations to check for polyps in the urinary bladder.</p> <p>Annual ophthalmologist check-ups including measuring pressure in cases of a familial predisposition for glaucoma.</p> <p>Annual prevention consultations regarding lifestyle factors - this does not include routine examinations other than height and weight.</p> <p>The above examinations must normally be carried out on the basis of a referral from a general practitioner and must take place during a stay in Denmark. In countries where medical referrals are not used, a specialist can be contacted directly.</p> <p>Expenses for other health examinations and common preventive examinations that are not part of the current practice generally in Denmark are not covered.</p>
<p>Childhood check-ups and vaccinations for children and adults</p>	<p>Childhood check-ups and vaccinations according to the Danish programme, although adjusted for local conditions e.g., other types of vaccinations. As far as possible, these vaccinations must be carried out in connection with a stay in Denmark.</p> <p>The vaccinations that are relevant <i>prior</i> to being posted from Denmark must, as far as possible, be carried out by Provider in the field of vaccinations chosen by the Ministry of Foreign Affairs, currently, Rigshospitalet. Booster shots at the place of posting following posting from Denmark are covered via the existing scheme. This also applies with regard to malaria pills/prophylaxis, which are comparable with vaccinations.</p> <p>Vaccinations necessary for business trips for posted staff members and SNEs are covered.</p>



Scope of coverage	DKK / Coverage
<p>Doctor-prescribed special medicines and medical aids</p>	<p>The scheme covers special medicines prescribed by a doctor, including allergy medicines, prescribed by a doctor.</p> <p>The scheme does not cover the costs of common over the counter drugs that are available without a prescription such as headache tablets, sleeping pills, vitamins, various types of herbal medicines, cough syrups, iodine and other wound disinfectants, and contraceptives.</p> <p>Similarly, the scheme does not cover the costs of common technical aids such as thermometers, hearing aids, bandages, electric medical appliances, canes, support socks, orthotic insoles, the rent/purchase of crutches, glasses, and lenses as well as nursing articles made of glass, rubber, and Bakelite etc., even if there is a doctor's prescription,</p> <p>However, support socks, orthotic insoles and the rent/purchase of crutches may be necessary aids in certain situations e.g., with regard to complicated disorders, various types of fractures, and with regard to certain operations. In such cases, reimbursement can be sought following a concrete assessment by the Provider's medical team.</p> <p>Expenditures in connection with the provisions of the Danish Social Service Law, including those involving medical aids, are not covered.</p>
<p>Dental treatment, braces (children) and jaw surgery</p>	<p>Costs for dental treatment such as dental cleaning, caries treatment/tooth fillings, tooth extractions, root canals, pivot crowns, implants, crowns, and bridges for posted staff and accompanying family are not covered, with the exceptions defined below:</p> <p><i>Jaw surgery:</i> This refers to surgery of the jaw performed by a specialist jaw surgeon within a jaw surgery department. The surgical removal of teeth, wisdom teeth, inflamed root tips, and surgical periodontal treatment is not covered.</p> <p><i>Treatment of periodontitis:</i> For posted adults with gum inflammation and/or periodontitis, a maximum of 3 times a year you can be granted DKK 1,000 in subsidies for preventive treatment (expenses for cleansing the gum pockets as well as tooth cleaning). Refund requests must be accompanied by x-rays or a note from a dentist outlining what treatment has been carried out.</p>



Scope of coverage	DKK / Coverage
	<p><i>Orthodontic treatment /tooth braces:</i> For accompanying children under 21 years of age, expenses for orthodontic treatment/tooth braces are covered in cases of improper tooth placement. Cosmetic treatment costs are not covered. Expenses for continued treatment regarding tooth placement/tooth braces following the return to Denmark are borne by the municipality's child and youth care scheme or at their own expense. Dialogue with the Provider is recommended prior to initiating any treatment.</p> <p>For accompanying children under the age of 21 who are unable to visit the municipal child and youth dental care during holiday stays in Denmark, the expenses for one annual dental examination and any caries treatment will be covered with a maximum of DKK 3,500.</p>
Treatment by physiotherapist, chiropractor, and authorised acupuncturist	10 treatments of max. 1 hour in duration within 12 consecutive months on the basis of a doctor's prescription. In extremely special situations, additional treatment beyond the 10 visits may be allowed following prior agreement with the Provider.
Psychologist	<p>10 treatments of max. 1 hour in duration within 12 consecutive months on the basis of a doctor's prescription. In extremely special situations, additional treatment beyond the 10 visits can be allowed following prior agreement with the Provider.</p> <p>Expenses for visits to a psychologist with regard to couples therapy are not covered.</p>
Speech therapist for children	Expenses for an evaluation by a speech therapist are covered.
Sport injuries	Injuries incurred during dangerous sports activities (cf. below under full-time collective accident coverage) or during professional/elite sports are not covered.
Accompaniment regarding illness	In the case of an evacuation or repatriation following a serious injury or life-threatening illness where a medical assessment calls for someone to accompany the injured person, travel expenses (airline ticket) are covered.
Funeral assistance	Is granted in accordance with the Danish public health insurance subsidy scheme.
Transport home of casket or urn	Includes expenses related to repatriation of a casket or urn when someone an insured person dies during a posting.



Scope of coverage	DKK / Coverage
<p>Journeys home in connection with serious illness, terminal illness, and a death in the immediate family</p>	<p>Covers the return journey to Denmark (or equivalent expenses) in the event of:</p> <ul style="list-style-type: none"> • Serious illness of the insured person’s parent, spouse/partner, or children. In cases of serious illness, the return journey for the posted person or their spouse/partner is covered. There is coverage for two journeys home during a serious illness. • Terminal illness of the insured person’s parent, spouse/partner, or children. In the event of a documented terminal illness, the return journey for the entire family is covered. There is coverage for two journeys home during a terminal illness. • Death of the insured person’s parent, spouse/partner, or children. In the event of death, the return journey for the entire family is covered in connection with the funeral. <p>A maximum of 3 return journeys per insured person in connection with a serious, terminal illness, and the death of a parent, spouse/partner or child.</p> <p>Reimbursement is only provided for the cost of the flight, corresponding to economy class. Expenses for local transport in Denmark and accommodation expenses are not covered.</p>



5.2 FULL-TIME COLLECTIVE ACCIDENT COVERAGE

5.2.1 The covered group of people

5.2.1.1 MFA staff

All MFA staff posted with a posting allowance. Accompanying spouses/partners or equivalent cohabitees eligible for the posting allowance. Accompanying children under the age of 21 eligible for the posting allowance.

During private stays in third countries, posted staff members and accompanying spouses/partners or equivalent cohabitees and children under 21 are similarly covered by the scheme.

The insured person's coverage lapses if the person is absent from the post for more than 90 days within a 12-month period from the date of posting (cf. the definitions in the HR instructions).

Spouses/partners or equivalent partners who do not reside permanently at the place of posting are covered by the scheme during temporary stays at the posted staff member's place of posting, but not in third countries. The same applies to children under the age of 21.

Temporary workers or others posted on the terms covering business travel are not covered by this scheme.

5.2.1.2 SNEs

Seconded national experts (SNEs) employed by the Ministry of Foreign Affairs and their accompanying spouses/partners or equivalent cohabitees and children under 21 years of age.

During private stays in third countries, SNEs and the accompanying spouses/partners or equivalent cohabitees and children under the age of 21 are also covered by the scheme.

The insured person's coverage lapses if the person is absent from the post for more than 90 days within a 12-month period from the date of posting (cf. the definitions in the HR instruction).

Spouses/partners or equivalent cohabitees who do not reside permanently at the place of posting are covered by the scheme during temporary stays at the posted staff's place of posting, but not in third countries. The same applies to children under 21 years old.

5.2.1.3 Mission-employed staff

Mission-employed staff, including temps and other temporary employees are covered during the period of their employment, but not *their* families. This also applies to mission-employed staff members on paid leave. Mission-employed staff on leave without pay are not covered.

5.2.2 Period of coverage

The scheme covers 24 hours a day - both during working hours and during leisure time and coverage begins 3 days prior to the date of departure and continues for 3 days following the date of recall. If an earlier arrival at the post is required due to children attending school (from



1st grade), coverage can begin three days prior to the start of school, provided that the Ministry of Foreign Affairs' HR has approved this in advance.

Mission-employed staff are covered 24 hours a day, but only during their period of employment.

The scheme does not cover leave without pay, either in or outside of the posting country.

In the event of accidents/injuries, insured persons are covered by the scheme regardless of when the report reaches the Provider, although there is a requirement to report within three years from the time of the incident.

5.2.3 Scope of coverage and amount limits

Collective accident coverage (full-time)	
MFA's posted staff and SNEs, their accompanying family members, and mission-employed (but not their families)	
Death - provider (staff member)	DKK 685,153 However, a maximum of 2 x the annual salary
Death – non-provider (spouse/partner)	DKK 34,257
Death (children under the age of 21)	DKK 34,257
Disability - provider (staff member)	DKK 1,370,312 However, a maximum of 2 x the annual salary
Disability – non-provider (spouse/partner)	DKK 1,370,312 However, a maximum of 2 x the annual salary
Disability (children under the age of 21)	DKK 1,370,312
War and high-risk areas based on the war and risk list	
Posted staff, SNEs, and - where permitted - accompanying spouses/partners or equivalent cohabitees and accompanying children under the age of 21 who are sent to war and high-risk areas accordance with to the list of countries that are defined as war zones by the provider to the Government's Official Service Travel Insurance are covered by corresponding insurance sums that apply to the special accident insurance under the Government's business travel insurance. The insurance sums appear in text annotation no. 100 under § 12 of the annual finance law.	Doubled insurance sum; however, a maximum of 4 x the annual salary



For mission-employed staff, cf. the definition above, but, however, not their families.	Doubled insurance sum however, a maximum of 4 x the annual salary
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In general	
Disability coverage and coverage in case of death	Cf. the above amounts
Tooth damage excl. chewing injuries	<p>Reasonable and necessary expenses as a result of an accident covered by the scheme, paid as account rendered.</p> <p>The scheme does not cover chewing damage (regardless of the cause) or the cost of repair or general maintenance of teeth that have already been replaced by the scheme.</p> <p>Furthermore, the scheme does not cover expenses following an injury, such as expenses for medicine, dressings, bandages, night guards, braces, aids and the like.</p>
War and war-like conditions	<p>Expanded to cover accidents caused by acts of terrorism, nuclear fallout, war or war-like conditions, riots, civil disturbances, hostage-taking, kidnapping, and hijacking.</p> <p>The scheme does not cover accidents caused by the participation in war or war-like conditions, rebellions and civil unrest.</p>
Expanded – permanent disability	<p>Extended to cover permanent disability as a result of:</p> <ul style="list-style-type: none"> • Polio (Poliomyelitis anterior acute) • Infectious encephalitis (acute encephalopathy). • Inflammation of the meninges (meningitis). • Multiple sclerosis – one-off payment of DKK 200,000 upon diagnosis, cf. below. • Blindness or reduced visual acuity as a result of eye diseases. <p>A condition for coverage for multiple sclerosis is that the disease can be diagnosed during the period of coverage, though at the earliest following the end of a 12-months waiting period. It is also a condition for coverage that the insured is alive at the time of notification and that notification is made to the company within 6 months of the expiration of the scheme.</p>
Driver of motorcycle/scooter/45 km moped	Driver of a motorcycle, scooter or 45 km moped is covered.



The scheme covers the entire world.

An accident is defined as a sudden event that causes personal injury.

Accidents must be reported in writing to the Provider as soon as possible. This applies even if the damage appears, immediately after the accident, to be of a modest extent. A report that is submitted later than 3 years following the time of the accident will not be covered.

However, if an accident has resulted in death, the Provider must be notified of this within 48 hours of the death. In the event of death, the Provider has the right to demand an autopsy.

Accidents at work must be reported both to the Worker's Compensation Act (AES) via OKO/MFA and to the full-time collective accident coverage Provider.

Disability coverage:

In cases involving disability coverage, the Provider determines the degree of disability using the Worker's Compensation Act's degree of disability degree table and on the basis of the medical information regarding the medical extent of the damage, but without considering the insured's occupation or social situation. The degree of disability and the size of the sum insured determine the compensation.

Compensation is made up of a percentage of the insurance sum corresponding to the determined degree of loss. The payment consists of a lump sum.

The scheme covers degrees of disability from 5% up to 100% as a result of the same accident. The degree of disability can be a maximum of 100% per accident.

Death coverage:

The scheme covers death as a direct result of an accident when the death occurs within 1 year of the accident.

The insurance sum is paid to the insured's next of kin in accordance with the Insurance Contracts Act unless the Provider has been notified otherwise.

An accident does not provide the right to compensation for both disability and death. Therefore, the amount that may have been paid in compensation for disability is deducted from the death benefit.

If the MFA is aware that so many insured persons are to be transported on the same aircraft such that the total sum insured exceeds DKK 40 million in the event of death and/or disability, the MFA must notify the Provider of this fact.

The scheme does NOT cover

Accidents that are covered by the Danish government's insurance scheme for official travel abroad.

Illnesses and overwork etc., including damage to the body caused by overwork or excess strain that is not of a sudden nature.

Consequences of accidents, the main cause of which are existing illnesses or disease predispositions (except from bouts of illness or fainting).

A worsening of the consequences of an accident caused by an existing or accidentally adjacent illness.



Consequences of blood clots, brain haemorrhages and the like.

Damage caused by being infected with illnesses, viruses, bacteria, other microorganisms, or the like.

Poisoning from food, drink, recreational drugs, or medicines.

Disability as a result of psychological incidence where the insured person has not themselves been exposed to the risk of personal injury.

Consequences of dental and medical treatment and other treatments that are not necessary in connection with an accident that is covered by the scheme.

Damages caused by intentional or gross negligence on the part of the insured themselves.

Consequences of accidents resulting from the participation in fights, the insured's criminal acts, self-inflicted intoxication, self-inflicted exposure to drugs, self-inflicted exposure to other poisons, and attempted suicide or the like.

Consequences of accidents that occurred during training or in the participation in dangerous sports:

- Motor racing, moped racing or boat racing of any kind.
- Boxing.
- Other self-defence and martial arts.
- Mountain climbing and rappelling on mountain walls.
- Skydiving.
- Kite flying.
- Aerobatics.
- Paragliding.
- Ultralight flight.
- Rafting.
- Practicing professional/elite sports.

Consequences of accidents that have occurred during the practice of sports that can be equated with those mentioned above.



6 DAMAGE OCCURRING DURING TRANSPORTATION OF HOUSEHOLD GOODS

6.1 Insured group of people

All MFA staff posted with a posting allowance. Accompanying spouses/partners or equivalent cohabitants eligible for posting allowances. Accompanying children under the age of 21² eligible for posting allowances.

Temporary workers or other staff on official travel terms as well as Seconded National Experts (SNEs) and mission-employed staff are not covered by this scheme.

6.2 Notification deadline

Damages must be reported immediately and no later than within 7 days following the delivery of the household goods at the address. Unpacking the delivered moving articles should therefore be carried out as soon as the moving goods have been delivered. Any damaged articles must not be disposed of before this has been agreed with the Provider.³

6.3 Transport of moving goods

This scheme covers damage to movable goods where the Ministry of Foreign Affairs pays the freight costs for the posting, recall, or transfer of posted staff throughout the world in accordance with the following:

Moving prior to the place/post is covered if the Ministry of Foreign Affairs or the mission pays for or has initiated the move. If the move is private and not paid for by the Ministry of Foreign Affairs or the mission, the scheme does not cover.

The scheme comes into effect when the insured's items are handed over to the moving company to begin transport and continues during the normal course of the move until the moving company has made delivery at the agreed destination. The scheme also covers cases when the moving company carries out the packing and unpacking in connection with the move as well as during transit storage.

Damage to household goods that have been stored, and where it can be proven that the damage has occurred in connection with or during the move, are also covered.

Damages must be reported immediately, and no later than 7 days after the delivery of the household goods at the address.

Damage to objects brought for other households is not covered by this arrangement, as objects from other households may not be included in the move.

Damage to government furniture is not covered by this scheme.

² Though also covered following the child's 21 birthday as long as the MFA has accepted covering the costs for moving.

³ The current provider is TRYG A/S.



6.4 Scope of coverage and amount limits

Transport of household goods	
MFA staff posted with a posting allowance. Accompanying spouses/partners or equivalent cohabitants eligible for posting allowances. Accompanying children under the age of 21 eligible for posting allowance are included.	
Amount of coverage DKK 1,500,000	
The transport of movable goods (ships, ferries, cars, rail, mail, and aircraft) as well as during temporary storage and transit stays with regard to transport	Damage to movable goods where the Ministry of Foreign Affairs pays for the shipping costs in connection with posting, repatriation, or relocating posted staff throughout the world as well as the additional covered group of persons in accordance with the terms of the contract, cf. below.
Insured items	<p>Everything that is part of the covered person's movable property, including cars⁴, motorcycles, household goods, and personal effects, during transport from one duty station to another, unless otherwise stated below.</p> <p>Also covers cars⁵, however there is no coverage if the car is driven.</p> <p>Jewellery, medals, and other valuables made of precious metals are not covered.</p> <p>Silver cutlery and other silverware (excl. jewellery) may be covered provided:</p> <ul style="list-style-type: none"> • A specification including the value of the individual items is sent to the Provider <i>prior to</i> the start of the risk. • The silverware is delivered to the moving company separately for packing. • Upon receipt at the destination, in the event of a complaint, a notification must be included on the consignment note and the damage must be reported immediately to both the Provider and the moving company.
Scope of coverage	The scheme covers removal goods against total loss, including moisture damage, fire, theft, and damage resulting from unfortunate incidents from 'door to door.' "Unfortunate incident" is defined as any extraordinary event (occurring during transport) which could not be foreseen when the scheme came into force. This includes during short stays and temporary storage in connection with transport. However, for this

⁴ Only if the Ministry of Foreign Affairs has approved the partial payment of the transport costs.

⁵ Ibid.



	<p>to apply, the coverage is subsidiary to any private insurance policy taken out by the staff member (household insurance or family insurance).</p> <p>In addition, the following are covered:</p> <ul style="list-style-type: none"> • involvement in major accidents (common casualty) as well as salvage wages calculated in accordance with applicable law and practice • physical damage to or loss of the secured objects caused by persons participating in strikes, lockouts, other disturbances, riots, and/or by terrorists or persons acting from political motives • damage or loss of the insured's items as a result of: <ul style="list-style-type: none"> ○ war or war-like events as well as mines, torpedoes and the like, including in peacetime ○ rebellions or civil disturbances during which weapons of war are used ○ arrest, seizure, or similar measures taken by governments or authorities as a result of events covered under the above. <p>The scheme does not cover the time during storage, i.e., the scheme ends as soon as the items enter a warehouse for storage.</p>
<p>Moisture damage not resulting from unfortunate incidents</p>	<p>Moisture damage to removal goods not resulting from unfortunate incidents are covered with up to DKK 100,000 per move provided that the:</p> <ul style="list-style-type: none"> • damage occurs during the transport • insured party has attempted to fulfil their obligation to limit the loss. • the damage is not self-inflicted. <p>Moisture damage occurring during storage is not covered, as the MFA's coverage liability ends as soon as the items enter a warehouse for storage.</p>
<p>Risk of war</p>	<p>Covered cf. Danish War Conditions, cf. below</p>
<p>Deductible with regard to cars⁶ / motorcycles</p>	<p style="text-align: right;">DKK 5.000</p>
<p>Terms and conditions of insurance</p>	<p>The current version of:</p> <ul style="list-style-type: none"> • Extended Danish Terms and Conditions. • Danish Strike Terms and Conditions • Danish War Terms and Conditions

⁶ Ibid.



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| | <ul style="list-style-type: none">• Institute for Radioactive Contamination, Chemical, Biological, Biochemical, and Electromagnetic Weapons Exclusion Clause |
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If damage or loss of effects occurs in connection with moving, both the Provider and the moving company must be notified of the nature and extent of the damage immediately.

As soon as possible thereafter, all relevant papers and an inventory of the missing and/or damaged effects and their value must be forwarded to the Provider.

In the event of damages/loss, compensation is calculated as the replacement price for equivalent new items with a reasonable deduction for age, use, reduced usability, or other circumstances according to the depreciation rules applicable at all times in the private sector. In addition, reasonable costs for freight are covered in relation to replacing items.

The following are not covered:

The scheme does not cover damage, loss, or costs arising as a result of:

- the insured person causing by act or omission, intentionally, or by gross negligence
- the nature/condition of the insured objects, including that they could not withstand the normal impacts involved during the normal course of the move
- unsuitable or defective packing/unpacking or preparation of the insured items for moving, unless this has been done by the moving company itself or by someone for whom they are responsible
- inappropriate or inadequate stowage in a container or means of transport, unless this is carried out by the moving company itself or by someone for whom they are responsible
- delay, whatever the reason
- that the means of transport, container or similar, was unsuitable for transporting the insured items in a safe manner. This provision only applies when the insured is aware of such unsuitability at the time that the insured items were loaded into the means of transport, container or similar
- release of nuclear fallout, nuclear splitting (fission) or nuclear fusion in connection with nuclear weapons explosions.
- absence, removal, or withholding of labour as a result of strikes, lockouts, or other disturbances or riots
- arrest, seizure, or similar measures carried out by the government or authorities of the insured's home country.

Special exceptions

The scheme does not cover - regardless of other provisions in this set of regulations - damage, loss, costs, or liability that is a direct or indirect consequence of or resulting from:

- ionizing radiation or radioactive contamination caused by nuclear fuel, nuclear reactions or nuclear waste
- radioactive, toxic, explosive, or other polluting properties of nuclear facilities, nuclear reactors, or other nuclear installations and their components
- weapons or other devices in which nuclear energy or nuclear fission and/or fusion or other similar reactions or radioactive forces or substances are used
- radioactive, toxic, explosive, or other contaminating properties of any radioactive substance. This exemption does not include radioactive isotopes other than nuclear fuel when such isotopes are produced, transported, stored, or used commercially in agriculture, medicine, science, or other similar peaceful purposes
- chemical, biological, biochemical, or electromagnetic weapons



Statement of compensation

As far as possible, compensation must put the insured person in the same financial situation as immediately before the damage occurred, as described in more detail below.

The Provider may choose between the following ways to replace the loss:

- Pay what it costs to have the insured item repaired. If the insured item, including especially works of art, do not lose their particular character, the insured person cannot claim for loss of value.
- Obtain or deliver an object which is identical to or similar to the insured object.
- Provide compensation by paying the loss in cash.

Items that were purchased new, are less than 2 years old, and are otherwise undamaged, will be replaced with the price of an equivalent new item.

For items that are more than 2 years old or that were purchased second-hand, the compensation is determined based on the replacement price of an equivalent new item with a reasonable deduction for depreciation due to age, use, reduced usability, or other circumstances.

For electronic devices such as kitchen appliances, radio equipment/TVs, HIFI equipment, home appliances, vacuum cleaners, PCs with accessories, mobile phones and the like, which were otherwise undamaged prior to the incident, they will be replaced according to this table:

Age (year)	% of the new replacement price at the time of damage
0-2	100
2-3	85
3-4	75
4-5	65
5-6	50
6-7	40
7-8	30
8-	20

Underinsurance

If the total value of the insured objects exceeds the cover sum of DKK 1,500,000 million, this refers to underinsurance, whereby there will be a reduction of the liability for compensation in relation to the individual items. If the value of the total moving goods exceeds the coverage sum, you should therefore consider providing additional coverage yourself.

Documentation

In order to receive compensation, you must be able to document or prove that the damaged or lost items were part of the movable property and that the age and values are as stated in the damage report.

Receipts/invoices for the purchase, purchase contracts or adequate descriptions or photos must be enclosed with the claim report.

Miscellaneous

The scheme must not cover for the benefit of the moving company and/or others in whose custody the insured items are or have been left.