

TRAVEL INSURANCE WHEN APPLYING FOR A SCHENGEN VISA

Visa applicants are required to have medical travel insurance. It must cover any costs that may be incurred in connection with emergency medical aid, urgent hospital treatment or transport to the country of origin for medical reasons or in the event of death.

The insurance is to cover costs of at least EUR 30 000 and to be valid in all Schengen countries and throughout the stay.

When applying, applicants must be able to provide proof that they have medical travel insurance. They should also carry their insurance certificate with them during the trip since they may need to show it, e.g. at an entry checkpoint.

Exemptions

Certain occupational groups may be exempt from the insurance requirement due to their already being similarly insured in connection with their work. Others exempted from the medical insurance requirement are those who:

- Possess a diplomatic passport
- Apply for an airport transit visa
- Are relatives of an EU / Swiss citizen, i.e. his/her
 - husband or wife
 - registered partner
 - common law spouse
 - children under 21 years of age
 - older children who are financially dependent on their parents
 - parents who are financially dependent on their children in the Schengen country of destination.

The following insurance companies operating in the West Bank and/or Gaza have so far been approved by Schengen Member States:

- Ahliea Insurance Group – AIG
- Al-Takaful Palestinian Insurance Co.
- Global United Insurance Company
- Trust International Insurance Company – Palestine
- National Insurance Company – NIC
- Al Mashreq Insurance Company
- Palestine Insurance Company - PIC

Any insurance company operating in the West Bank and/or Gaza wishing to be included on the list above should contact the EU Delegation in Jerusalem on the following e-mail:

DELEGATION-WEST-BANK-GAZA-SCHENGEN@eeas.europa.eu and submit the policy of the insurance.

Please be notified that an insurance must comply with the following rules:

- The minimum coverage shall be EUR 30 000,
- The policy must cover repatriation for medical reasons,
- The policy must cover urgent medical attention and/or emergency hospital treatment, during the stay(s) on the territory of the Member States,
- The insurance must be valid throughout the territory of the Member States and cover the entire period of the person's intended stay or transit,
- Claims against the insurance company must be recoverable in a Member State. Particular care should be taken to verify whether a local correspondent is indicated in the policy,
- The insurance must cover on-the-spot assistance (medical expenses and repatriation etc.), which should be distinguished from reimbursement of expenses made only when the applicant has returned.