

MODULO UNICO PRECONTRATTUALE (MUP) PER I PRODOTTI ASSICURATIVI



Il distributore ha l'obbligo di consegnare/trasmettere al contraente il presente documento, **prima della sottoscrizione della prima proposta o del contratto di assicurazione**. Il documento può essere fornito con modalità non cartacea se appropriato rispetto alle modalità di distribuzione del prodotto assicurativo e il contraente lo consente (art. 120-quater del Codice delle Assicurazioni Private).

Sezione I

Informazioni generali sull'intermediario che entra in contatto con il contraente

- a) LEONARDI GIOVANNI
- b) iscritto nella sezione A del RUI al n. A000145282, in data 17/04/2009, in qualità di Socio Amministratore della GARANTIRE ASSIEME SRL iscritta nella sezione A del RUI al n. A000671528, in data 10/12/2020;
- c) GARANTIRE ASSIEME SRL ha sede legale/operativa in ROMA RM, VIALE LIEGI 41,00198;
- d) tel. 0693570400, indirizzo di posta elettronica AGENZIA.ROMAPARIOLILIEGI.IT@GENERALI.COM, indirizzo PEC ROMAPARIOLILIEGI@PEC.AGENZIE.GENERALI.COM;
- e) sito internet www.agenzie.generalitalia.it/romaparioliliegi;
- f) l'autorità competente alla vigilanza sull'attività svolta da LEONARDI GIOVANNI e da GARANTIRE ASSIEME SRL è l'IVASS (Istituto per la Vigilanza sulle Assicurazioni).

Gli estremi identificativi e di iscrizione dell'intermediario possono essere verificati consultando il registro unico degli intermediari (RUI) assicurativi e riassicurativi sul sito internet dell'IVASS (www.ivass.it).

Sezione II

Informazioni sui modelli di distribuzione

La GARANTIRE ASSIEME SRL

- a) agisce in nome e per conto di Generali Italia S.p.A.;
- b) distribuisce il contratto sulla base di un accordo di collaborazione orizzontale con:
D.A.S. DIFESA AUTOMOBILISTICA SINISTRI - S.P.A. DI,
EUROP ASSISTANCE ITALIA S.P.A..

Sezione III

Informazioni relative a situazioni di potenziale conflitto d'interesse

- a) La GARANTIRE ASSIEME SRL non detiene una partecipazione diretta o indiretta pari o superiore al 10% del capitale sociale o dei diritti di voto di Generali Italia S.p.A. o di eventuale altra Compagnia assicurativa per la quale opera;
- b) Generali Italia S.p.A. , Assicurazioni Generali S.p.A. e ogni altra eventuale Compagnia assicurativa per la quale opera, non sono detentrici di una partecipazione diretta o indiretta pari o superiore al 10% del capitale sociale o dei diritti di voto di GARANTIRE ASSIEME SRL.

Sezione IV

Informazioni sull'attività di distribuzione e consulenza

La GARANTIRE ASSIEME SRL

- a) fornisce consulenza ai sensi dell'art. 119-ter comma 3 del Codice delle Assicurazioni Private ossia una raccomandazione personalizzata, contenente i motivi per cui un particolare contratto è ritenuto più indicato a soddisfare le richieste e le esigenze del contraente medesimo;
- b) distribuisce, in esclusiva, i prodotti assicurativi dei rami Vita di Generali Italia S.p.A.;
- c) distribuisce, senza esclusiva, i prodotti assicurativi dei rami Danni di Generali Italia S.p.A.;
- d) fornisce ogni altra informazione utile a garantire il rispetto delle regole di trasparenza previste dall'articolo 119-bis, comma 7, del Codice delle Assicurazioni Private.

SEZIONE V
Informazioni sulle remunerazioni e sugli incentivi

- a) rispetto ai contratti di assicurazione diversi dalla responsabilità civile auto, il compenso per l'attività di distribuzione svolta è rappresentato da una commissione inclusa nel premio distinta per rami. Non è previsto il percepimento di alcun incentivo per la distribuzione di uno specifico prodotto assicurativo. Tale attività concorre al raggiungimento di obiettivi quantitativi definiti per aggregato di prodotti e parametri qualitativi, al raggiungimento dei quali conseguono ulteriori compensi;
- b) rispetto ai contratti di assicurazione della responsabilità civile auto, la misura dei livelli provvigionali riconosciuti dalla compagnia all'intermediario primario (il dettaglio del contenuto di tale informativa è quello indicato nel Regolamento ISVAP n. 23 del 9 maggio 2008 di attuazione dell'art. 131 del Codice delle Assicurazioni Private) è riportata nella tabella posta in calce al presente documento;
- c) l'informativa di cui alle lettere a) e b) è relativa a tutti i compensi percepiti dagli intermediari coinvolti nella distribuzione del prodotto assicurativo.

SEZIONE VI
Informazioni sul pagamento dei premi

- a) I premi pagati dal contraente all'intermediario e le somme destinate ai risarcimenti o ai pagamenti dovuti dalle imprese costituiscono patrimonio autonomo e separato dal patrimonio dell'intermediario stesso;
- b) le modalità di pagamento dei premi ammesse sono:
 - 1. assegni bancari, postali o circolari, muniti della clausola di non trasferibilità, intestati o girati all'impresa di assicurazione;
 - 2. ordini di bonifico, altri mezzi di pagamento bancario o postale, inclusi gli strumenti di pagamento elettronici, anche nella forma on line, che abbiano quale beneficiario uno dei soggetti indicati al precedente punto 1;
 - 3. denaro contante, esclusivamente per i contratti di assicurazione contro i danni del ramo responsabilità civile auto e relative garanzie accessorie (se ed in quanto riferite allo stesso veicolo assicurato per la responsabilità civile auto), nonché per i contratti degli altri rami danni con il limite di settecentocinquanta euro annui per ciascun contratto.

SEZIONE VII
Informazioni sugli strumenti di tutela del contraente

- a) l'attività di distribuzione è garantita da un contratto di assicurazione della responsabilità civile che copre i danni arrecati ai contraenti da negligenze ed errori professionali dell'intermediario o da negligenze, errori professionali ed infedeltà dei dipendenti, dei collaboratori o delle persone del cui operato l'intermediario deve rispondere a norma di legge;
- b) il contraente ha la facoltà, ferma restando la possibilità di rivolgersi all'Autorità Giudiziaria, di inoltrare reclamo per iscritto all'intermediario o all'impresa preponente nonché la possibilità, qualora non dovesse ritenersi soddisfatto dall'esito del reclamo o in caso di assenza di riscontro da parte dell'intermediario o dell'impresa entro il termine di legge, di rivolgersi all'IVASS o alla Consob secondo quanto previsto nei DIP aggiuntivi;
- c) il contraente ha la facoltà di avvalersi di:
 - presentare ricorso all'Arbitro Assicurativo, qualora non dovesse ritenersi soddisfatto dall'esito del reclamo all'intermediario e/o all'impresa o in caso di assenza di riscontro entro il termine di legge, tramite il portale disponibile sul sito internet dello stesso (www.arbitroassicurativo.org), dove è possibile consultare gli ulteriori requisiti di ammissibilità, le informazioni relative alle modalità di presentazione del ricorso e ogni altra indicazione utile;
 - avvalersi di altri eventuali sistemi alternativi di risoluzione delle controversie previsti dalla normativa vigente indicati nei DIP aggiuntivi.



Generali Italia S.p.A.

Insurance Policy N° 400625993 - 400626002

Customer code: 29430607

Agenzia Generale di
ROMA PARIOLI LIEGI (IX6)
VIALE LIEGI, 41, 00198, ROMA, RM
agenzia.romaparioliliegi.it@generali.com
romaparioliliegi@pec.agenzie.generali.com
tel. 06-93570402



INSURANCE COVERAGE FOR NON-EUROPEAN UNION FOREIGN CITIZENS STAYING IN ITALY FOR MORE THAN 90 DAYS

The insurance coverage for accident, illness and assistance.

This Information Set is composed of:

- **Pre-contractual information document on non-life insurance contracts (non-life DIP)**
- **Additional pre-contractual information document for non-life insurance products (additional non-life DIP)**
- **Conditions of the Insurance Policy, including the Definitions**

A simple and clear contract:

The contract is drawn up according to the Guidelines of the "Simple and Clear Contracts" Technical Table coordinated by ANIA.

IN CASE OF DISCREPANCY ITALIAN WORDING SHALL PREVAIL.

Generali Italia S.p.A., registered in Italy in the IVASS Register of Insurance Companies under no. 1.00021, authorized by decree no. 289 of the Ministry of Industry, Commerce and Handicraft dated 02/12/1927.

Complete pre-contractual and contractual information related to the product is provided in other documents.

What type of insurance is it?

The contract is intended to provide insurance coverage for illness and accidents in favor of foreign citizens legally residing in Italy, holding a national visa (VN) issued for scientific research, pending employment, medical treatment (companion), religious reasons, family reunification/family members accompanying, elective residence, working holiday, or digital nomads by the competent Italian authorities in the country of origin and with a subsequent residence permit issued for the same reason and for the same duration indicated by the visa, registered with WELCOME ASSOCIATION ITALY.



What is covered?

The coverage, valid in the event of sudden illness or injury, covers medical expenses incurred by the Insured during hospitalization in a public hospital or for urgent hospital services.



What is not covered?

- ✦ The insurance is valid for persons aged 75 or younger. For persons who turn 75 during the contract, the coverage remains valid until the expiration of the policy year.
- ✦ Persons affected by alcoholism, drug addiction, or HIV infection are not insurable.
- ✦ The coverage applies exclusively to urgent hospital services provided by a public hospital authorized to admit patients in accordance with legal requirements and competent authorities.



Are there coverage limits?

The insurance does not cover:

- ! urgent hospital services that are the expression or direct consequence of pathological conditions arising before the policy was signed, as well as any pre-existing or recurrent illnesses;
- ! mental illnesses and psychological disorders in general, including neurotic behavior;
- ! treatments and surgeries aimed at eliminating or correcting physical defects and malformations pre-existing at the time the policy was taken out;
- ! dental care and treatment of periodontal diseases;
- ! consequences of wars, insurrections, earthquakes, or volcanic eruptions;
- ! injuries resulting from intentional criminal acts committed by the Insured (however, injuries caused by gross negligence are covered);
- ! injuries, illnesses, and intoxications resulting from alcohol abuse or suffered under the influence of hallucinogens, psychotropic drugs, or narcotics, as well as illnesses related to non-therapeutic use of psychotropic drugs or narcotics, or to alcohol and/or psychotropic substance abuse;
- ! injuries resulting from the practice of aerial sports of any kind, or any sport practiced professionally.

injuries resulting from participation in automobile races or competitions that are not regularity trials, motorcycle and motorboat races, including related trials and training sessions;

! surgical procedures aimed at correcting deviations of the nasal septum and pyramid, except for those required due to an accident occurring during the validity of the policy, duly and exclusively documented by an emergency room certificate and an X-ray examination proving nasal bone fracture.

The exclusions are detailed in the insurance terms and conditions and are indicated in *italic text*.

The additional DIP contains further detailed information.



Where is the coverage valid?

The insurance is valid exclusively in Italy, including Vatican City and the Republic of San Marino, and in countries adhering to the Schengen Agreement.



What are my obligations?

When signing the contract, the Policyholder and/or the Insured are required to provide truthful and complete declarations about the circumstances of the risk (Articles 1892, 1893, and 1894 of the Civil Code).

In case of a claim:

The Insured or their rightful beneficiaries must:

- Submit the claim notification as soon as possible, accompanied by the necessary medical documentation with the prescription stating the diagnostic question;
- Attach a complete copy of the medical records for services related to hospitalizations;
- Consent to examinations by doctors appointed by Generali Italia and any investigations deemed necessary, releasing the attending physicians from professional secrecy;
- Provide all documentation (medical and non-medical) that Generali Italia deems appropriate for a correct and complete claim investigation.

Failure to comply with even one of the above obligations may result in the loss of indemnity.



When and how do I have to pay?

The contract requires the Policyholder to pay an initial annual premium of €250.00 by bank transfer to the current account held by the Agency to which the contract is assigned.

The premium must be paid by bank or cashier's check, bank transfer, or other electronic payment methods, or in cash within the legal limits (€750.00).

The premium includes taxes. Payment of the insurance premium valid for the Insured is made through payment of the membership fee to the contracting party, Welcome Association Italy.

If the contract was entirely concluded through remote communication techniques, and the Policyholder exercises the right of withdrawal, Generali Italia will refund the premium paid, net of taxes, within 30 days of receiving the withdrawal notice.

Refund

A refund of the premium is provided in case the residence permit is not issued.



When does the coverage start and end?

The insurance takes effect at 12:00 a.m. on the day the Insured enters Italy and is valid provided that the foreign citizen has paid the premium and the membership fee and has obtained the residence permit.

The insurance terminates on the expiration date of the Insured's residence permit, without the need for cancellation, and in any case, its duration cannot exceed 6 months or 1 year from the effective date.



How can I cancel the policy?

To cancel the policy, the Policyholder must send a written notice by registered letter with return receipt to the Agency managing the contract or to the Company. Specifically, the Policyholder may withdraw from the contract at the end of each policy year by sending the cancellation notice at least 30 days before the respective expiry date.

If the contract was concluded entirely through remote communication techniques, the Policyholder may withdraw within 14 days of its conclusion. In such case, a written request must be sent to the Agency managing the contract or to Generali Italia by registered letter with return receipt or certified email (PEC).

Health Insurance - " Insurance for non-EU foreign citizens staying in Italy for stays longer than 90 days"

Additional pre-contractual information for non-life insurance products (Additional DIP – Non-Life)

Product: GENERASALUTE RSM

Last updated: 10.02.2026

The published Additional DIP is the latest version



Purpose

This document contains additional and supplementary information to the Non-Life Insurance Information Document (Non-Life DIP), to help the prospective Policyholder better understand the product, especially its cover, limitations, exclusions, costs and the company's financial position.

The Policyholder must read the Insurance Conditions before signing the contract.

Company

GENERALI ITALIA S.p.A. is a company of the Generali Group, with registered office at Via Marocchessa, 14 - 31021 Mogliano Veneto (TV) – ITALY; telephone: 041.5492111; website: www.generali.it; email: info.it@generali.com; certified email (PEC): generalitalia@pec.generaligroup.com; registered under no. 1.00021 in the Register of Insurance Companies.

Net equity as at 31/12/2024: € 9,102,202,252, including profit for the period of € 1,165,471,690. The data refer to the latest approved financial statements.

Solvency ratio: 228% (this ratio represents the relationship between eligible own funds and the solvency capital requirement under Solvency II regulations in force since 1 January 2016). The company's Solvency and Financial Condition Report (SFCR) is available at <https://www.generali.it/note-legali>.

Italian law applies to the contract.

Product



What is insured?

There is no additional information compared with the Non-Life DIP.



What is NOT insured?

Excluded risks

There is no additional information compared with the Non-Life DIP.



Are there any coverage limits?

Reimbursement of medical expenses incurred in public hospitals in Italy, including Vatican City and the Republic of San Marino, is provided with no limits, deductibles or excesses, while expenses incurred in countries that are part of the Schengen Agreement are reimbursed up to a maximum of €30,000.00 per insurance period.



Who is this product intended for?

The contract is intended for illness and accident cover for foreign citizens lawfully staying in Italy, holding a national visa (VN) issued for scientific research, awaiting employment, medical treatment (accompanying person), religious reasons, family reunification/family accompanying, elective residence, working holiday or digital nomads, and a subsequent residence permit for the same reason and duration, who are members of WELCOME ASSOCIATION ITALY.



What costs do I have to bear?

Intermediation costs

Intermediaries selling this insurance receive on average 15.70% of the taxable premium paid by the Policyholder as commission-based remuneration.

HOW CAN I LODGE A COMPLAINT AND SETTLE DISPUTES?

To the insurance company

Complaints may be submitted as follows:

- By letter sent to Generali Italia S.p.A. – Customer Advocacy and Customer Protection - Via Leonida Bissolati, 23 - Rome - ZIP Code 00187;
- Via the Company website www.generali.it, in the Complaints section;
- By email to: reclami.it@generali.com.

The corporate function responsible for handling complaints is Customer Advocacy and Customer Protection. A response must be provided within 45 days. This deadline may be suspended for up to 15 days for any additional investigation required in relation to complaints concerning Agents, their employees and collaborators.

To IVASS

In the event of an unsatisfactory outcome or a late response, you may contact IVASS, Via del Quirinale, 21 - 00187 Rome, fax 06.42133206, PEC: ivass@pec.ivass.it. The complaint form is available at www.ivass.it in the section "For consumers – Complaints".

HOW CAN I LODGE A COMPLAINT AND SETTLE DISPUTES?

BEFORE BRINGING A CASE BEFORE THE JUDICIAL AUTHORITY, you may use alternative dispute resolution systems such as:

Insurance Arbitration Board	Recourse to the Insurance Arbitration Board is mandatory as a condition for bringing any judicial action, as an alternative to Mediation. The application must be submitted through the portal available on its website (www.arbitroassicurativo.org), where you can consult admissibility requirements, filing information and other useful guidance.
Mediation	Recourse to Mediation is mandatory for disputes concerning insurance contracts. The request must be sent to generali_mediazione@pec.generaligroup.com or to Generali's registered office. A Mediation Body may be chosen from those listed by the Ministry of Justice at www.giustizia.it (Law no. 98 of 9/8/2013).
Assisted negotiation	You may resort to assisted negotiation through a request submitted by your lawyer to Generali Italia.
Other alternative dispute resolution systems	The following may be activated: <ul style="list-style-type: none">- contractual appraisal for disputes concerning the determination and assessment of damages within the Property Damage and Theft covers. Each party appoints an expert and the agreement is binding. The activation request must be sent to generaliitalia@pec.generaligroup.com or by registered mail to Generali Italia's registered office.- the FIN-NET procedure for the resolution of cross-border disputes. You may submit a complaint to IVASS or activate the FIN-NET network by contacting the body managing it in the country where the insurance undertaking is based (see the European Commission website or https://finance.ec.europa.eu/consumer-finance-and-payments/retail-financial-services/financial-dispute-resolution-network-fin-net_it).

TAX REGIME

Tax treatment applicable to the contract	The insurance tax due on the taxable premium is 2.5%. Insurance indemnities paid in relation to the purchase of non-life cover are not subject to taxation by Generali Italia at the time of settlement.
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What is the right to oncological oblivion?

Right to oncological oblivion	If the customer previously suffered from oncological diseases whose active treatment ended, with no recurrence, more than ten years ago, in accordance with Law no. 193 of 7 December 2023 and its implementing decrees, they are not required to provide information or undergo any assessment (e.g. medical examination) regarding that previous condition. The period is reduced from ten to five years if the disease arose before the age of twenty-one. For some oncological diseases, shorter periods apply as indicated in the Table available on the company website.
Certification of the conditions required for oncological oblivion	A customer who, before entering into or renewing the insurance contract, provided information concerning previous oncological diseases whose active treatment has ended, with no recurrence, shall promptly send the insurance company or intermediary the relevant certification, in accordance with Law no. 193 of 2023 and subsequent implementing decrees.
Effects of oncological oblivion for companies	Once the period required for the right to oncological oblivion has elapsed, any information already acquired may not be used to modify contractual conditions, assess the risk of the transaction or evaluate the customer's solvency. Companies must permanently delete data relating to the previous oncological disease within 30 days of receiving the certification, at no cost to the customer. Contractual clauses entered into in breach of Article 2, paragraphs 1 to 5, of Law no. 193 of 7 December 2023 are null and void, without prejudice to the validity of the contract. This nullity operates solely in favour of the policyholder or insured person and may be declared ex officio at any stage of the proceedings.

FOR THIS CONTRACT, THE COMPANY PROVIDES A RESERVED INTERNET AREA FOR THE POLICYHOLDER (HOME INSURANCE). AFTER SIGNING, YOU MAY ACCESS THIS AREA TO MANAGE THE CONTRACT ONLINE, INCLUDING SUBMITTING CLAIM NOTICES AND REIMBURSEMENT REQUESTS with supporting documentation.

Assistance Insurance Insurance for Non-EU Foreign Citizens Staying in Italy for Periods Over 90 Days



DIP – Pre-Contractual Information Document for Non-Life Insurance Products

Company: Generali Italia S.p.A.

Product: Generic Assistance

Generali Italia S.p.A., registered in Italy in the IVASS Register of Insurance Companies under no. 1.00021, authorized by decree of the Ministry of Industry, Commerce and Handicrafts no. 289 dated 2/12/1927.

The complete pre-contractual and contractual information relating to the product is provided in other documents.

What type of insurance is it?

The contract is intended to provide coverage for illnesses and accidents in favor of foreign citizens legally residing in Italy, holding a national visa (VN) issued for scientific research, pending employment, medical treatment (companion), religious reasons, family reunification/family members accompanying, elective residence, working holiday, or digital nomads by the competent Italian authorities in the country of origin, and with a subsequent residence permit issued for the same reason and duration as indicated on the visa, registered with WELCOME ASSOCIATION ITALY.



What is insured?

The coverage, valid in the event of sudden illness or injury, guarantees the direct provision of the following assistance services:

- Medical Evacuation
- Repatriation of remains



What is NOT insured?

- ✗ The insurance is valid for persons aged 75 years or younger. For persons who turn 75 during the contract period, coverage remains valid until the policy anniversary date.
- ✗ Persons affected by alcoholism, drug addiction, or HIV infection are not insurable.



Are there coverage limits?

The insurance does not cover:

- ! urgent hospital services that are the expression or direct consequence of pathological conditions arising before the policy was signed, as well as pre-existing or recurrent illnesses;
- ! mental illnesses and psychological disorders, including neurotic behavior;
- ! treatments and surgeries aimed at correcting physical defects and malformations pre-existing at the time of policy subscription;
- ! dental care and treatment of periodontal diseases;
- ! consequences of wars, insurrections, earthquakes, or volcanic eruptions;
- ! injuries resulting from intentional criminal acts committed by the Insured (however, injuries caused by gross negligence are covered);
- ! injuries, illnesses, and intoxications resulting from alcohol abuse, or suffered under the influence of hallucinogens, psychotropic drugs, or narcotics, as well as illnesses related to the non-therapeutic use of

psychotropic drugs or narcotics, or to alcohol and/or psychotropic substance abuse;

- ! injuries resulting from the practice of aerial sports of any kind or from any sport practiced professionally;
- ! injuries resulting from participation in automobile races or competitions that are not regularity trials, motorcycle and motorboat races, including related trials and training sessions;
- ! surgical procedures aimed at correcting deviations of the nasal septum and pyramid, except for those required due to an accident occurring during the validity of the policy, duly and exclusively documented by an emergency room certificate and an X-ray examination proving nasal bone fracture.

The exclusions are detailed in the insurance terms and conditions and are indicated in italic text.

The additional DIP contains further detailed information.



Where is the coverage valid?

The insurance is valid exclusively in Italy, including Vatican City and the Republic of San Marino, and in the countries adhering to the Schengen Agreement. Services and guarantees are not provided for countries that are in a state of declared or de facto war.



What obligations do I have?

At the time of contract signing, the Policyholder and/or the Insured are required to provide truthful and complete declarations regarding the circumstances of the risk (Articles 1892, 1893, and 1894 of the Civil Code).

In the event of a claim:

The Insured or their rightful claimants must:

- submit the claim report, accompanied by the necessary medical documentation including the prescription specifying the diagnostic question, as soon as possible;
- attach a complete copy of the medical records related to hospital stays;
- consent to examinations by doctors appointed by Generali Italia and to any investigations deemed necessary by the company, releasing the treating doctors from professional secrecy;
- provide all documentation (medical and otherwise) that Generali Italia considers necessary for a proper and complete investigation of the claim.

Failure to comply with even one of the above obligations may result in the loss of indemnity.



When and how must I pay?

The contract requires the Policyholder to pay an initial annual premium of €250.00 by bank transfer to the bank account held by the Agency assigned to the contract.

The premium can be paid by bank or cashier's check, bank transfer, and other electronic payment methods, or in cash within the legal limit (€750.00).

The premium includes taxes. Payment of the insurance premium valid for the Insured is made through the payment of the membership fee to the contracting party, Welcome Association Italy.

If the contract has been concluded entirely through remote communication techniques, in the event the Policyholder exercises the right of withdrawal, Generali Italia shall refund the premium paid, net of taxes, within 30 days from receipt of the withdrawal notice.



When does the coverage begin and end?

The insurance takes effect from 24:00 on the day the Insured enters Italy and is valid provided that the foreign citizen has paid the premium and membership fee and has obtained the residence permit. The insurance terminates on the expiration date of the Insured's residence permit, without the need for cancellation, and in any case cannot exceed 6 months or 1 year from the effective date.



How can I cancel the policy?

To cancel the policy, the Policyholder must send a written communication by registered letter with return receipt to the Agency assigned to the contract or to the Company. Specifically, the Policyholder may withdraw from the contract at the end of each policy year by sending the cancellation notice at least 30 days before the respective expiration date.

If the contract is concluded entirely through remote communication techniques, the Policyholder may withdraw within 14 days from its conclusion. In this case, a written request must be sent to the Agency managing the contract or to Generali Italia by registered letter with return receipt or certified email (PEC).

Assistance Insurance

Additional pre-contractual information for non-life insurance products (Additional DIP – Non-Life)

Product: GENERAL ASSISTANCE

Last updated: 10.02.2026

The published Additional DIP is the latest version



Purpose

This document contains additional and supplementary information to the Non-Life Insurance Information Document (Non-Life DIP), to help the prospective Policyholder better understand the product, especially its cover, limitations, exclusions, costs and the company's financial position.

The Policyholder must read the Insurance Conditions before signing the contract.

Company

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Net equity as at 31/12/2024: € 9,102,202,252, including profit for the period of € 1,165,471,690. The data refer to the latest approved financial statements.

Solvency ratio: 228% (this ratio represents the relationship between eligible own funds and the solvency capital requirement under Solvency II regulations in force since 1 January 2016). The company's Solvency and Financial Condition Report (SFCR) is available at <https://www.generali.it/note-legali>.

Italian law applies to the contract.

Product



What is insured?

There is no additional information compared with the Non-Life DIP.



What is NOT insured?

Excluded risks

There is no additional information compared with the Non-Life DIP.



Are there any coverage limits?

The contract provides for limits within which the services are delivered.

Deductibles, excesses and causes of suspension are set out in the insurance conditions and are indicated in italics.



Who is this product intended for?

The contract is intended for illness and accident cover for foreign citizens lawfully staying in Italy, holding a national visa (VN) issued for scientific research, awaiting employment, medical treatment (accompanying person), religious reasons, family reunification/family accompanying, elective residence, working holiday or digital nomads, and a subsequent residence permit for the same reason and duration, who are members of WELCOME ASSOCIATION ITALY.



What costs do I have to bear?

Intermediation costs

Intermediaries selling this insurance receive on average 15.70% of the taxable premium paid by the Policyholder as commission-based remuneration.

HOW CAN I LODGE A COMPLAINT AND SETTLE DISPUTES?

To the insurance company

Complaints may be submitted as follows:

- By letter sent to Generali Italia S.p.A. – Customer Advocacy and Customer Protection - Via Leonida Bissolati, 23 - Rome - ZIP Code 00187;
- Via the Company website www.generali.it, in the Complaints section;
- By email to: reclami.it@generali.com.

The corporate function responsible for handling complaints is Customer Advocacy and Customer Protection. A response must be provided within 45 days. This deadline may be suspended for up to 15 days for any additional investigation required in relation to complaints concerning Agents, their employees and collaborators.

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BEFORE BRINGING A CASE BEFORE THE JUDICIAL AUTHORITY, you may use alternative dispute resolution systems such as:

Insurance Arbitration Board	Recourse to the Insurance Arbitration Board is mandatory as a condition for bringing any judicial action, as an alternative to Mediation. The application must be submitted through the portal available on its website (www.arbitroassicurativo.org), where you can consult admissibility requirements, filing information and other useful guidance.
Mediation	Recourse to Mediation is mandatory for disputes concerning insurance contracts. The request must be sent to generali_mediazione@pec.generaligroup.com or to Generali's registered office. A Mediation Body may be chosen from those listed by the Ministry of Justice at www.giustizia.it (Law no. 98 of 9/8/2013).
Assisted negotiation	You may resort to assisted negotiation through a request submitted by your lawyer to Generali Italia.
Other alternative dispute resolution systems	The following may be activated: <ul style="list-style-type: none">- contractual appraisal for disputes concerning the determination and assessment of damages within the Property Damage and Theft covers. Each party appoints an expert and the agreement is binding. The activation request must be sent to generaliitalia@pec.generaligroup.com or by registered mail to Generali Italia's registered office.- the FIN-NET procedure for the resolution of cross-border disputes. You may submit a complaint to IVASS or activate the FIN-NET network by contacting the body managing it in the country where the insurance undertaking is based (see the European Commission website or https://finance.ec.europa.eu/consumer-finance-and-payments/retail-financial-services/financial-dispute-resolution-network-fin-net_it).

TAX REGIME

Tax treatment applicable to the contract	The insurance tax due on the taxable premium is 10%. Insurance indemnities paid in relation to the purchase of non-life cover are not subject to taxation by Generali Italia at the time of settlement.
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What is the right to oncological oblivion?

Right to oncological oblivion	If the customer previously suffered from oncological diseases whose active treatment ended, with no recurrence, more than ten years ago, in accordance with Law no. 193 of 7 December 2023 and its implementing decrees, they are not required to provide information or undergo any assessment (e.g. medical examination) regarding that previous condition. The period is reduced from ten to five years if the disease arose before the age of twenty-one. For some oncological diseases, shorter periods apply as indicated in the Table available on the company website.
Certification of the conditions required for oncological oblivion	A customer who, before entering into or renewing the insurance contract, provided information concerning previous oncological diseases whose active treatment has ended, with no recurrence, shall promptly send the insurance company or intermediary the relevant certification, in accordance with Law no. 193 of 2023 and subsequent implementing decrees.
Effects of oncological oblivion for companies	Once the period required for the right to oncological oblivion has elapsed, any information already acquired may not be used to modify contractual conditions, assess the risk of the transaction or evaluate the customer's solvency. Companies must permanently delete data relating to the previous oncological disease within 30 days of receiving the certification, at no cost to the customer. Contractual clauses entered into in breach of Article 2, paragraphs 1 to 5, of Law no. 193 of 7 December 2023 are null and void, without prejudice to the validity of the contract. This nullity operates solely in favour of the policyholder or insured person and may be declared ex officio at any stage of the proceedings.

FOR THIS CONTRACT, THE COMPANY PROVIDES A RESERVED INTERNET AREA FOR THE POLICYHOLDER (HOME INSURANCE). AFTER SIGNING, YOU MAY ACCESS THIS AREA TO MANAGE THE CONTRACT ONLINE, INCLUDING SUBMITTING CLAIM NOTICES AND REIMBURSEMENT REQUESTS with supporting documentation.



**WELCOME
ASSOCIATION
ITALY**

INSURANCE POLICY

***INSURANCE COVERAGE FOR NON-EUROPEAN UNION
FOREIGN CITIZENS STAYING IN ITALY FOR MORE THAN
90 DAYS***



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DEFINITIONS

INSURED PARTY	Foreign citizens legally living in Italy, with a national visa (VN) issued for elective residence, working holiday, scientific research, pending employment, medical treatment (companion), religious reasons and family reunification/accompanying family member by the competent Italian Authorities in the country of origin and with a subsequent residence permit, issued for the same reason and for the same duration indicated by the visa, members of WELCOME ASSOCIATION ITALY.
INSURANCE POLICY	The contract.
CONTRACTING PARTY	WELCOME ASSOCIATION ITALY - Registered Office: Via Aldo Manuzio, 51/53 – 00153 Rome, Tax Code: 15536801002 entity that stipulates the Insurance policy in favor of its Associates.
ORGANIZED STRUCTURE	EUROP ASSISTANCE ITALIA S.p.A. with registered office in Milan, Piazza Trento 8 - Tax Code 80039790151, VAT Number 00776030157 registered in the Milan Companies Register Rea 754519 and in Section I of the Register of insurance and reinsurance companies under no. 1.00108, a company belonging to the Generali Group, registered in the Insurance Groups Register, made up of managers, staff (doctors, technicians, operators), equipment and facilities (centralized and otherwise) operating 24 hours a day, every day of the year and that, by virtue of a specific agreement, provides on behalf of the Company to contact the Insured Party, the organization and provision of assistance services provided by the Assistance Section within the various limits set by the contract and with costs at the expenses the Company.
ACCIDENT	The event due to fortuitous, violent and external cause, which produces objectively ascertainable physical injuries, which result in death, permanent disability or temporary disability.
SUDDEN ILLNESS	The acute onset illness affecting the Insured Party and, in any case, not a manifestation, albeit sudden, of a pathology that occurred before the beginning of the coverage.
POLICY CERTIFICATE	The document proving the Insurance policy.
HOSPITALIZATION	Hospitalization, involving overnight stay, in a public hospital duly authorized to admit patients according to legal requirements and the competent Authorities.
COMPANY	Generali Italia S.p.A.



RULES THAT REGULATE THE INSURANCE POLICY IN GENERAL

Art. 1 Insurance Policy in favor of Contracting Party's Associates

The Contracting Party and Generali Italia S.p.A. mutually acknowledge that this Insurance Policy is stipulated in the interest of the Insured Party whose relationship with Generali Italia S.p.A. is governed exclusively by the Conditions of the Insurance Policy; it is therefore understood that in relation to any and every possible claim and/or request that the Insured Party should advance in relation to the services/guarantees provided by Generali Italia S.p.A. by virtue of this Insurance Policy, the company will respond, except for the obligations of the Contracting Party, according to the provisions of art. "Obligations of the Contracting Party".

Art. 2 Effective date and duration of the Insurance Policy

The Insurance is effective from midnight on the day of the payment of the premium and of the membership fee provided that the foreign citizen has obtained the release of the residence permit*.

The coverage will cease on the expiry date of the residence permit and, in any case, at the end of the six-month or one-year period from the effective date of the Insurance Policy without obligation of cancellation.

** In the event that the residence permit is not issued by the authorities to the Insured Party upon presentation of the documents for the request to stay in Italy, they will be entitled to obtain a refund of the premium paid, upon presentation of the documentation that certifies failure of issue of the permit.*

Art. 3 Exclusions

The Insurance is not valid for:

- a) urgent hospital services which are expression or direct consequence of pathological situations arising prior to the stipulation of the policy, as well as any previous or recurrent illnesses;*
- b) mental illnesses and mental disorders in general, including neurotic behavior;*
- c) Treatment and operation for the elimination or correction of physical defects and pre-existing malformations on the date of stipulation of the policy;*
- d) dental and periodontal treatment;*
- e) the consequences of wars, insurrections, earthquakes or volcanic eruptions;*
- f) accidents resulting from malicious offenses committed by the Insured Party (including accidents caused by gross negligence);*
- g) accidents, illnesses and intoxication resulting from alcohol abuse, or suffered under the influence of hallucinogens, psychotropic drugs and narcotics, as well as diseases related to the non-therapeutic use of psychotropic drugs or narcotics, alcohol abuse and/or psychotropic substances;*



- h) accidents resulting from performing air sports in general or of any professionally performed sport;*
- i) accidents deriving from participation in non-regulated racing or motor racing races, motorcycles and motorboats, and related tests and training sessions;*
- j) surgical interventions aimed at correcting the deviation of the septum and the nasal pyramid, except for those which become necessary following an accident that took place while the policy was in force, duly and exclusively documented by a first aid certificate and x-ray examination attesting to the fracture of the nasal bones.*

Art. 4 Territorial extension

The insurance Policy is valid for the events mentioned above exclusively in Italy including the Vatican City and the Republic of San Marino and in the countries belonging to the Schengen Agreement. No benefits or guarantees are provided for countries that are in a state of declared or de facto civil unrest.

Assistance services will not be provided in those countries that are in a declared or de facto state of civil unrest, the countries indicated on the site <http://watch.exclusive-analysis.com/lists/cargo> which report a degree of risk equal to or greater than 4.0 ".

The countries whose state of civil unrest has been made public have also been considered in a state of declared or de facto civil unrest.

Service will not be provided for those countries in which public riots are taking place at the time of the statement.

Furthermore, it is not possible to provide assistance in kind where local or international authorities do not allow private subjects to carry out direct assistance activities regardless of whether or not there is a risk of war in progress.

Art. 5 Statements relating to the circumstances of risk

Inexact statements or the reticence of the Contracting Party and/or the Insured Party relating to circumstances that influence the risk assessment may result in the total or partial loss of the right to reimbursement, as well as the termination of the Insurance Policy itself (articles 1892, 1893 and 1894 CC).

Art. 6 Uninsurable individuals and aggravation of risk

Individuals who are or have been affected by alcoholism, drug addiction or HIV infection are not insurable, regardless of the actual health status assessment.

The occurrence in the Insured Party of one of these diseases or illnesses during the contract constitutes, for the Company, an aggravation of the risk for which it would not have allowed the Insurance Policy pursuant to art. 1898 of the Civil Code; consequently the Company may withdraw from the contract with immediate effect limited to the Insured Party affected by the illness and the claims occurring after the onset of some of the aforementioned pathologies do not give the right to the provision of benefits.



**WELCOME
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Art. 7 Reference to the law

For all that is not otherwise regulated herein, the laws apply.

Art. 8 Exemption of responsibility

The Organizational Structure does not assume responsibility for damage caused by the intervention of the authorities of the country in which the assistance is given or consequent to any other fortuitous and unpredictable circumstance.

Art. 9 Age limits

The insurance is valid up to the date of the completion of the 75th (seventy-fifth) year of age for each Insured.



REIMBURSEMENT OF MEDICAL EXPENSES SECTION

Art. 1 Object of the Insurance Policy - Urgent Hospital Service for sudden illness or injury

In the event the Insured Party has an accident or is struck by sudden illness, which require hospitalization at a public hospital or urgent hospital services, the Company is committed to directly pay A.S.L. (Local Health Authorities) and/or the Insured Party for the costs incurred for these services without spending limit, deductible and/or overdraft.

Urgent hospital services are all medical services performed in a hospital setting, hospitalization or not, resulting from an emergency diagnosis made by the hospital doctor.

For any urgent hospital services performed in member states, excluding Italy, the Vatican City and the Republic of San Marino, which fully apply the provisions of the Schengen Agreement, the Insurance provides for reimbursement to the Insured Party of expenses incurred up to the limit of maximum coverage of € 30,000.00 per insurance period without deductible and/or overdraft.

Art. 2 Notice of accident - Procedures for requesting Urgent Hospital service

A.S.L. must verify that the Insured Party is entitled to obtain assistance, verifying that the premium has been paid and must also verify that he is duly authorized to remain in Italy, inspecting the residence permit.

Carried out the aforementioned inspections, the A.S.L. interested, upon completion of the stay of the Insured Party, must request the payment of hospital services, to the Company Generali Italia S.p.A. General Agency of Rome Parioli Liegi - at the dedicated desk located in Viale Liegi, 41 - 00198 Rome Tel. 06 93570402 - Email info@insuranceitaly.it, sending a copy of the registration request, payment of the premium, of the hospitalization documentation - including the copy of the complete medical record - and of the invoice addressed to the Insured Party. The Company, once it has received all the documentation, will verify the Insured Party's insurance position and proceed with the payment of the amount due in terms of the policy directly to A.S.L. which requested it. In the case of urgent medical service performed outside Italy in hospitals located in member states that fully apply the provisions of the Schengen Agreement, the Insured Party must request reimbursement by sending the Company a copy of the medical documentation and expenses incurred, the residence permit and the receipt certifying the payment of the premium in the original language, translated into Italian.

The Company will reimburse the amount due in terms of the policy in Euro by bank transfer, also abroad, or by check to the address in Italy indicated by the Insured Party at the time of the request.



ASSISTANCE SECTION

Art. 1 Object of the Insurance Policy – Medical Evacuation

If the Insured Party, as a result of an accident or sudden illness, is hospitalized for urgent hospital services in the territory of a Schengen Act state and is in a condition that cannot be treated in a hospital located in the same territory and *in the opinion of the doctors of the Organizational Structure* and in agreement with the local doctor, will be transported to Italy to an equipped health care institution, the company, will arrange, at the expense of the Organizational Structure, the means of transportation and the time deemed most suitable. The means of transportation may be:

- medical aircraft;
- economy class airline ticket, if necessary, with a stretcher seat;
- first-class train ticket and, if necessary, sleeping car;
- ambulance (without mileage limits).

The medical evacuation, to countries outside Europe, is carried out exclusively with an economy class airline ticket, possibly with a stretcher seat.

For reentry to and from all European countries and from and to all the countries bordering the Mediterranean basin, a medical aircraft may also be used.

The transport will be entirely organized by the Organizational Structure and will include medical or nursing assistance during the trip, should the doctors of the Organizational Structure deem it necessary.

The Company through the Organizational Structure will have the right to request any unused travel ticket for the return of the Insured Party.

The following are excluded from the service:

- *illnesses or injuries that, in the opinion of the doctors of the Organizational Structure, can be treated locally or that do not prevent the Insured Party from continuing the journey;*
- *infectious diseases, in the event that transport involves the violation of national or international health regulations;*
- *all the cases in which the Insured Party or the family members voluntarily sign the hospital discharge against the opinion of the doctors of the facility where the Insured Party is hospitalized.*

Art. 2 Repatriation of Remains

In the event of the Insured's death occurring in Italy, the Organizational Structure will arrange and carry out the transportation of the mortal remains to the airport closest to the place of burial in the Insured's country _____ of _____ origin.

If it is not possible to reach any airport in the country of origin, the Organizational Structure will arrange transportation of the mortal remains to the international airport in the nearest accessible country. The Organizational Structure will handle all formalities, in accordance with international regulations.

The following are excluded from the Benefit:

- expenses related to the funeral ceremony and any recovery of the body;



- expenses for transporting the mortal remains to the burial site in the country of origin.

The Company will bear the costs up to a maximum amount of € 5,000.00 per Claim.

Art. 3 Notice of accident – How to request Medical Evacuation

Pursuant to and for the purposes of articles. 1913, 1914 and 1915 of the Civil Code, in order to be entitled to guaranteed benefits, the Insured Party must contact the Organizational Structure, reachable 24/7, in order to be entitled to the guaranteed benefits, at the following numbers:

- *toll-free number 800 450 130 (from Italy)*
- *urban line 02 582 867 88 (from abroad)*

The Insured Party, at the time of requesting the service, must communicate the reason for the request, the telephone number and the place where they are located, the Insurance Policy number and the specified Card Range.

WHAT TO DO IN THE EVENT OF AN ACCIDENT

To benefit from Assistance services, the Insured may telephone the Organizational Structure, operating 24 hours a day, at the following numbers:

from Italy at the toll-free number 800 450 130

from abroad at the number 02 582 867 88

At the time of request the Insured Party must communicate:

- a) type of assistance or service needed and the name of the attending doctor;
- b) name and surname ;
- c) Insurance Policy number. YYYYYYYYYYYYYYY
- d) Card range: **GICB**;
- e) address;
- f) telephone number where the Insured party is reachable

The Insured Party, by contacting or being contacted by the Organizational Structure freely gives their consent to the processing of their prevalent and sensitive Personal Data as indicated in the Pre-contractual Information.