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MSH INTERNATIONAL: your health partner

You are covered by a healthcare plan (or USD/CHF/CAD/£) or a healthcare plan complementary to local social security coverage* provided and managed for you by MSH INTERNATIONAL.

The group is one of the world leaders in employee benefit plans, providing coverage for over 330,000 internationally mobile individuals worldwide.

MSH INTERNATIONAL provides you with dedicated teams who are available to offer expert advice, guidance and support.

*The healthcare plan provides you with the same level of coverage as that provided by your local social security plan and that of a complementary insurance plan. Therefore your medical expenses are reimbursed as of the first euro spent, in accordance with the terms and conditions of your plan.

USEFUL TIP

This document is a practical guide to your healthcare procedures. Details of your benefits are available on our website: www.msh-intl.com/global, Participants’ Pages, under Your Enrollment, Your Benefits. Then, you can download your summary of benefits.
IMPORTANT

When you enrolled in the plan, you received a welcome letter together with your MSH INTERNATIONAL card. Keep your card in a safe place; it will be useful when dealing with physicians and hospital facilities.

By your side
day after day

Worldwide quality services and advice and support 24/7 to help you with your healthcare procedures.

A dedicated team for a personalized focus

- Available 24/7 thanks to our 4 claims departments: Calgary, Paris, Dubai and Shanghai.
- Multicultural: speaking over 40 languages and covering more than 60 nationalities.
- A thorough understanding of the specific features of local healthcare systems.
- Full-time consulting physicians available to provide you with medical expertise.

Efficient services

- Direct precertification in the event of hospitalization or expensive treatment worldwide.
- Claims processed within 5 working days, subject to submission of all the necessary supporting documents, and in more than 150 currencies.
- Direct payment procedure available worldwide.
- Second medical opinion if you are unsure of the diagnosis you have been given.
A high-quality global network

You are entirely free to choose your healthcare provider but try to use healthcare practitioners and hospital facilities which belong to the MSH INTERNATIONAL network. Thanks to our network of more than 860,000 healthcare providers worldwide, you benefit from quality services all around the world at reasonable and customary or preferential rates. You can find their contact details at www.msh-intl.com/global, Participants' Pages, under Your Healthcare.

A multicultural medical team

The MSH INTERNATIONAL medical team includes 21 consulting physicians who speak fluent English and at least one other language (Spanish, Filipino, Chinese, French, Russian, etc.), making your contacts with hospitals easier. Our physicians are on hand to:

› give you an explanation of the treatment recommended by your practitioner,
› provide you with a second medical opinion if you are unsure of the diagnosis you have been given,
› help you choosing practitioners or medical facilities which charge fees under or near our upper reimbursement limits.

You can get in touch with them by email at: medical@msh-intl.com or you can contact your claims department (see p. 31).

IMPORTANT

All information received will be processed in strictest confidentiality. Only our medical officers have access to this dedicated inbox.
On your Participants’ Pages, at www.msh-intl.com/global, in just a few clicks you can:

› view and download your summary of benefits, your practical guide, your personalized insurance ID card and certificate of insurance,
› submit a claim and request a hospital precertification agreement,
› check the progress of your claims in real time:
  - get an email alert when we receive your claim form and when your reimbursement notice is available on-line,
  - view your reimbursement notices from the last 24 months,

Your Participants’ Pages contain all the information you will need about your plan and provide you with many helpful on-line services.

USEFUL TIP
Do not forget to fill out or update your email address under Your Details in order to receive email alerts for your claims.
IMPORTANT
Access to the Participants’ Pages is secure and your details and transactions are guaranteed to be completely confidential.

USEFUL TIP
For your login request to be successful, you need to provide the surname and email address you gave us when you enrolled. Otherwise, your login request will be processed by our teams as quickly as possible.

Get your login details in just 3 clicks!

1. Go to our website www.msh-intl.com/global, Participants’ Pages.
2. On the authentication page, click on “Get your login details”.
3. Fill out the required information and click on “Send”.

Your login and password will be directly sent to you by email.

find, wherever you are in the world:
- a physician and/or a healthcare facility near your home,
- detailed health information and the essential vaccinations required for a particular country,
- get the latest health information from our newsletters,
- “submit an inquiry”.

Guiding you through your healthcare procedures
Claiming your medical expenses

Steps to follow...

If you (or one of your dependents) is covered from the 1st € (or USD/CHF/CAD/£):

1. You consult a healthcare professional and settle your fees.
2. Fill out your claim form on your Participants’ Pages, under Fill out a Claim Form. Print and sign it.

Details of our international network of healthcare practitioners and hospital facilities are available at www.msh-intl.com/global, Participants’ Pages, under Your Healthcare. However, you are entirely free to choose your own healthcare providers.

USEFUL TIP

You will have no bank transfer charges to pay, other than account maintenance fees, if the currency of your reimbursement is the same as that of your account and the country it is held in.
Submit your claim form together with the originals* of your medical prescriptions, practitioner’s fees, bills and pharmacy price labels to your claims department (see p. 31).

The documents to be enclosed with your claim must show the surname and first name of the patient, the date, the amount and details of the treatment together with the name, address and telephone number of the practitioner, hospital facility, laboratory or pharmacist.

Any missing documents will delay your reimbursement. If this happens, we will alert you using the 🔴 symbol on your reimbursement notice on your Participants’ Pages.

You will receive your reimbursement by check or bank transfer to the account of your choice and in your bank account’s currency or by direct reimbursement to your credit card.

If the currency of your bank account is not the same as the one in which you paid for your healthcare expenses, the exchange rate used to calculate your reimbursement is the rate issued by Natixis Bank on the last day of the month preceding the date of your treatment.

*IMPORTANT
Please keep a copy of all documents before sending us your original documents. If your plan allows you to send scanned supporting documents, keep the originals of all the documents enclosed with your claim for at least 24 months.

USEFUL TIP
Direct reimbursement to your credit card

Available in more than 40 currencies, this form of reimbursement is faster and more reliable, whatever your host country, particularly for currencies considered difficult for interbank transfers (Brazilian real, Malaysian ringgit, Russian ruble, etc.). This system is totally secure and your bank details remain completely confidential. To take advantage of this service or for more information, contact your claims department (see p. 31).

IMPORTANT
No claims will be paid, directly or indirectly, in contravention of any restrictions imposed for example by the United Nations, the Office of Foreign Assets Control (OFAC) from the U.S. Department of the Treasury or the European Union, in respect of countries subject to sanctions.
Claiming your medical expenses

Steps to follow...

... If one of your dependents is covered by French Social Security, the Social Security scheme for students or a local scheme:

1. You consult a healthcare professional and settle your fees.
2. Send the originals of medical prescriptions, practitioner’s fees and bills, etc. to the Social Security office and keep a copy of all documents.
3. You are reimbursed by the Social Security office and receive your reimbursement notice.
Send your claim form (by mail or email) to your claims department (see p. 31) together with copies of your medical prescriptions, practitioner’s fees, bills and the reimbursement notice from the Social Security office.

You will receive your reimbursement by check or bank transfer to the account of your choice and in your bank account’s currency or by direct reimbursement to your credit card (see Useful tip p. 9).

**Glossary**

**What is the difference between a healthcare reimbursement and a hospital precertification agreement?**

**Healthcare reimbursement:** You receive the reimbursement of the amount you paid to the practitioner at the time of your consultation (see p.8 and 9 and above).

**Hospital precertification agreement:** We settle the bill directly with the hospital without you having to make a cash advance (see p. 17).

**IMPORTANT**

No claims will be paid, directly or indirectly, in contravention of any restrictions imposed for example by the United Nations, the Office of Foreign Assets Control (OFAC) from the U.S. Department of the Treasury or the European Union, in respect of countries subject to sanctions.
To ensure the sustainability of your plan and to help give you the best possible control over your medical expenses, we aim to make our insured members aware of the cost of healthcare.

**Preventative measures**

- Make sure you get **all the vaccinations recommended** for your country of destination before you leave.
- Take a look at the medical information we provide at [www.msh-intl.com/global](http://www.msh-intl.com/global), Participants’ Pages, under *Your Healthcare*, paying special attention to the recommendations for preventing certain illnesses (malaria, AIDS, etc.).
- Get a **pre-expatriation check-up** for the whole family before you leave as well as **regular health checks**; some health concerns can be incompatible with certain climates.
Useful tips to help you control costs

- Try to use the public sector or state-approved healthcare providers where possible.
- If your spouse has their own complementary coverage, send their medical expenses claims to their provider first.
- Avoid giving any information in advance about the plan’s level of coverage, especially to dentists and opticians, in order to avoid rates being automatically adjusted to the upper limit.
- Limit the number of visits to different practitioners for the same health concern.

Quality medical services at a “reasonable and customary” cost

Healthcare costs vary greatly from country to country, and even between practitioners or medical facilities in the same town: some physicians or medical facilities can charge up to ten times more than others, while offering the same quality of service.

To help combat this type of practice, and based on our in-depth knowledge of local healthcare systems, we have produced a comparative chart of “reasonable and customary charges”.

This is a scale of charges which we consider to be reasonable according to the type of medical care and the country and indicates the level at which you should expect to be reimbursed.
Prior approval and precertification agreements

Prior approval

When do you need to request prior approval?

You will need to request prior approval from your claims department for the following types of healthcare (if the benefits have been subscribed by your employer):

- dental prostheses - crowns - bridges,
- dental surgery,
- dental implants,
- orthodontic treatment,
- laser refractive surgery,
- medical prostheses other than dental,
- medically assisted procreation,
- stays in medical facilities,
- series of medical services involving more than ten sessions, such as services for acupuncture, osteopathic or chiropractic treatment, etc.

For vision care expenses in France, your optician can contact us directly. We will give our approval for direct payment according to your plan’s benefits.
If your vision care expenses are incurred outside of France, you will have to pay for your expenses and send us the bills for reimbursement in accordance with the coverage provided under your plan.

The request for prior approval enables you to:
- ensure you are getting the right type of treatment for your health concern,
- find out how much you will be reimbursed,
- negotiate rates with hospital facilities and practitioners,
- obtain a precertification agreement to avoid having to make a cash advance for your treatment.

For any further information or concern, please contact your claims department (see p. 31).

How to obtain prior approval?

1. Send us your treatment plan by mail or email including the prescription from your practitioner, x-rays where necessary and/or an itemized estimate of costs.
2. We will specify the reimbursement conditions within 72 hours of receipt of your request.

For your dental treatment

To obtain prior approval, please send us the following documents:

From July 31st 2014, French estimates must comply with the new common classification of medical procedures, including those from non-approved dentists. Estimates obtained abroad must show, at a minimum, the number of teeth to be treated, details of the planned treatment and the name of the patient.

- Orthodontics
  The treatment plan must show the start and end dates or, failing that, the estimated duration of the treatment and its total cost.
In what circumstances can I request a precertification agreement?

Please check beforehand whether these benefits have been subscribed by your employer.

For hospitalization

MSH INTERNATIONAL will settle your medical bills directly with the hospital facility, in line with the terms and conditions of your healthcare coverage.

You will only have to pay any costs which are not covered by your insurance (for example telephone and television).
## Procedure to follow to request a hospital precertification agreement:

<table>
<thead>
<tr>
<th>PLANNED HOSPITALIZATION</th>
<th>EMERGENCIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact us at least 10 days before your admission to hospital.</td>
<td>Go directly to the hospital.</td>
</tr>
</tbody>
</table>

We will make the necessary arrangements with the hospital and confirm your precertification agreement.

Fill out your precertification request directly on our website at www.msh-intl.com/global, Participants’ Pages, under Precertification and Direct Payment Request.

<table>
<thead>
<tr>
<th>IMPORTANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you are covered by a healthcare plan which is complementary to a Social Security scheme, you need to contact the Social Security office first.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>USEFUL TIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Be sure to show your MSH INTERNATIONAL card on arrival at the hospital. It will facilitate administrative procedures.</td>
</tr>
</tbody>
</table>

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17
For maternity

Pregnancy
For coverage of pregnancy-related costs, in accordance with the terms and conditions of your plan, you should send us a declaration of pregnancy, showing the expected delivery date, before the end of the 3rd month.

Delivery
Follow the steps for hospitalization precertification on page 17.

If direct payment is accepted by the hospital, MSH INTERNATIONAL will send them the precertification agreement covering your maternity costs one month before your due date, according to the terms and conditions of your healthcare plan.
For other types of treatment
(Other than dental and vision care)

MSH INTERNATIONAL’s precertification system covers a wide range of medical treatments and procedures.

Please contact us to find out if the treatment you are going to receive qualifies for direct payment (see p. 31).

Glossary

Prior approval:
You contact MSH INTERNATIONAL before commencing any medical treatment or long-term care to find out if you will be reimbursed and under what conditions. You may have to make a cash advance to pay for your treatment.

Precertification agreement:
You ask MSH INTERNATIONAL to settle your bills directly with the healthcare professional or the medical facility without you having to make a cash advance.

The precertification form is available at www.msh-intl.com/global, Participants’ Pages, under Precertification and Direct Payment Request.
Because your health is essential, MSH INTERNATIONAL reaches out to you to bring you information and assist you with all your formalities.

Personalized follow-up of your procedures

- **“Welcome package”** by mail when you join the plan with confirmation of enrollment and all the information you will need (insurance card, practical guide, on-line services, etc.).
- **Email alerts**: when we receive your claim for reimbursement and when a new reimbursement notice is available on your Participants’ Pages.
News on health and mobility issues in real time

- Topical emails keeping you up-to-date with important information.

Prevention and health advice

- Practical sheets on health and advice at www.msh-intl.com/global, Participants’ Pages, under Your Healthcare.
- A quarterly newsletter with all our latest news and services and information on your healthcare.
1. How do I change my personal information (email address, password, etc.)?

Once you have logged in to your Participants’ Pages at www.msh-intl.com/global, you can change your details under Your Enrollment / Your Details.

2. How can my family benefit from my healthcare plan?

If your plan provides for enrollment of your dependents, you will be able to add them to your healthcare coverage. In that case, your employer must send us a request for coverage of your dependents. For this purpose, you will need to send them all the necessary official documents such as marriage/PACS/co-habitation certificate or a birth/adoption certificate, a copy of your family record book, a certificate of school/university enrollment, etc.

If your child has paid employment, he/she must be covered by their own insurance. We also offer individual insurance solutions: do not hesitate to contact us for further information.

Please note In case of a family status change (birth, marriage, divorce, death, etc.), you need to inform your employer and send them all necessary supporting documents.
3. My spouse is staying in France and has French Social Security coverage. Can my MSH INTERNATIONAL plan provide them with complementary reimbursements?

MSH INTERNATIONAL will provide complementary reimbursements in addition to those from French Social Security.

4. My spouse is employed locally and has local healthcare coverage. Can my MSH INTERNATIONAL plan provide them with complementary reimbursements?

Medical expenses should first be sent to the local Social Security office. MSH INTERNATIONAL will provide a complementary reimbursement or will reimburse the full amount of some expenses which are not covered by the local office.

5. My child is a student. To what extent are their Medical Expenses covered under my plan?

If they’re studying in France, MSH INTERNATIONAL will provide a complementary reimbursement in addition to the one from the Social Security scheme for students. Please note that during any temporary stays abroad, only emergency expenses will be covered. If they’re studying abroad, in order to be covered under your plan, you must have custody of your child and they must be studying in the country where you are expatriated. If they are studying in a country which is not your home country or host country, your plan may limit coverage to expenses incurred in a medical emergency, which is inadequate (Check your summary of benefits to see the extent of your coverage).

We would therefore recommend that you take out individual insurance for them (distinct from yours) for the duration of their studies. Take a look at the insurance products we offer on the ASFE website, www.asfe-expat.com.

Wherever they are studying, and from their 21st birthday onwards, you must email us a copy of their certificate of school/university enrollment each year at enrol@msh-intl.com in order to renew their coverage (or each semester for some countries).
6. My group plan is terminated. What should I do to continue benefiting from your services?

We offer individual insurance solutions adapted to your situation that can provide you with coverage after termination of your group healthcare plan. For any question, please contact our international individual department:

ASFE - 18, rue de Courcelles
75 384 Paris Cedex 8 – France
Tél.: +33 (0)1 44 20 48 77 – E-mail: contact@asfe-expat.com

My healthcare

1. What is the geographical scope of my Medical Expenses coverage?

Depending on your plan, your Medical Expenses may be covered in any country or limited to your home country and your host country. In the latter case, only expenses incurred in a medical emergency are covered if this emergency occurs in a third country. Please refer to your summary of benefits, which is available online, to check the terms and conditions of your plan.
2. How can I get the names of qualified physicians, clinics or approved hospitals all over the world?

Check our network of healthcare providers at www.msh-intl.com/global, Participants’ Pages, under Your Healthcare. For each requested country and area of specialization, you can access a database with contact details of recommended physicians and facilities, including the languages spoken, types of service provided in hospitals, facilities accepting direct payment, etc.

However, you remain entirely free to choose your practitioner or healthcare facility (except in the USA where the healthcare providers must belong to the MSH INTERNATIONAL network so that you can take advantage of negotiated rates).

Your claims department is at your service to help you choose a provider.

For the direct payment procedure, please contact our precertification team prior to incurring any expense.

3. Are medical expenses incurred in International SOS clinics covered by MSH INTERNATIONAL?

Yes, depending on the terms and conditions of your plan. However, please keep in mind that subscription fees to ISOS clinics are not covered.

4. I am not so sure about the diagnosis or treatment suggested to me by my physician or the hospital facility where I need to undergo surgery. How can I get a second medical opinion?

You just need to send an email to medical@msh-intl.com or contact your claims department.

5. If I need to go to the emergency department, what should I do?

Show your MSH INTERNATIONAL card at the admissions desk of the hospital and ask them to contact one of our claims departments. You are covered worldwide for all business trips, during your vacations or in your host country for emergency treatment. You will find all telephone numbers to contact us 24/7 on your card.

Please note Your MSH INTERNATIONAL card is not a guarantee of direct payment, nor proof of insurance. For confirmation that your treatment is covered, please contact us.
My claims

1. How do I submit a claim?
Go to our website www.msh-intl.com/global, under Your Reimbursements / Fill out a Claim Form and complete the on-line form.

2. What is the deadline for sending a claim form?
All claim forms must be sent to MSH INTERNATIONAL within 12 to 24 months of the date of service (depending on the plan taken out by your employer). Any claims received after this 12 to 24-month period will not be eligible for reimbursement.

3. How do I know when my claim has been processed?
You will receive an email alert as soon as your claim is processed. You can view your reimbursement notices from the last 24 months in your Participants’ Pages, under Your Reimbursements / Your Reimbursement Notices.

4. Do I need to translate documents into English or French or convert currencies for my claim to be processed?
No. Our multicultural teams can process claims submitted in any language and in more than 150 currencies.
5. If I send a claim based on a currency that is not the same as the currency of my bank account, what exchange rate is used?

The exchange rate used to determine your reimbursements is the one issued by Natixis Bank on the last day of the month preceding the date of your treatment.

6. I do not understand the reimbursement that I received/I disagree with the reimbursement. Who should I contact?

Go to our website www.msh-intl.com/global, Participants’ Pages, under Contact us / Submit an inquiry or contact your claims department. We will give you the clarification you need to solve any potential misunderstandings.

My precertification agreements and prior approvals

1. How do I request a precertification agreement?

Go to our website www.msh-intl.com/global, under Your Reimbursements / Precertification and Direct Payment Request, and complete the on-line form.

2. Can MSH INTERNATIONAL make a direct payment to a hospital or practitioner?

Yes, MSH INTERNATIONAL can make a direct payment for hospitalization, maternity or other types of expenses depending on the terms of your plan.

You just need to fill out the precertification form at www.msh-intl.com/global, Participants’ Pages, under Precertification and Direct Payment Request. You can also contact your claims department by phone or email and give them the name of hospital or practitioner and their address and phone number. After confirmation of coverage, MSH INTERNATIONAL will then arrange for direct payment of your treatment to be made to the healthcare provider, subject to medical acceptance.
3. What happens if I did not request prior approval for treatment that requires one?

We may refuse to pay all or part of your reimbursement. Do not hesitate to ask us for prior approval. We will respond within 72 hours of receiving your request. You can find the list of healthcare requiring prior approval on p. 14.

My on-line services

1. What is my login/password to access my Participants’ Pages?

Get your login details in just 3 clicks!
1. Go to our website www.msh-intl.com/global, Participants’ Pages
2. On the authentication page, click on “Get your login details”.
3. Fill out the required information and click on “Send”.
   Your login and password will be directly sent to you by email.

Important! For your login request to be successful, you need to provide the surname and email address you gave us when you enrolled. Otherwise, your login request will be processed by our teams as quickly as possible.
2. How do I change my password?

Once you have logged in to your Participants’ Pages, you can change your password under Your Details.

3. How do I update my personal contact details?

Simply go to the Your enrollment section, then Your Details in the Participants’ Pages. You will be able to amend your postal address, email address, telephone number, nationality and host country. Click on Save. Your details will be automatically updated on our databases.

4. I lost my MSH INTERNATIONAL card. What should I do to get another one?

Go to our website www.msh-intl.com/global, Participants’ Pages under Insurance ID card. There you can print a personalized e-card. You can also contact your claims department to get a copy (see p. 31).

5. I’ve started to fill out my claim for reimbursement but want to finish it later. Is that possible?

Yes, you can use the Draft option in the bottom right of the claims screen to save the data you’ve already entered.
You can then retrieve and complete your claim by going to the Your Claims section of the Participants’ Pages.
If you log off, a pop-up will appear when you next log on telling you that you have an incomplete claim pending.

**Please note** For plans where it is possible to upload scanned documents, you will not be able, for security reasons, to save the uploaded PDF as a draft. If you save your claim as a draft, you will have to upload the supporting documents again when you complete it.

*If you encounter any technical problems or if you have any questions regarding the use of our online services, please contact us via the Participants’ Pages under “Contact us / Submit an inquiry” / Subject: Use of website. Remember to provide as much detail as possible about your problem and provide us with screenshots of any error messages. This will make it easier for us to understand and resolve the issue.*
Contacts

If you have any queries or require any further information, please contact your claims departments, available 24/7.

USEFUL TIP
To find out which is your nearest claims department, go to our website www.msh-intl.com/global, Participants’ Pages, under Contact us/Our Contact Details. You will also find all our Contact Details all around the world.
Guiding you through your healthcare procedures

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Fax: +86 21 6160 0153
adminAsia@msh-intl.com

www.msh-intl.com/global
PRIVACY AND PERSONAL DATA PROTECTION

The information collected is used either to identify you to allow you secure access to our website or to collect information so we can offer you customized solutions and answers.

This information is exclusively intended for MSH INTERNATIONAL and is subject to automated processing used for compliance with legal requirements and for the purposes of signing, promoting, administering and fulfilling the contracts offered by our group.

As provided by the French law of January 6, 1978 on Data Protection (loi informatique et libertés), amended in 2004, you have the right to access, rectify and delete any personal information that we have on file pertaining to you. You may exercise this right by writing to:

SIACI SAINT HONORE – Direction juridique – 18 rue de Courcelles 75384 Paris Cedex 08, France, together with a copy of a signed piece of identification.

COMPLAINT PROCESSING

In case of a complaint, we recommend that you contact our group first via your usual contact person.

Alternatively, you may also send a complaint in writing to our Service réclamation, 82 rue de Villeneuve 92587 Clichy Cedex - France. In this case, we undertake to provide you with a reply no later than two months after receiving the necessary information related to your complaint, or, failing that, to keep you informed about the progress of your complaint processing if particular circumstances prevent us from meeting this commitment.

If the problem is still not resolved, you can refer the case to the Mediator of the Chambre Syndicale des Courtiers d’Assurance (Industrial Union for Insurance Brokers in France), responsible for claims from individuals (91 rue Saint Lazare, 75009 Paris, France) or to the Autorité de Contrôle Prudentiel (French Regulatory Authority for Prudential Supervision), located 61 rue Taitbout 75009 Paris, France.

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