United States Fire Insurance Company
Administrative Office: 5 Christopher Way, Eatontown, NJ 07724

TRAVEL PROTECTION INSURANCE PLAN

Standard Plan

This plan describes the travel insurance benefits underwritten by United States Fire Insurance Company, herein referred to as the "Company" or as "We", "Us" and "Our". Please refer to the Schedule of Benefits, which provides the Insured, also referred to as "You" or "Your", with specific information about the program You purchased. Defined terms are capitalized and their meanings are listed in the General Definitions section.

PLEASE READ THIS DOCUMENT CAREFULLY FOR FULL DETAILS

This document is a legal contract issued in consideration of Your payment of the premium due collected by Us or Our authorized representative. If there are any conflicts between the contents of this document and the policy (form series T7000GBP), the policy will govern in all cases.

14 Day Free Look Period

If You are not satisfied for any reason, You may cancel this insurance within 14 days from the date of purchase by providing Us or Our authorized representative the cancellation notice. We will refund Your plan cost provided there has been no incurred loss; You have not departed on Your Trip or filed a claim under this plan. When so returned, all coverages under this plan are invalid from the beginning.

Signed for United States Fire Insurance Company By:

Marc J. Adee
Chairman and CEO

Michael P. McTigue
Secretary

Questions regarding the Certificate or coverage under the Certificate should be directed to:

United States Fire Insurance Company
800-227-3745

If You (a) need the assistance of the governmental agency that regulates insurance; or (b) has a complaint with the insurer that has not been able to be resolved, You may contact the department of Insurance by mail, telephone or email:

State of Indiana Department of Insurance
Consumer Services Division
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204

Consumer Hotline: (800) 622-4461; (317) 232-2395

Complaints can be filed electronically at www.in.gov/idoi.

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SCHEDULE OF BENEFITS

Limitation on Multiple Benefits
If You incur one or more losses from the same covered Unforeseen reason for which amounts are payable under more than one of the following benefits, the maximum amount payable under all benefits combined will not collectively exceed the largest Maximum Benefit Amount shown in the Schedule of Benefits for any one of the following applicable benefits: Trip Cancellation, Single Supplement, Trip Interruption, Additional Trip Interruption, Missed Connection, Trip Delay, Accident & Sickness Medical Expense, Medical Evacuation and Repatriation of Remains, Additional Medical Evacuation, Political or Security Evacuation and natural Disaster Evacuation, Baggage and Personal Effects and Baggage Delay. We indemnify all covered losses arising from the same covered Unforeseen reason at the amount of the largest applicable Maximum Benefit Amount.

No benefits will duplicate any other benefit or coverage provided under this plan. Should there be a duplication of coverage or benefits, then We will pay the benefit providing the largest amount of coverage.

Benefit(s)	**Maximum Benefit Amount**
Trip Cancellation	**up to 100% of the non-refundable insured Trip Cost**
Single Supplement	included
Trip Interruption	**up to 100% of the non-refundable insured Trip Cost**
Single Supplement	Included
Additional Trip Interruption	**Included under the Trip Interruption Benefit Maximum**
Traveling Companion Hospitalization	up to $150 per day, limited to 5 days
Missed Connection	**$500**
Trip Delay	**up to $150 per day, to a maximum of $750**
Accident & Sickness Medical Expense	**$25,000**
Dental Expense sublimit	$750
Medical Evacuation and Repatriation of Remains Benefit	**$100,000**
Additional Medical Evacuation:	Included
Transportation of Children/Child	Included
Bedside Visit Transportation to Join You	Included
Political or Security Evacuation and Natural Disaster Evacuation	**$25,000**
Baggage and Personal Effects	**$1,500**
Passport, Visa or Other Travel Documents Replacement	$100
Credit Card charges and interest	$50
Per Article Limit	Up to $300
Items Subject to Special Limitations	$600 Maximum Combined
Baggage Delay	**$300**
	up to $50 to expedite the return

SECTION I COVERAGE PROVISIONS

Who Is Eligible For Coverage

A person who is booked to travel on a Trip and pays the required plan cost is covered under this plan. Eligibility for purchase of this plan will be determined at the time of claim. If it is determined that You or Your Trip is not eligible for coverage, any claim for benefits will be denied and Your plan cost for this plan will be refunded. Coverage is only available for persons who are a citizen or resident of the United States of America.

Non-Refundable Provision

After the 14 day review period, the plan cost for this plan is non-refundable.

SECTION II WHEN COVERAGE BEGINS AND ENDS

When Coverage Begins:

This is Your Effective Date and time for Trip Cancellation:

Coverage begins at 12:01 a.m. at Your location on the day after the date We or Our authorized representative receive the required plan cost to cover Your Trip.

This is Your Effective Date and time for Trip Interruption and Missed Connection:

Coverage begins when You depart on Your first scheduled Travel Arrangement (or if You must use an alternate travel arrangement after Your Scheduled Departure Date to reach Your Scheduled Destination, on the Scheduled Departure Date) for Your Trip.

This is Your Effective Date and time for Trip Delay: Coverage begins after You have traveled 50 miles or more from Your Primary Residence en route to join Your Trip. Coverage is in force while en route to and from the Covered Trip.

This is Your Effective Date and time for All Other Coverages: Coverage begins on the date and time You depart on the first Travel Arrangement (or alternate travel arrangement if You must use an alternate travel arrangement to reach Your Scheduled Destination) for Your Trip.

When Coverage Ends:

Trip Cancellation coverage automatically ends on the earlier of:

1. the date and time You depart on Your Trip;
2. the date and time You cancel Your Trip;
3. the scheduled departure time on the Scheduled Departure Date of Your Trip.

All Other Coverages: Your coverage automatically ends on the earlier/est of:

1. the date You complete Your Trip;
2. the Scheduled Return Date;
3. Your arrival at Your Return Destination on a round Trip, or Your Scheduled Destination on a one-way Trip;
4. cancellation of Your Trip covered by this plan;
5. the date You return from Your Trip if Your return was delayed due to a covered Unforeseen reason listed under the plan.

SECTION III EXTENSION OF COVERAGE

Automatic Extension of Coverage

All coverages except **Trip Cancellation** will be extended if Your entire Trip is covered by this plan and Your return is delayed due to unavoidable circumstances beyond Your control. This extension of coverage will end on the earlier of the date You reach Your originally scheduled Return Destination or 10 days after the originally Scheduled Return Date.

Baggage and Personal Effects Extension

If Your Baggage and Personal Effects are in the charge of a Common Carrier and delivery is delayed, coverage for those items will be extended from the earlier of:

1. the date and time a Common Carrier delivers Your property to You;
2. the date a Common Carrier documents the property as lost, stolen or damaged.

This extension does not include loss caused by the delay.

Medical Evacuation and Repatriation Extension

If You incur a covered Injury or Sickness on Your Trip and a treating Physician certifies that You are not Medically Fit to Travel to Your Return Destination on Your Scheduled Return Date, the Medical Evacuation and Repatriation benefit will be automatically extended until You are Medically Fit to Travel and transported to Your Primary Residence or You reached the Maximum Benefit Amount shown in the Schedule of Benefits.

Accident and Sickness Medical Expense Extension

If You are Hospitalized due to a covered Injury or Sickness on Your Trip and a treating Physician certifies that You are not Medically Fit to Travel to Your Return Destination on Your Scheduled Return Date, this benefit will be extended for an additional 30 days, or until You are released from the Hospital and Medically Fit to Travel, or You reached the Maximum Benefit Amount shown in the Schedule of Benefits, whichever is earlier, provided that Hospitalization goes beyond the Scheduled Return Date.

SECTION IV COVERAGES

TRIP CANCELLATION

If You cancel Your Trip prior to the Scheduled Departure Date, We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for unused, forfeited, prepaid non-refundable Payments or Deposits for the Travel Arrangements You purchased for Your Trip, provided the cancellation occurs while coverage is in effect for You and is due to any of the following covered Unforeseen reasons, as defined:

1. Your, a Family Member's, a Traveling Companion's or Business Partner's death that occurs before departure on Your Trip; or

2. Your, a Family Member's, a Traveling Companion's or Business Partner's Sickness or Injury, that:

   a. occurs before departure on Your Trip;
   b. is examined and treated by a Physician prior to cancellation unless it is not reasonably possible to do so; and
   c. as certified by a Physician, results in medical restrictions so disabling as to cause You to cancel Your Trip.

3. Sickness, Injury or death of Your Child Caregiver, which results in medically imposed restrictions as certified by a Physician at the time of loss preventing You from participating in the Trip. A Physician must advise the Child Caregiver is unable to provide basic childcare services while You are on Your Trip on or before the Scheduled Departure Date;

4. You or Your Traveling Companion must cancel Your Trip due to Other Covered Events as defined, provided such circumstances occur while coverage is in effect:

Other Covered Events means:

1. You or Your Traveling Companion have Complications of Pregnancy, which is verified by medical records and occurs after the Effective Date of coverage;
2. You or Your Traveling Companion are suffering a Mental, Nervous or Psychological condition or disorders which require Hospitalization or Partial Hospitalization. Hospitalization or Partial Hospitalization must be for at least 5 or more days before Your Scheduled Trip. A Physician must certify the condition as preventing You or Your Traveling Companion from going on the Trip.

   The Hospitalization requirement does not apply to dementia when death results.

3. This peril applies if You have purchased the plan within the Time Sensitive Period. The Bankruptcy or Default of an entity that directly provides Travel Arrangements, including an Air Common Carrier, cruise line, tour operator or other travel entity that causes a complete cessation of travel services if the Bankruptcy or Default occurs more than 14 days following Your Effective Date for Your Trip Cancellation benefit. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination.

   Losses resulting from the Bankruptcy or Default of the Travel Supplier are not covered by this plan;
4. You or Your Traveling Companion are directly involved in a traffic accident, while en route to Your Scheduled Trip Departure City or Scheduled Destination. The traffic accident must be documented by a police report;
5. mechanical breakdown/equipment failure of a Common Carrier on which You are scheduled to travel that causes a cancellation or delay of Your travel for at least 12 consecutive hours provided no alternative travel arrangements were available;
6. an unannounced Strike results in a complete cessation of services for at least 12 consecutive hours of a Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination;
7. Inclement Weather that causes a complete cessation of services for at least 12 consecutive hours of a Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination;
8. Your or Your Traveling Companion's Primary Residence or Scheduled Destination are made Uninhabitable and remain Uninhabitable during Your Trip by a Natural Disaster or burglary.

   Claims are not payable if a hurricane is foreseeable prior to Your Effective Date for Trip Cancellation. A hurricane is foreseeable on the date it becomes a named storm. We will only pay the benefits for losses occurring within 30 days after the event renders Your Scheduled Destination Uninhabitable;
9. You or Your Traveling Companion are hijacked or Quarantined;
10. You or Your Traveling Companion are served with a court order, required to serve on a jury or required to appear as a witness in a legal action, provided You or Your Traveling Companion are not: 1) a party to the legal action; except 2) appearing in a law enforcement capacity;
11. You or Your Traveling Companion are called to active military duty or emergency service either to serve or to provide aid or relief in the event of a Natural Disaster, a Civil Disorder or Terrorist Incident other than war;
12. Your previously granted military leave is revoked or reassigned for reasons due to war or an act of war. Official written revocation/re-assignment by a supervisor or commanding officer of the appropriate branch of service will be required. The military leave for the dates of travel must have been approved prior to the Effective Date of Trip Cancellation coverage and the leave revoked or reassigned after the Effective Date of Trip Cancellation coverage;
13. a Terrorist Incident occurs before Your Trip within 30 days of Your Scheduled Departure Date in a city listed on the scheduled itinerary of Your Trip;

    Provided Your Travel Supplier (if applicable) did not offer a substitute itinerary. Losses resulting from a cancellation due to a potential Terrorist Incident are not covered, even if the cancellation is due to the issuance of travel advisories, bulletins or alerts;

14. a documented theft of Your passports or visas specifically required for Your Trip. A police report must substantiate the theft;
15. You have a transfer of employment within the same organization of 250 or more miles which requires Your Primary Residence to be relocated. Notification of the transfer must occur after the Effective Date of Your Trip Cancellation Coverage;
16. You or Your Traveling Companion are involuntarily terminated or laid off from Your or their employment. The termination notice must occur at least 30 days after Your Trip Cancellation Effective Date. You or Your Traveling Companion must have been an active employee with the same employer for at least 1 continuous year;
17. You or Your Traveling Companion are a student (or are a parent of a student) or are employed either as a full-time teacher or other full-time employee at an elementary, middle or high school and are required to attend/cover an extended school year that falls during or beyond the Scheduled Departure Date. Notice of the extended school year must be provided after the Trip Cancellation Effective Date. School extensions due to extra-curricular or athletic events are not covered;
18. Your or Your Traveling Companion's place of employment is deemed to be unsuitable for business due to burglary, vandalism or a Natural Disaster and You or Your Traveling Companion are directly involved as a member or as an employee of the disaster recovery team who is responsible for policy and decision making and are required to work as a result;
19. Your parent or legal guardian, if You are a Child, is responsible financially for the Trip and:
    a. has a transfer of employment within the same organization of 250 or more miles which requires their Primary Residence to be relocated and You have to cancel Your Trip. Notification of the transfer must occur after the Effective Date of the Insured's Trip Cancellation Coverage;
    b. is involuntary terminated or laid off from their employment, and You have to cancel Your Trip.

    This provision is only applicable if they have been an active employee with the same employer for at least 1 continuous year.

The maximum payable under this Trip Cancellation Benefit is the lesser of the total amount of coverage You purchased or the Maximum Benefit Amount shown in the Schedule of Benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

SINGLE SUPPLEMENT

We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the additional cost incurred as a result of a change in the per person occupancy rate for prepaid non-refundable Travel Arrangements if a person booked to share accommodations with You cancels or interrupts his/her Trip due to any of the covered Unforeseen reasons or Other Covered Events shown in Your Trip Cancellation and/or Trip Interruption section(s) and You do not cancel or interrupt Your Trip. Proof of cancellation or interruption by a person booked to share accommodations with You is required.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

TRIP INTERRUPTION

If You must start Your Trip late or are unable to complete Your Trip, We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the unused, forfeited, prepaid non-refundable Payments or Deposits paid to the Travel Supplier for the land or water Travel Arrangements You purchased for Your Trip plus the Additional Transportation Cost paid to either:

a) join Your Trip if You must depart after Your Scheduled Departure Date or travel via alternate travel arrangements; or

b) rejoin Your Trip from the point where You interrupted Your Trip to the next Scheduled Destination; or

c) transport You to Your originally scheduled Return Destination of Your Trip.

The benefit payable for the above will not exceed the cost of a one-way economy airfare (or first or business class, if the original tickets were first or business class) by the most direct route less any refunds paid or payable for Your unused original tickets. Note that reimbursement of non-refundable Payments or Deposits will be calculated/prorated on a nightly basis less the cost of Your original airfare booked by Your Travel Supplier.

Trip Interruption must occur while coverage is in effect for You due to any of the following covered Unforeseen reasons, as defined:

1. Your, a Family Member's, or a Traveling Companion's or a Business Partner's death, which occurs while You are on Your Trip; or

2. Your, a Family Member's, or a Traveling Companion's or a Business Partner's Sickness or Injury, that:
   a) occurs while You are on Your Trip;
   b) is examined and treated by a Physician prior to the time of interruption unless it is not reasonably possible to do so; and
   c) as certified by a Physician, results in medical restrictions so disabling as to prevent Your continued participation on Your Trip.

3. Sickness, Injury or death of Your Child Caregiver, which results in medically imposed restrictions as certified by a Physician at the time of loss preventing You continuing on Your Trip. A Physician must advise the Child Caregiver is unable to provide basic childcare services while You are on Your Trip;

4. You or Your Traveling Companion must interrupt Your Trip due to Other Covered Events as defined, provided such circumstances occur while coverage is in effect:

Other Covered Events means:

1. You or Your Traveling Companion have Complications of Pregnancy which is verified by medical records and occurs while You or Your Traveling Companion are on Your Trip;

2. a mechanical breakdown/equipment failure of a Common Carrier on which You are scheduled to travel that causes complete cessation or delay of Your travel for at least 12 consecutive hours provided no alternative travel arrangements were available;

3. an unannounced Strike resulting in complete cessation of travel services for at least 12 consecutive hours of the Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination or Return Destination;

4. You or Your Traveling Companion are directly involved in a traffic accident, while en route to Your Scheduled Trip Departure City. The traffic accident must be documented by a police report;

5. Inclement Weather that causes a complete cessation of services for at least 12 consecutive hours of a Common Carrier on which You are scheduled to travel;

6. Your or Your Traveling Companion's Primary Residence or Scheduled Destination are made Uninhabitable and remain Uninhabitable during Your Trip by a Natural Disaster or burglary;

   Claims are not payable if a hurricane is foreseeable prior Your Effective Date for Trip Interruption. A hurricane is foreseeable on the date it becomes a named storm. We will only pay the benefits for losses occurring within 30 days after the event renders Your Scheduled Destination Uninhabitable;

7. You or Your Traveling Companion are hijacked or Quarantined;

8. You or Your Traveling Companion are served with a court order, required to serve on a jury or required to appear as a witness in a legal action, provided You or Your Traveling Companion are not: 1) a party to the legal action; except 2) appearing in a law enforcement capacity;

9. You or Your Traveling Companion are called to active military duty or emergency service either to serve or to provide aid or relief in the event of a Natural Disaster, a Civil Disorder or Terrorist Incident other than war;

10. Your previously granted military leave is revoked or reassigned for reasons due to war or an act of war while You are on the Trip and You have to interrupt the Trip. Official written notice of the revocation or re-assignment by a supervisor or commanding officer of the appropriate branch of service will be required. The military leave for the dates of travel must have been approved prior to the Effective Date of Trip Interruption coverage and the leave revoked or reassigned after the Effective Date of Trip Interruption coverage;

11. a Terrorist Incident that occurs during Your Trip:
    a. in a city listed on the scheduled itinerary of Your Trip; and
    b. provided Your Travel Supplier (if applicable) did not offer a substitute itinerary.
12. a theft or loss of passports or travel documents or visas while on Your Trip, specifically required for Your Trip, which is substantiated by a police report;
13. You have a transfer of employment within the same organization of 250 or more miles which requires Your Primary Residence to be relocated and You have to interrupt the Trip. Notification of the transfer must occur while You are on the Trip and the transfer must occur during the Trip;
14. You or Your Traveling Companion are involuntarily terminated or laid off by Your or Your Traveling Companion's employer while You are on Your Trip. You or Your Traveling Companion must have been an active employee with the same employer for at least 1 continuous year;
15. Your or Your Traveling Companion's place of employment is deemed to be unsuitable for business due to burglary, vandalism or a Natural Disaster and You or Your Traveling Companion are directly involved as a member or as an employee of the disaster recovery team who is responsible for policy and decision making and are required to work as a result;
16. This peril applies if You have purchased the plan within the Time Sensitive Period. Bankruptcy or Default of an entity that directly provides Travel Arrangements, including an Air Common Carrier, cruise line, tour operator or other travel entity that cause a complete cessation of travel services if the Bankruptcy or Default occurs more than 14 days following Your Effective Date for Trip Interruption. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your Scheduled Destination;

    You are not covered by this plan for losses resulting from the Bankruptcy or Default of the Travel Supplier;
17. If You cannot continue on Your Trip due to a covered Injury or Sickness not requiring Hospitalization and You must extend Your Trip due to medically imposed restrictions, as certified by a treating Physician, benefits will be paid for additional hotel nights, meal(s) and local transportation expenses until You are Medically Fit to Travel up to the Maximum Benefit Amount shown on the Schedule of Benefits under Trip Delay;
18. Your parent or legal guardian, if You are a Child, is responsible financially for the Trip and:
    a. has a transfer of employment within the same organization of 250 or more miles which requires their Primary Residence to be relocated and You have to interrupt Your Trip. Notification of the transfer must occur while You are on Your Trip;
    b. is involuntary terminated or laid off from their employment while You are on Your Trip, and You have to interrupt Your Trip. Termination must occur following Your Trip Interruption Effective Date.

    This provision is only applicable if they have been an active employee with the same employer for at least 1 continuous year.

In no event shall the amount reimbursed for Trip Interruption exceed the lesser of the amount You prepaid for Your Trip or the Maximum Benefit Amount shown in the Schedule of Benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

Additional Trip Interruption

If You must interrupt Your Trip because Your Traveling Companion is Hospitalized and must remain Hospitalized due to a covered Injury or Sickness for at least 1 day during Your Trip, We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the Reasonable Expenses incurred by You to remain with Your Traveling Companion.

Additional Trip Interruption Benefits are supplemental to benefits provided under Trip Interruption and Your Total Interruption coverage may not exceed the amount shown in the Schedule of Benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

MISSED CONNECTION

If You miss Your Trip departure because Your arrival at Your Trip destination is delayed for at least 3 consecutive hours, due to:

1. any delay, cancellation or mechanical breakdown of regularly scheduled Common Carrier; must be documented by the Common Carrier;
2. Inclement Weather that is documented;
3. Quarantine, hijacking, Strike, Natural Disaster, terrorism or Civil Disorder or Riot.

We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for:

1. Additional Transportation Cost incurred by You to join the departed Trip; and
2. unused, forfeited, prepaid non-refundable Payments or Deposits paid to the Travel Supplier for the land or water Travel Arrangements You purchased for Your Trip.

This benefit may not be combined with Trip Cancellation or Trip Interruption benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

TRIP DELAY

We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the Reasonable Expenses, You incur, if You are delayed for 8 consecutive hours or more while en route to or from, or during the course of Your Trip, for one of the covered Unforeseen reasons:

1. Common Carrier delay (the delay must be documented by the Common Carrier);
2. a theft or loss of passports or travel documents or visas specifically required for Your Trip substantiated by a police report or the copy of the request for a new passport, or travel documents or visas;
3. You are hijacked or Quarantined;
4. An unannounced Strike resulting in a complete cessation of services of the Common Carrier on which You are scheduled to travel which prevents You from reaching Your Scheduled Destination or Return Destination;
5. Inclement Weather that causes a delay of travel on Your Trip route, which prevents You from reaching Your Scheduled Trip Departure City;
6. Due to a Natural Disaster, a mandatory evacuation order by local government authorities at Your Scheduled Trip Departure City or Scheduled Destination or Return Destination is issued which prevents You from traveling to/arriving at Your Scheduled Trip Departure City or Scheduled Destination or Return Destination;
7. Security Breach, Civil Disorder or Riot while at an airport or other port for at least 8 consecutive hours preventing You from reaching Your Scheduled Destination or Return Destination or departing on Your Trip.

Receipts must accompany Reasonable Additional Expenses incurred.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

ACCIDENT & SICKNESS MEDICAL EXPENSE BENEFIT

Benefits will be paid for Medical Expenses incurred by You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, subject to the following:

a. benefits will be payable only for Medical Expenses resulting from a Sickness or an Injury that occurs while on Your Trip (of a duration of 180 days or less for Sickness) and requires treatment in person by a Physician;
b. Sickness must commence itself and Injury must first occur while on Your Trip (of a duration of 180 days or less for Sickness);
c. only Medical Expenses incurred by You during Your Trip (of a duration of 180 days or less for Sickness) will be reimbursed. Medical Expenses incurred after You return from Your Trip are not covered.

If You suffer one or more Injury or Sickness while on the same Trip, the maximum amount payable for all Injuries or Sicknesses will not exceed the Maximum Benefit Amount shown in the Schedule of Benefits.

Medical Expenses means expenses incurred only for the following:

1. medical services (including charges for anesthetics, x-ray examinations or treatments, and laboratory tests) and supplies, prescription drugs, and therapeutic services ordered or prescribed by a Physician as Medically Necessary for treatment;
2. Hospital or ambulatory medical-surgical center services, including expenses for a cruise ship cabin or hotel room, not already included in the cost of Your Trip, if recommended by Your attending Physician and approved by Us or Our designated Travel Assistance Services Provider as a substitute for a hospital room for recovery from Your Injury or Sickness;
3. emergency dental treatment incurred during Your Trip due to an Accidental Injury to sound natural teeth. Dental Expenses incurred after Your Trip is completed are not covered;
4. local transportation expense to and/or from a Hospital.

We will not pay benefits in excess of the Usual and Customary level of charges. We will not cover any expenses provided by another party at no cost to You or already included within the cost of Your Trip.

Advance Payment: If You require admission to a Hospital or treatment at a clinic, Our designated Travel Assistance Services Provider will arrange advance payment (directly to the provider) necessary for Your admission to a Hospital because of a covered Injury or Sickness, up to the Maximum Benefit Amount shown in the Schedule of Benefits, provided You agree to reimburse Us if it is determined that Your Medical Expense claim is not covered.

We reserve the right to deny a request for advance payment if We confirm that Your claim is not covered under the plan. An advance payment made by Us is not a guarantee that Your Medical Expense claims are covered.

Hospital confinement must be certified as Medically Necessary by the onsite attending Physician.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

MEDICAL EVACUATION AND REPATRIATION OF REMAINS

Benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, when You suffer a Sickness, Injury, or Loss of life, during Your Trip, for the following:

Emergency Medical Evacuation

We will pay for the Usual and Customary transportation expenses for an Emergency Medical Evacuation, to the nearest suitable Hospital or medical facility where Medically Necessary treatment is available to treat an Unforeseen Sickness or Injury provided:

1. the local attending Physician and Our designated Travel Assistance Services Provider determine that Your condition is acute, severe or life threatening; and
2. that adequate Medically Necessary treatment is not available in Your immediate area.

Medical Repatriation

Following an Emergency Medical Evacuation or a covered Injury or Sickness, We will pay for Medical Evacuation expenses to return You to Your point of origin, Your Primary Residence, or to a Hospital of Choice or medical facility closest to Your Primary Residence capable of providing continued treatment, if Your local attending Physician and Our designated Travel Assistance Services Provider determine that it is Medically Necessary.

We will pay for one of the following methods of transportation, as pre-approved (prior to the evacuation) and arranged by Us or Our designated Travel Assistance Services Provider:

a. one-way economy transportation;
b. commercial air upgrade to business or first class, less refunds from Your unused transportation tickets;
c. other covered land or air transportation including, but not limited to, commercial stretcher, Medical Escort, or the contracted charges for air ambulance.

Transportation must be via the most direct, efficient and economical method of conveyance. In all cases, where practical, economy fare will be utilized. If possible, Your Common Carrier tickets will be used.

We will also pay a benefit for Usual and Customary expenses incurred for a Medical Escort's transportation and accommodations if an onsite attending Physician recommends in writing that a Medical Escort accompany You.

Medical Escort means a medically trained professional who is approved by Us or Our designated Travel Assistance Services Provider, and is contracted to accompany and provide medical care to a sick or injured person while they are being transported.

Hospital of Choice: You may choose to be transported to a Hospital in a city within the United States of America other than the city of Your Primary Residence. The maximum amount payable is limited to the cost of transportation to Your Primary Residence.

Advance Payment: We will pay covered expenses directly to the service provider if You require an Emergency Medical Evacuation and/or Medical Repatriation while on Your Trip, and the provider requires payment prior to service. This amount will be deducted from the benefit limit shown in the Schedule of Benefits. You agree to reimburse this payment to Us if: (a) You do not complete the claims process as outlined in the Payment of Claims section; or (b) it is determined that Your Emergency Medical Evacuation and/or Medical Repatriation claim is not covered.

We will not pay the benefits for any loss caused by or resulting from the transportation taken against the advice of the local attending Physician.

Medical Evacuation expenses will only be payable at the Usual and Customary level of payment for necessary transportation, related medical services and medical supplies.

Repatriation of Remains

Benefits will be paid for covered Repatriation Expenses incurred, up to the Maximum Benefit Amount shown in the Schedule of Benefits, to return Your body to Your city of Primary Residence or Your origination point or to the place of burial if You die during Your Trip.

Repatriation Expenses means:

a) embalming or local cremation; and
b) associated temporary storage costs for up to 60 days, or until local authorities of the country/state in which the death occurred, will permit further transportation of the body, whichever is later; and the most economical coffin or receptacle adequate to transport the remains;
c) the cost of transportation of the remains, by the most direct and economical conveyance and route possible, to: 1) the nearest location where the body can be embalmed or cremated, if not locally available; and/or 2) the receiving funeral home or morgue, at the Return Destination, or a different place of burial within United States; and
d) the cost for the creation and transmission of necessary documentation required to transport the body, such as a death certificate, autopsy or police report.

All Repatriation Expenses must be authorized and arranged in advance by Us or Our designated Travel Assistance Services Provider. Once Your remains are claimed by the receiving funeral home or morgue, or in the event of local cremation, coverage under this benefit ends.

Dispatch of a Physician: If the local attending Physician and Our designated Travel Assistance Services Provider cannot adequately assess Your need for Emergency Medical Evacuation or transportation, and a Physician is dispatched by the Travel Assistance Services Provider to make such assessment, benefits will be paid for the travel expenses incurred and medical services provided by the dispatched Physician.

Transportation expenses for the Emergency Medical Evacuation and/or Medical Repatriation must be authorized and arranged in advance by Us or Our designated Travel Assistance Services Provider.

In the event that Your Injury or Sickness prevents for You to obtain prior authorization of the Emergency Medical Evacuation, Medical Repatriation and/or Repatriation of Remains, You must make all efforts to notify Us or Our designated Travel Assistance Services Provider as soon as reasonably possible.

In the event You have not contacted Us or Our designated Travel Assistance Services Provider to arrange for Emergency Medical Evacuation, Medical Repatriation and/or Repatriation of Remains, benefits will be limited to the amount We would have paid had We or Our designated Travel Assistance Services Provider been contacted and related services pre-approved.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

ADDITIONAL MEDICAL EVACUATION

Transportation of Children/Child: If You die or are Hospitalized for more than 7 consecutive days following an Emergency Medical Evacuation or Injury and Sickness that occurred during Your Trip, We will pay up to the cost of a single one-way economy transportation ticket, or same class as the original transportation ticket, less the value of any applied credit from any unused return travel tickets for each person, to return Your Children/Child who were accompanying You on Your Trip (and any accompanying minor persons under Your care) who are left unattended by Your death or Hospitalization to their Primary Residence or to Your residence in the United States, including the cost of an attendant, if considered necessary by Us or Our designated Travel Assistance Services Provider.

Bedside Visit Transportation to Join You: If You are or will be Hospitalized for more than 3 consecutive days following an Emergency Medical Evacuation or Injury and Sickness that occurred during Your Trip, We will pay, up to the cost of a single round-trip economy transportation ticket, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for Reasonable Additional Expenses for one person chosen by You to visit Your bedside, provided You are traveling alone and Emergency Medical Evacuation or Medical Repatriation is not imminent.

You must provide all receipts for all covered expenses incurred during the stay.

Additional Medical Evacuation Benefits are supplemental to benefits provided under Medical Evacuation and Repatriation of Remains and Your Medical Evacuation and Repatriation of Remains coverage may not exceed the amount shown in the Schedule of Benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

POLITICAL OR SECURITY EVACUATION

We will pay, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for all reasonable Political or Security Evacuation expenses and Related Costs incurred for Your transportation, if You must interrupt Your Trip for a covered Political or Security Event and while traveling outside Your Home Country.

The Political or Security Evacuation must occur within 14 days of the Political or Security Event, and the arrangements will be by the most appropriate and by most efficient, practical and economical means available and consistent with Your health and safety.

Following the Political or Security Evacuation and when safety allows, We will pay for one-way economy transportation and Related Costs to return You to one of the following locations as chosen by You:

a. back to Your Home Country; or
b. back to Your Return Destination; or

c. to the Nearest Place of Safety necessary to ensure Your safety and well-being as determined by Us or Our designated Travel Assistance Services Provider.

POLITICAL OR SECURITY EVACUATION COVERAGE DEFINITIONS

Political or Security Evacuation means Your extraction from or within the Host Country due to an Occurrence that results in You being placed in imminent physical danger.

Political or Security Event means:

1. civil, military or political unrest for which a formal written recommendation from the appropriate local government authorities, or the U.S. State Department, for You to leave a country is issued;
2. You being expelled or declared a persona non-grata by a country You are visiting on Your Trip.

POLITICAL OR SECURITY EVACUATION COVERAGE CONDITIONS AND LIMITATIONS

1. We will not pay for any loss or expense recoverable under any other valid and collectible insurance or through an employer;
2. You will be responsible for all transportation and living costs while located at the safe haven;
3. We are not responsible for the availability, timing, quality, results of, or failure to provide any service caused by conditions beyond Our control. This includes Our inability to provide You an evacuation or any additional services when United States of America law, local laws or regulatory agencies prohibit the rendering of such evacuation or service. We will not cover a Political or Security Evacuation from OFAC designated countries;
4. We will not pay any costs or expenses arising from:
    a. Political or Security Evacuation when the Political or Security Event precedes Your arrival in the Host Country;
    b. We will not pay for any loss or expense arising from or attributable to: a) fraudulent or criminal acts committed or attempted by You; b) alleged violation of the laws of the country You are visiting, unless We determine such allegations to be fraudulent; or c) failure to maintain required documents or visas;
    c. We will not pay for any loss or expense arising from or attributable to: a) debt, insolvency, business or commercial failure; b) the repossession of any property; or c) Your non-compliance with a contract, license or permit;
    d. We will not pay for any loss or expense arising from or due to liability assumed by You under any contract.

Advance Payment: We will pay covered expenses directly to the service provider if You require a Political or Security Evacuation while on Your Trip, and the provider requires payment prior to service. This amount will be deducted from the benefit limit shown in the Schedule of Benefits. You agree to reimburse this payment to Us if: (a) You do not complete the claims process as outlined in the Payment of Claims section; or (b) it is determined that Your Political or Security Evacuation claim is not covered.

Right of Recovery: If, after a Political or Security Evacuation is completed, it becomes clear that You were an active participant in the events that led to a Political or Security Event, We have the right to recover all transportation and Related Costs from You.

Excess Provision: Benefits payable for the eligible expenses under this Political or Security Evacuation benefit is excess of any other forms of insurance will be limited to that part of the eligible expense, if any, which is in excess of the total benefits payable for the same Political or Security Evacuation under any other valid and collectible insurance or other indemnity. If the other valid and collectible insurance or indemnity provides benefits on an excess coverage basis, benefits will be paid first by Us or services plan whose coverage has been in effect for the longer period at the date of the Political or Security Evacuation.

For purposes of this benefit, Your entitlement to other valid and collectible insurance or indemnity will be determined as if this benefit did not exist and will not depend on whether timely application for benefits from other valid and collectible insurance or indemnity is made by or on behalf of You.

Benefits under this benefit will be reduced to the extent that benefits for expenses are covered by any other valid and collectible insurance or indemnity whether or not a claim is made for such benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

NATURAL DISASTER EVACUATION

We will pay, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for all reasonable Natural Disaster Evacuation expenses and Related Costs incurred for Your transportation, if You must interrupt Your Trip for a covered Natural Disaster Event and while traveling outside Your Home Country.

The Natural Disaster Evacuation must occur within 14 days of the Natural Disaster Event, and the arrangements will be by the most appropriate and by most efficient, practical and economical means available and consistent with Your health and safety.

Following the Natural Disaster Evacuation and when safety allows, We will pay for one-way economy transportation and Related Costs to return You to one of the following locations as chosen by You:

a. back to Your Home Country; or
b. back to Your Return Destination; or
c. to the Nearest Place of Safety necessary to ensure Your safety and well-being as determined by Us or Our designated Travel Assistance Services Provider.

NATURAL DISASTER EVACUATION COVERAGE DEFINITIONS

Natural Disaster Evacuation means Your extraction from or within the Host Country due to a Natural Disaster Event that results in You being placed in imminent physical danger.

Natural Disaster Event results in such severe and widespread damage that the area of damage is officially declared a disaster area by the appropriate local government authorities of the Host Country, and the area is deemed to be Uninhabitable or dangerous.

NATURAL DISASTER EVACUATION COVERAGE CONDITIONS AND LIMITATIONS

1. We will not pay for any loss or expense recoverable under any other valid and collectible insurance or through an employer;
2. You will be responsible for all transportation and living costs while located at the safe haven;
3. We are not responsible for the availability, timing, quality, results of, or failure to provide any service caused by conditions beyond Our control. This includes Our inability to provide You an evacuation or any additional services when United States of America law, local laws or regulatory agencies prohibit the rendering of such evacuation or service. We will not cover a Natural Disaster Evacuation from OFAC designated countries;
4. We will not pay any costs or expenses arising from:
    a. Natural Disaster Evacuation when the Natural Disaster Event precedes Your arrival in the Host Country;
    b. We will not pay for any loss or expense arising from or attributable to: a) fraudulent or criminal acts committed or attempted by You; b) alleged violation of the laws of the country You are visiting, unless We determine such allegations to be fraudulent; or c) failure to maintain required documents or visas;
    c. We will not pay for any loss or expense arising from or attributable to: a) debt, insolvency, business or commercial failure; b) the repossession of any property; or c) Your non-compliance with a contract, license or permit;
    d. We will not pay for any loss or expense arising from or due to liability assumed by You under any contract.

Advance Payment: We will pay covered expenses directly to the service provider if You require a Natural Disaster Evacuation while on Your Trip, and the provider requires payment prior to service. This amount will be deducted from the benefit limit shown in the Schedule of Benefits. You agree to reimburse this payment to Us if: (a) You do not complete the claims process as outlined in the Payment of Claims section; or (b) it is determined that Your Natural Disaster Evacuation claim is not covered.

Right of Recovery: If, after a Natural Disaster Evacuation is completed, it becomes clear that You were an active participant in the events that led to a Natural Disaster Evacuation, We have the right to recover all transportation and Related Costs from You.

Excess Provision: Benefits payable for the eligible expenses under this Natural Disaster Evacuation benefit is excess of any other forms of insurance will be limited to that part of the eligible expense, if any, which is in excess of the total benefits payable for the same Natural Disaster Evacuation under any other valid and collectible insurance or other indemnity. If the other valid and collectible insurance or indemnity provides benefits on an excess coverage basis, benefits will be paid first by Us or services plan whose coverage has been in effect for the longer period at the date of the Natural Disaster Evacuation.

For purposes of this benefit, Your entitlement to other valid and collectible insurance or indemnity will be determined as if this benefit did not exist and will not depend on whether timely application for benefits from other valid and collectible insurance or indemnity is made by or on behalf of You.

These benefits will be reduced to the extent that expenses are covered by any other valid and collectible insurance or indemnity whether or not a claim is made for such benefits.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

BAGGAGE AND PERSONAL EFFECTS

We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, if Your Baggage and Personal Effects, which are lost, stolen, damaged or destroyed during Your Trip less any amount paid or payable by a Common Carrier, hotel, Travel Supplier or any other party responsible for Your loss, provided You have taken all reasonable measures to protect, save and/or recover Your property at all times.

We will also reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for fees associated with the replacement of Your passport, visas and other travel documents which are lost, stolen, damaged or destroyed during Your Trip and for charges and interest incurred due to unauthorized use or replacement of Your lost or stolen credit cards if such use or loss occurs during Your Trip, subject to verification that You have complied with all conditions of the credit card company.

Valuation and Payment of Loss:

The lesser of the following amounts will be paid:

a. the Actual Cash Value as determined by Us; or
b. the cost to repair or replace the item with material of a like kind and quality.

not to exceed the Maximum Benefit Amount shown in the Schedule of Benefits.

For claimed items without original receipts, payment of loss will be calculated based upon 75% of the Actual Cash Value at the time of loss, not to exceed the Maximum Benefit Amount shown in the Schedule of Benefits. We may take all or part of the damaged items at the appraised or agreed value by Us.

In the event of a loss to a pair or set of items, We may choose to:

a) repair or replace any part to restore the pair or set to its value before the loss; or
b) pay the difference between the Actual Cash Value of the items before and after the loss.

Items subject to Special Limitations

The following items are subject to the maximum combined amount(s) shown in the Schedule of Benefits**:** jewelry, precious or semi-precious gems, decorative or personal articles consisting in whole or in part of silver, gold, or platinum, watches, furs or articles trimmed with fur, cameras and camera equipment, sports equipment and golf equipment.

These benefits will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

BAGGAGE DELAY

We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the cost of Necessary Personal Items purchased by You while on Your Trip, if Your Baggage is delayed or misdirected by a Common Carrier for at least 12 consecutive hours or more from Your time of arrival at a Scheduled Destination other than Your Return Destination.

We will also reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for expenses You incur during Your Trip to expedite the return of Your delayed Baggage.

This coverage terminates upon Your arrival at the Return Destination of Your Trip.

Necessary Personal Items means replacement for clothing, toiletry, prescriptions or eyewear, which are included in Your Baggage and Personal Effects and are required for Your Trip.

These benefit(s) will not duplicate any other benefits payable under the plan or any coverage(s) attached to the plan.

EXCLUSIONS AND LIMITATIONS apply to Baggage and Personal Effects:

We will not provide benefits for any loss or damage for the following items:

a. animals;
b. automobiles and automobile equipment;
c. boats or other vehicles or conveyances;
d. motorcycles;
e. trailers;
f. motors;
g. aircraft;
h. bicycles, except when checked as baggage with a Common Carrier;
i. household effects and furnishings;
j. antiques and collectors' items;
k. sunglasses, contact lenses, artificial teeth, dentures, dental braces, dental bridges, retainers or other orthodontic devices or hearing aids;
l. artificial limbs or other prosthetic devices;
m. prescribed medications;
n. keys, money, stamps and credit cards (except as otherwise specifically covered herein);
o. securities, stamps, tickets and documents (except as coverage is otherwise specifically provided herein);
p. professional or occupational equipment or property, whether or not electronic business equipment;
q. sports equipment if the loss results from the use thereof;
r. telephones or wireless devices, computer hardware or software.

Losses not covered:

We will not provide benefits for any loss or damage caused by or resulting from:

a. breakage of brittle or fragile articles;
b. wear and tear or gradual deterioration;
c. confiscation or appropriation by order of any government or custom's rule;
d. theft or pilferage while left in any unlocked vehicle;
e. property illegally acquired, kept, stored or transported;
f. Your negligent acts or omissions;
g. property shipped as freight or shipped prior to the Scheduled Departure Date;
h. electrical current, including electric arcing that damages or destroys electrical devices or appliances.

SECTION V GENERAL DEFINITIONS

Accident means a sudden, unexpected unusual specific event that occurs at an identifiable time and place, and shall also include exposure resulting from a mishap to a conveyance in which You are traveling.

Accommodation(s) means any establishment used for the purposes of temporary, overnight lodging such as apartment, condominium, or other vacation or timeshare residential unit(s).

Actual Cash Value means current replacement cost of such item of like kind and quality.

Additional Transportation Cost means the actual cost incurred for one-way economy transportation (or for the original class of fare, if the original tickets were for a higher class of fare) by Common Carrier by the most direct route, less any refunds paid or payable, for Your unused original tickets.

Adventure or Extreme Activities means B.A.S.E. jumping, free diving, bungee jumping, parachuting, skydiving, paragliding, hang gliding, heli-skiing, heli-snowboarding, wingsuit flying, rock climbing without equipment, Mountain Climbing over 9,000 feet (2,700 meters), motor sport or motor racing, multi-sport endurance competitions, scuba diving if the depth exceeds 131 feet (40 meters) and any activity materially similar to the above.

Air Common Carrier means an air conveyance operated under a license for the transportation of passengers for hire.

Baggage and Personal Effects means luggage and personal possessions taken by You on Your Trip, whether owned, borrowed, or rented and also includes the following items: travel documents.

Bankruptcy or Default means the total cessation of operations due to insolvency, with or without the filing of a bankruptcy petition or the total cessation or complete suspension of operations following the filing of a bankruptcy petition, whether voluntary or involuntary by an airline, cruise line, tour operator or other travel provider provided the Bankruptcy or Default occurs more than 14 days following Your Effective Date for Your Trip Cancellation Benefits.

Bankruptcy or Default does not include the total cessation or complete suspension of operations for losses caused by fraud or negligent misrepresentation by the supplier of travel services.

Business Partner means a person who is: (1) involved with You in a legal partnership; and (2) actively involved in the daily management of the business.

Child Caregiver means an individual providing basic childcare service needs for Your minor Children under the age of 18 while You are on Your Trip without the minor Children. Arrangements for having child caregiver services during Your Trip must be made 30 or more days prior to the Scheduled Departure Date.

Children/Child means a person:
1. which includes a natural child, stepchildren, and children subject to legal guardianship;
2. under age of 26;
3. placed for adoption and coverage is effective upon the earlier of: i. the date of placement for the purposes of adoption or ii. the date of the entry of an order granting the adoptive parent custody of the child for purposes of adoption and continues unless the placement is disrupted prior to legal adoption and the child is removed from placement.

The age limit does not apply to a child who is incapable of self-sustaining employment by reason of mental, intellectual or physical incapacity.

Civil Disorder or Riot means a public disturbance by a person or persons acting in revolt, coup, rebellion or resistance against an established government or civil authority or involvement in acts of violence that causes immediate danger, damage, or injury to others or their property.

Common Carrier means an air, land, or sea conveyance operated under a license for the transportation of passengers for hire not including taxicabs or rented, leased or privately owned motor vehicles.

Complications of Pregnancy means conditions (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include hyperemesis gravidarum, preeclampsia, eclampsia, gestational diabetes, gestational hypertension, acute nephritis,

nephrosis, cardiac decompensation, and missed abortion. Complications of pregnancy also include non-elective cesarean section, ectopic pregnancy which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.

Complications of pregnancy do not include Physician-prescribed rest during the period of pregnancy (except due to conditions noted above), false labor, occasional spotting, morning sickness, elective abortion, and similar conditions associated with the management of a difficult pregnancy, not constituting a categorically distinct complication of pregnancy.

Domestic Partner means an opposite or a same-sex partner who is at least eighteen (18) years of age and has met all of the following requirements for at least 6 months**:**

a) resides with You;
b) shares financial assets and obligations with You;
c) is not related by blood or adoption to You to a degree of closeness that would prohibit a legal marriage;
d) neither You nor domestic partner is married to anyone else, nor has any other domestic partner.

We may require proof of the Domestic Partner relationship in the form of a signed and completed Affidavit of Domestic Partnership or whatever documentation as required by the state in which You reside.

Effective Date means the date and time Your coverage begins, as indicated in When Coverage Begins and Ends section of this plan.

Elective Treatment And Procedures means any medical treatment or surgical procedure that is not medically necessary including any service, treatment, or supplies that are deemed by the federal, or a state or local government authority, or by Us to be research or experimental or that is not recognized as a generally accepted medical practice.

Family Member means the following relatives of You or Your Traveling Companion:

a) Spouse, civil union partner, or Domestic Partner;
b) children, children-in-law, step-children, foster children, ward or legal ward;
c) siblings, siblings-in-law, step-siblings;
d) parents, parents-in-law, step-parents, legal guardians, or guardians;
e) grandparents or grandchildren;
f) aunts or uncles;
g) nieces or nephews.

Home Country means the country or territory of residence or Your citizenship as shown on Your passport. If You have dual citizenship, for the purposes of this benefit, Your Home Country is the country of the passport You used to enter the Host Country, while covered under this plan.

Hospital means a facility that:

a. is licensed or recognized as a general hospital by the proper authority of the state in which it is located;
b. is recognized as a general hospital by the Joint Commission on the Accreditation of Hospitals;
c. operated for the care and treatment of resident in-patients with a registered graduate nurse (RN) always on duty and with a laboratory and X-ray facility.

A **Hospital** does not include:

1. a nursing, convalescent or geriatric unit of a Hospital when a patient is confined mainly to receive nursing care;
2. a facility which primarily treats drug, marijuana or alcoholism addictions;
3. a facility that is, other than incidentally, a clinic, a rest home, nursing home, convalescent home, home health care, or home for the aged, nor does it include any ward, room, wing or other section of the Hospital that is used for such purposes.

Hospitalized or Hospitalization means admitted to a Hospital overnight or where the patient is charged by the Hospital for a minimum of one day of inpatient charges.

Host Country means a country or territory You are visiting or in which You are living which is not Your Home County, other than an excluded country, while covered under this plan.

Host at Scheduled Destination means the person with whom You are sharing prearranged overnight Accommodations or has made previous arrangements to stay at the host's personal residence during Your Trip.

Inclement Weather means any severe weather condition that delays the scheduled arrival or departure of a Common Carrier or causes closure of public roadways by local or government authorities which prevents You from arriving at Your Scheduled Destination or attending in a non-refundable prepaid event or activity.

Injury(ies)/Injured means a bodily injury caused by an Accident occurring while Your coverage under this plan is in force and resulting directly and independently of all other causes of loss covered by this plan. Injury must not be caused by, or result from, Sickness. The injury(ies) requires examination and treatment and must be verified by a Physician.

Medically Fit to Travel means based on assessment by a treating Physician, following Your Injury or Sickness that occurs while on Your Trip, You are medically able to travel.

Medically Necessary means that a treatment, service, or supply:

a) is essential for diagnosis, treatment, or care of the Injury or Sickness for which it is prescribed or performed;
b) meets generally accepted standards of medical practice;
c) is ordered by a Physician and performed under his or her care, supervision, or order; or
d) is not used for the convenience of You, Physician, other providers, or any other person.

Mental, Nervous or Psychological Condition or Disorder means a mental or nervous health condition including, but not limited to: anxiety, depression, and neurosis, panic attack, phobia (such as fear of flying, fear of terrorism, fear of disease, etc.), psychosis; or any related physical manifestation. Mental, Nervous or Psychological Condition or Disorder does not include drug addiction, marijuana addiction, or alcohol addiction.

Mountain Climbing means the ascent or descent of a mountain requiring the use of specialized equipment, including, but not limited to, ropes, belay devices, pick-axes, anchors, pitons, bolts, crampons, carabiners, and lead or top-rope anchoring equipment.

Natural Disaster means a flood, tsunami, cyclone, hurricane, tornado, earthquake, mudslide, avalanche, landslide, volcanic eruption, sandstorm, sinkhole, named winter storm, severe hail storm, fire, wildfire or blizzard; all of which are due to natural causes.

Nearest Place of Safety means a location determined by Us or Our designated Travel Assistance Services Provider where:

a) You can be presumed safe from the Occurrence that precipitated Your security evacuation; and
b) You have access to transportation to Your Home Country; and
c) You have the availability of temporary lodging, if needed.

Occurrence means any of the following situations in which You find Yourself while covered by this plan:

a. expulsion from a Host Country or being declared persona non-grata on the written authority of the recognized government of a Host Country;
b. political or military events or Civil Disorder or Riot involving a Host Country, if the government authorities in Your Home Country or in the Host Country issue an advisory stating that citizens of Your Home Country or citizens of the Host Country should leave the Host Country;
c. Natural Disaster within 7 days of an event.

Payments or Deposits means:

the cash, check, or credit card amounts actually paid for Your Travel Arrangements. Certificates, vouchers, discounts and/or credits applied (in part or in full) towards the cost of Your Trip Travel Arrangements are not Payments or Deposits as defined herein.

the first payment made to Your Travel Supplier toward the cost of Your Trip, whether refundable or not. A "good faith deposit" or a "holding payment" is not considered the initial Trip payment until the payment is applied to confirmed dates of travel.

Partial Hospitalization means an outpatient program specifically designed for the diagnosis or active treatment of a serious mental disorder when there is a reasonable expectation for improvement or when it is necessary to maintain a

patient's functional level and prevent relapse or full hospitalization. Partial Hospitalization programs are usually furnished by a Hospital as distinct and organized intensive ambulatory treatment service of less than 24-hour daily care.

Physician means a licensed practitioner of medical, surgical, dental services or the healing arts including an accredited Christian Science Practitioner, acting within the scope of his/her license in the jurisdiction where the services are rendered. The treating Physician cannot be You, a Traveling Companion or a Family Member.

Pre-Existing Medical Condition means an illness, disease, or other condition during the 180-day period immediately prior to Your Trip Cancellation Effective Date for which You or Your Traveling Companion, Business Partner or Family Member scheduled or booked to travel with You:

1) received or received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute, or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or
2) took or received a prescription for drugs or medicine. Item (2) of this definition does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 180 day period before coverage is effective under this plan.
3) required a change in prescribed medication. Change in prescribed medication means the dosage or frequency of a medication has been reduced, increased, stopped and/or new medications have been prescribed due to the worsening of an underlying condition that is being treated with the medication, unless the change is:
    a) between a brand name and a generic medication with comparable dosage; or
    b) an adjustment to insulin or anti-coagulant dosage.

Death resulting from a pre-existing medical condition will not be excluded. Death must occur prior to the termination date of the benefit under which the claim is being made.

Primary Residence means Your fixed, permanent and main home for legal and tax purposes.

Quarantined means You are forced into isolation by a recognized government authority, their authorized deputies, medical examiners or Physician to prevent the spread of the disease due to You either having, or being suspected of having a contagious disease, infection or contamination.

An embargo preventing You from entering a country is not a quarantine.

Reasonable Additional Expenses means reasonable expenses for meals, taxi fares, local transportation, and lodging which are necessarily incurred as the result of a Common Carrier or Trip Delay and which are not provided by the Common Carrier or any other party free of charge.

Related Costs means food, lodging and if necessary, physical protection for You during the transport to the Nearest Place of Safety.

Rental Property means a hotel room, vacation home, or other rental property You booked for Your stay during Your Trip.

Return Destination means Your final destination as shown in the itinerary or other travel documents and the place to which You expect to return from Your Trip.

Scheduled Departure Date means the date on which You are originally scheduled to leave on Your Trip. This date is specified in the itinerary or other travel documents.

Scheduled Destination means as shown in the itinerary or other travel documents where You expect to travel to on Your Trip other than Return Destination.

Scheduled Return Date means the date on which You are originally scheduled to return from Your Trip to the point of origin or the last day of Your Trip.

Scheduled Trip Departure City means the city from which You are originally scheduled to depart on the Trip where the scheduled tour or cruise on which You are to participate originates.

Security Breach means any incident involving unauthorized and uncontrolled access by an individual or prohibited item into a sterile area or secured area of an airport that is determined by TSA or other airport security officials to present an immediate danger.

Sickness means an illness or disease of the body that requires examination, diagnosis and treatment by a Physician.

An illness or disease of the body that requires examination, diagnosis and treatment prior to the Effective Date of Your coverage is not a Sickness as defined herein and is not covered by the plan.

Sickness does not include any Mental, Nervous or Psychological, Condition or Disorders including but not limited to anxiety, depression, neurosis, phobia, psychosis; or any related physical manifestation. Sickness does not include drug addiction, marijuana addiction, or alcohol addiction.

Spouse means Your lawful spouse, if not legally separated or divorced. For the purposes of this plan, the term spouse includes civil union partner whenever used.

Strike means a labor disagreement resulting in a stoppage of work which:

a) is unannounced and unpublished at time this plan is purchased;
b) is organized, and legally sanctioned by a labor union or other organized association of workers, in a trade or profession, formed to protect and further their rights and interests; and
c) interferes with the normal departure and arrival of a Common Carrier.

Terrorist Incident means an act of violence by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent of overthrow or influence the control of any government or an act of violence committed by a Foreign Terrorist Organization (designated or recognized as such by the US State Department) that results in property damage, Injury or loss of life.

Third Party(ies) means any person, corporation or other entity (except You, Rental Property and Us).

Time Sensitive Period means insurance must be purchased within 14 days of the date Your initial Payments or Deposits for Your Trip is received.

Travel Arrangements means: (a) transportation; (b) Accommodations; and (c) other specified services arranged for Your Trip by Your Travel Supplier.

Travel Assistance Services Provider means the Assistance Company as listed within the Description of Coverage.

Traveling Companion means a person or persons whose name(s) appear(s) with Yours on the same Travel Arrangements and who, during Your Trip, will accompany You. A group or tour organizer, sponsor or leader is not a Traveling Companion as defined, unless sharing accommodations in the same room, cabin, condominium unit, apartment unit or other lodging with You.

Travel Supplier means any entity or organization that coordinates or supplies Travel Arrangements for You.

Trip means a scheduled Trip for which coverage is elected and the plan cost paid and all Travel Arrangements are arranged prior to the Scheduled Departure Date.

Trip Cost means the amount You paid for Your Travel Arrangements.

Unforeseen means not known, anticipated or reasonably expected, and occurring after the effective date of the benefit under which the claim is being made.

Uninhabitable means:

(1) the building structure itself is unstable and there is a risk of collapse in whole or in part; or
(2) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail or flood; or
(3) immediate safety hazards have yet to be cleared, such as debris or downed electrical lines; or
(4) the property is without electric, gas, sewer service or water; or
(5) local government authorities have issued a mandatory evacuation; or
(6) the destination is inaccessible by the mode of transportation as shown on the travel documents or itinerary.

Usual and Customary means the comparable level of charges for similar treatment, services and supplies in the geographic area where treatment, services or supplies are provided or performed.

You or Your means the person that is scheduled to participate on a Trip; for whom any required enrollment has been completed and the required plan cost has been paid.

SECTION VI EXCLUSIONS AND LIMITATIONS

Unless otherwise shown below, these exclusions apply to You, Your Traveling Companion, Family Member scheduled and booked to travel with You.

The following exclusion(s) appl(y)(ies) to the Trip Cancellation and Trip Interruption.

We will not pay for any loss or expense caused due to, arising or resulting from:

1. a Pre-Existing Medical Condition, as defined in the plan.

Death resulting from a Pre-Existing Medical Condition will not be excluded. Death must occur prior to the termination date of the benefit under which the claim is being made.

The following exclusions apply to the Medical and Dental Expense benefits.

We will not pay for any loss or expense caused due to, arising or resulting from:

1. routine physical examinations or routine dental care;
2. traveling for the purpose or intent of securing medical treatment or advice;
3. any Trip taken against the advice of a Physician and any losses occurred during such Trip;
4. Elective Treatment and Procedures;
5. care or treatment which is not Medically Necessary, except for related reconstructive surgery resulting from trauma, infection or disease that occurred during Your Trip;
6. any medical service provided by You, a Family Member, or Traveling Companion;
7. any treatment or medication which, at the time of Your Scheduled Departure Date, is required to be continued during Your Trip;
8. Alcohol or substance abuse or treatment for the same including admittance to a rehab facility;
9. Normal pregnancy (except Complications of Pregnancy) or childbirth, except as specifically covered under Trip Cancellation or Trip Interruption or elective abortion;
10. a Mental, Nervous or Psychological Condition or Disorder unless Hospitalized or Partially Hospitalized while the plan is in effect. Hospitalized or Partially Hospitalized requirement does not apply to dementia when death results;
11. any loss that results from an illness, disease or other condition, event or circumstance that occurs at a time when the plan is not in effect for You;
12. Your participation in Adventure or Extreme Activities, riding or driving in races, or participation in speed or endurance competition or events, except as a spectator;
13. diving if You are not certified to dive and a dive master is not present during the dive;
14. Your participation in an organized athletic or sporting competition, contest, or stunt under contract in exchange for an agreed-upon salary or compensation. This does not include athletes participating in exchange for a scholarship or tuition.

In addition to any applicable benefit-specific exclusion, the following general exclusions apply to all losses and all benefits.

We will not pay for any loss or expense caused due to, arising or resulting from:

1. suicide, attempted suicide or any intentionally self-inflicted injury of You, a Traveling Companion, Family Member or Business Partner booked and scheduled to travel with You, while sane or insane;
2. being under the influence of drugs, marijuana or narcotics, unless administered upon the advice of a Physician as prescribed;
3. activities, losses, or claims involving or resulting from possession, production, processing, sale, or use of marijuana, illegal drugs, alcohol or substances are excluded from coverage;
4. war or act of war, including invasion, acts of foreign enemies, hostilities between nations (whether declared or undeclared), or civil war, except as the plan specifically provides otherwise;
5. the commission of or attempt to commit a felony or being engaged in an illegal occupation by You, a Traveling Companion, Family Member, or Business Partner. The sole exception to this exclusion is for situations where a Family Member commits, or attempts to commit, an act of violence against another Family Member. In such cases, the Family Member who is the victim, or the intended victim, of the act of violence is still eligible to have his or her loss or losses covered under the plan;
6. piloting or learning to pilot or acting as a member of the crew of any aircraft;
7. a loss or damage caused by detention, confiscation or destruction by customs;
8. failure of any tour operator, Common Carrier, or other travel entity, person or agency to provide the bargained-for Travel Arrangements for reasons other than Bankruptcy or Default. Important: there is no coverage for losses due to, arising or resulting from the Bankruptcy or Default of Your Travel Supplier or any entity that sold, solicited, negotiated, offered or disseminated this plan to You or Your Traveling Companion.

MEDICALLY FIT TO TRAVEL EXCLUSION:

We will not pay any expense as a result of You having been advised in writing that You, Your Traveling Companion or Family Member scheduled and booked to travel with You are not Medically Fit to Travel at the time of purchase of coverage for a Trip, as defined in the plan.

If coverage for a Trip is purchased and it is later determined that You, Your Traveling Companion or Family Member scheduled and booked to travel with You were not Medically Fit to Travel at the time of purchase of coverage for Your Trip, as defined in the plan, the coverage is void and plan cost paid will be returned.

PRE-EXISTING MEDICAL CONDITION EXCLUSION WAIVER

We will waive the Pre-Existing Medical Condition exclusion if all of the following conditions are met:

a. Your plan cost for this plan is received within the Time Sensitive Period; and
b. You are medically able and not disabled from travel at the time Your plan cost is paid based on assessment of a Physician.

SECTION VII PLAN COST

PLAN COST: Coverage is not effective unless all plan cost due has been paid prior to the date of loss. In the event the plan cost paid for coverage is less than the required plan cost for coverage, benefits will be paid in direct proportion of the actual amount paid to the required plan cost due.

Grace Period: Notwithstanding any provision to the contrary, You are entitled to a grace period of 31 days for the payment of any plan cost due except the first, during which grace period the plan will continue in force, unless You have given Us written notice of discontinuance in advance of the date of discontinuance and in accordance with the terms of the plan. You are liable to Us for the payment of a pro rata plan cost for the time the plan was in force during the grace period. We are not obligated to pay claims incurred during the grace period until the plan cost due is received.

SECTION VIII CLAIMS PROCEDURES

Your duties in the event of a loss:

For Trip Cancellation and Trip Interruption You must:

Immediately, or as soon as possible, call Your Travel Supplier and the program administrator (see Where to Report a Claim) to report Your cancellation, interruption or delayed arrival to avoid non-covered charges due to late reporting.

If the Insured is prevented from taking their Trip as scheduled or must interrupt their Trip due to Sickness or Injury, the Insured should obtain medical care immediately. We require an examination and treatment by a Physician prior to cancellation or interruption unless it is not reasonably possible to do so. Provide all unused transportation tickets, official receipts, etc.

For Trip Delay or Missed Connection You must obtain any specific dated documentation, which provides proof of the reason for delay or missed connection (airline or cruise line forms, medical statements, etc.). Submit this documentation along with Your trip itinerary and all receipts for additional expenses incurred.

For Medical and Dental Expenses You must:

1. provide Us with all receipts from the provider of services and reports for medical and/or dental expenses claimed. Stating the amount paid and listing the diagnosis and treatment;
2. provide any requested information, including but not limited to, an explanation of benefits from any other applicable insurance. Provide a copy of their final disposition of Your claim;
3. sign a patient authorization to release any information required by Us to investigate Your claim.

For Baggage and Personal Effects

In case of lost, stolen, damaged, destroyed or delayed Baggage and Personal Effects, You must:

1. report theft losses to police or other local authorities as soon as possible and obtain their written report of Your loss;
2. report the baggage delay to the Common Carrier as soon as possible. Submit proof of the report, documentation confirming delivery as well as reimbursement and receipts for essential items;
3. take reasonable steps to protect Your Baggage and Personal Effects from further damage and make necessary and reasonable temporary repairs; (We will reimburse You for those expenses. We will not pay for further damage if You fail to protect Your items);
4. allow Us to examine the damaged Baggage and Personal Effects and/or We may require the damaged item to be sent in the event of payment;
5. in the event of theft or unauthorized use of Your credit cards, You must notify the credit card company immediately to prevent further unlawful activity;
6. original receipts (if available) and a complete list of stolen, damaged or lost item(s) must be provided along with proof of loss providing amount of loss, date, time and cause of loss, and a repair estimate, if the item(s) is damaged;
7. for claimed items without original receipts, payment of loss will be calculated based upon 75% of the Actual Cash Value at the time of loss, not to exceed the Maximum Benefit Amount shown in the Schedule of Benefits.

SECTION IX HOW TO FILE A CLAIM

Notice of Claim: Notice of claim must be reported to Us or Our authorized representative within 20 days after a loss occurs or as soon as is reasonably possible. You or someone on Your behalf may give the notice. The notice should be given to Us or Our authorized representative and should include sufficient information to identify You.

Claim Forms: When notice of claim is received by Us or Our authorized representative, forms for filing proof of loss will be furnished. If these forms are not sent within 15 days, the proof of loss requirements can be met by You sending Us a written statement of what happened. This statement must be received within the time given for filing Proof of Loss.

Proof of Loss: Proof of loss must be provided within 90 days after the date of the loss or as soon as is reasonably possible. Failure to furnish such proof within provided period will not invalidate nor reduce any claim if it shall be shown

not to have been reasonably possible to furnish such proof during that time. Proof of Loss must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

All claims require You to provide Co-ordinated Benefit Plans, LLC with the following: a Trip invoice, itinerary or confirmation showing details of Your Trip (dates of travel, destination, etc.); and any other information reasonably required to prove the loss.

Where to Report a Claim:

1. Mail: Co-ordinated Benefit Plans, LLC, On Behalf of United States Fire Insurance Company, P.O. Box 26222, Tampa, FL 33623
2. Telephone: (866) 695-7183 (direct dial (727) 285-8219)
   Hours of Operation:
   Monday, Tuesday, Wednesday, Friday 8:30am – 5:00pm (Eastern)
   Thursday 9:30am-5:00pm (Eastern)
3. E-mail: TravMarkClaims@cbpinsure.com
4. Fax: 1-800-560-6340

Time of Payment of Claims: Payment for any loss (other than loss for which the plan provides periodic payment) will be paid immediately upon receipt of due written proof of loss. If the plan provides for a periodic payment, it will not be paid less frequently than monthly. Any balance remaining unpaid upon the termination of liability when the plan provides periodic payment will be paid immediately upon receipt of due written proof.

Payment of Claims: Benefits for loss of life will be paid to Your designated beneficiary. If a beneficiary is not otherwise designated by You, benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

1. Your spouse;
2. Your child or children jointly;
3. Your parents jointly if both are living or the surviving parent if only one survives;
4. Your brothers and sisters jointly; or
5. Your estate.

All other benefits will be paid directly to You, unless otherwise directed. Any accrued benefits unpaid at Your death will be paid to Your estate. If You have assigned Your benefits, we will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment.

All or a portion of all benefits provided by the plan may, at Our option, be paid directly to the provider of the service(s) to You. All benefits not paid to the provider will be paid to You.

If any benefit is payable to: (a) an Insured who is a minor or otherwise not able to give a valid release; or (b) Your estate, We may pay any amount due under the plan to Your beneficiary or any relative whom We find entitled to the payment. Any payment made in good faith shall fully discharge Us to any party to the extent of such payment.

Benefit to Bailee: This insurance will in no way inure directly or indirectly to the benefit of any carrier or other bailee.

SECTION X GENERAL PROVISIONS

The Contract: The entire contract is made up of the Policy and amendments if applicable, the Policyholder's Master Application, a copy of which is attached and the Certificates of Insurance. This Policy may be changed, renewed, or ended without notice to or consent of any person with a beneficial interest in this Policy.

Certificates: The Company will issue Certificates to the Policyholder for their Insureds. Such Certificates will describe each person's benefits and rights under this Policy and to whom benefits shall be payable. A paper copy of the Certificate must be provided to the Insured if the Insured requests a paper copy.

Excess Insurance: Insurance provided by this plan shall be in excess of all other valid and collectible insurance or indemnity or as required by state law. If at the time of the occurrence of any loss there is other valid and collectible insurance or indemnity in place, We shall be liable only for the excess of the amount of loss, over the amount of such other insurance or indemnity, and applicable deductible. Recovery of losses from other parties does not result in a refund of plan cost paid.

Beneficiary Designation and Change: Your beneficiary(ies) is (are) the person(s) designated by and on file with Us or Our administrator. You are over the age of majority and legally competent may change Your beneficiary designation at any time, unless an irrevocable designation has been made, without the consent of the designated beneficiary(ies), by providing Us or Our administrator with a written request for change. When the request is received, whether You are then living or not, the change of beneficiary will relate back to and take effect as of the date of execution of the written request, but without prejudice to Us on account of any payment made by it prior to receipt of the request.

Clerical Error: We or Our authorized representative may make a clerical error in keeping the data. If so, when the error is found, the plan cost and/or benefits will be adjusted according to the correct data. An error will not end insurance validly in force, nor will it continue insurance validly ended.

Concealment and Misrepresentation: The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

Conformity with Statute: Terms of this plan that conflict with the laws of the state where it is delivered are amended to conform to such laws.

Data Needed: We or Our authorized representative will keep a record of all the data needed to compute plan cost and carry out the terms of this plan. We may examine such data at any reasonable time.

Economic or Trade Sanctions: Any payments under this plan will only be made in full compliance with all United States of America economic or trade sanction laws or regulations, including, but not limited to, sanctions, laws, and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"). Therefore, any expenses incurred or claims made involving travel that is in violation of such sanctions, laws and regulations will not be covered under this plan. For more information, You may consult the OFAC internet website at https://www.treasury.gov/about/organizational-structure/offices/Pages/Office-of-Foreign-Assets-Control.aspx.

Entire Contract: Changes: This plan and any other attachments are the entire contract of insurance. No agent or other person may change it in any way. Only an officer of the Company can approve a change. Any such change must be shown in this plan or its attachments.

Legal Actions Against Us: All plan terms will be interpreted under the laws of the state in which the plan was issued. No legal action may be brought to recover on the plan within 60 days after written Proof of Loss has been furnished. No legal action for a claim may be brought against Us after 3 years from the time written Proof of Loss is required to be furnished.

Limit on Agent's Authority: No agent may change or waive any provisions of this plan. Our office must approve any change or waiver in writing.

Misstatement of Age: If plan cost is based on age and You have misstated Your age, there will be a fair adjustment of plan cost based on Your true age. If the benefits for which You are insured are based on age and You have misstated Your age, there will be an adjustment of said benefit based on Your true age. We may require satisfactory proof of age before paying any claim.

Other Insurance with Us: You may be covered under only one travel plan with Us for each Trip. If You are covered under more than one such plan, You may select the coverage that is to remain in effect. In the event of death, the beneficiary or estate will make the selection. Plan cost paid (less claims paid) will be refunded for the duplicate coverage that does not remain in effect.

Statements Made by the Policyholder and the Insured: All statements made by the You are to be deemed representations and not warranties. No statement made by any person insured may be used in any contest unless a copy of the instrument containing the statement is or has been furnished to the insured person or, in the event of death or incapacity of the insured person, to the insured person's beneficiary or personal representative.

Subrogation: If We have made a payment for a loss under this coverage, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, We will be subrogated to that right. You shall help Us exercise Our rights in any reasonable way that We may request; nor do anything after the loss to prejudice Our rights; and in the event You recover damages from the Third Party responsible for the loss, You will hold the proceeds of the recovery for Us in trust and reimburse Us to the extent of Our previous payment for the loss. Our right of subrogation applies even if Your entire loss has not been compensated.

Physician Examination and Autopsy: We, at Our expense, may have You examined when and as often as is reasonable while the claim is pending. We may have an autopsy done (at Our expense) where it is not forbidden by law.

Termination of This plan: Termination of this plan will not affect a claim for loss, which occurs after You pay the plan cost and while the plan is in force.

Transfer of Coverage: Coverage under this plan cannot be transferred to anyone else.

INDIANA NOTICE

A person who believes he or she has been adversely affected by an unfair claim settlement practice under section 4.5 of Article 4, Chapter 1 [IC 27-4-1-4.5] of the Indiana Insurance Code may file a complaint with the Indiana Insurance Commissioner. If the commissioner believes an unfair claim settlement practice has occurred, the commissioner shall, within ten (10) business days from the date of receipt of a written complaint, deliver a copy of the complaint to the insurer and shall respond in writing to the complaining party, at the address provided in the complaint, advising the party of the following:

(1) The specific action taken by the department on the complaint.

(2) Any further investigations or other actions that are intended by the department.

An insurer who receives a written notice of complaint under subsection (a) shall promptly conduct an investigation of the matters alleged in the complaint. Within twenty (20) business days from the date of receipt of the complaint, the insurer shall provide to the commissioner and the complaining party a written report containing the following information:

(1) The specific reasons for actions taken by the insurer with respect to the claim.

(2) The specific reasons for any inaction by the insurer with respect to the claim.

(3) If the claim has not been settled, a good faith estimate of the time required for settlement.

An insurer who commits an unfair claims settlement practice or who fails to comply with this section is subject to action by the commissioner under section 6 of Article 4, Chapter 1 [IC 27-4-1-6] of the Indiana Insurance Code.

NOTICE OF PROTECTION PROVIDED BY THE

INDIANA LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION

This notice provides a brief summary of the Indiana Life and Health Insurance Guaranty Association ("ILHIGA") and the protection it provides for policyholders. ILHIGA was established to provide protection to policyholders in the unlikely event that your life, annuity or health insurance company becomes financially unable to meet its obligations. If this should happen, ILHIGA will typically arrange to continue coverage and pay claims, in accordance with Indiana law, with funding from assessments paid by other insurance companies.

Basic Protections Currently Provided by ILHIGA

Generally, an individual is covered by ILHIGA if the insurer was a member of ILHIGA and the individual lives in Indiana at the time the insurer is ordered into liquidation with a finding of insolvency. The coverage limits below apply only for companies placed in rehabilitation or liquidation on or after January 1, 2013.

Life Insurance

- $300,000 in death benefits
- $100,000 in cash surrender or withdrawal values

Health Insurance

- $500,000 in basic hospital, medical and surgical or major medical insurance benefits
- $300,000 in disability and long term care insurance
- $100,000 in other types of health insurance

Annuities

- $250,000 in present value of annuity benefits (including cash surrender or withdrawal values)
- $5,000,000 for covered unallocated annuities

The maximum amount of protection for each individual, regardless of the number of policies or contracts, is $300,000. Special rules may apply with regard to basic hospital, medical and surgical or major medical insurance benefits.

The protections listed above apply only to the extent that benefits are payable under covered policy(s). In no event will the ILHIGA provide benefits greater than those given in the life, annuity, or health insurance policy or contract. The statutory limits on ILHIGA coverage have changed over the years and coverage in prior years may not be the same as that set forth in this notice.

Note: Certain policies and contracts may not be covered or fully covered. For example, coverage does not extend to any portion(s) of a policy or contract that the insurer does not guarantee, such as certain investment additions to the account value of a variable life insurance policy or variable annuity contract.

To learn more about the protections provided by ILHIGA, please visit the ILHIGA website at www.inlifega.org or contact:

Indiana Life & Health Insurance
Guaranty Association
3502 Woodview Trace, Suite 100
Indianapolis, IN 46268
317-636-8204

Indiana Department of Insurance
311 W. Washington Street, Suite 300
Indianapolis, IN 46204-2787
317-232-2395

The policy or contract that this notice accompanies might not be fully covered by ILHIGA and even if coverage is currently provided, coverage is (a) subject to substantial limitations and exclusions (some of which are described above), (b) generally conditioned on continued residence in Indiana, and (c) subject to possible change as a result of future amendments to Indiana law and court decisions.

Complaints to allege a violation of any provision of the Indiana Life and Health Insurance Guaranty Association Act must be filed with the Indiana Department of Insurance, 311 W. Washington Street, Suite 103, Indianapolis, IN 46204; (telephone) 317-232-2385.

Insurance companies and agents are not allowed by Indiana law to use the existence of ILHIGA or its coverage to encourage you to purchase any form of insurance. (IC 27-8-8-18(a)). When selecting an insurance company, you should not rely on ILHIGA coverage. If there is any inconsistency between this notice and Indiana law, Indiana law will control.

Questions regarding the financial condition of a company or your life, health insurance policy or annuity should be directed to your insurance company or agent.

FACTS

WHAT DOES CRUM & FORSTER DO WITH YOUR PERSONAL INFORMATION?

Rev. August 1, 2025

Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and income
- credit scores and credit-based insurance scores
- insurance claim history and employment information

How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Crum & Forster chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Crum & Forster share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes— information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes— information about your creditworthiness	No	We don't share
For our affiliates to market to you	Yes	Yes
For nonaffiliates to market to you	No	We don't share

To limit our sharing

☐ Call 844.254.5754
☐ Email us at: CFChiefLegalOfficer@cfins.com

Please note: If you are a *new* customer, we can begin sharing your information 30 days from the date we sent this notice. When you are no longer our customer, we continue to share your information as described in this notice.

However, you can contact us at any time to limit our sharing.

Questions

Call 844.254.5754 or email us at: CFChiefLegalOfficer@cfins.com unless you provide a separate FCRA opt out form.

Who are we	
Who is providing this notice?	Crum & Forster and its affiliates.
What we do	
How does Crum & Forster protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with applicable federal and state law.These measures include computer safeguards and secured filesand buildings.
How does Crum & Forster collect my personal information?	We collect your personal information, for example, when you ■ apply for insurance or pay insurance premiums ■ file an insurance claim or give us your contact information ■ provide employment information We also collect your personal information from others, such as credit bureaus, affiliates or other companies.
Why can't I limit all sharing?	Federal law gives you the right to limit only ■ sharing for affiliates' everyday business purposes—information about your creditworthiness ■ affiliates from using your information to market to you ■ sharing for nonaffiliates to market to you State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.
Definitions	
Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. ■ *Our affiliates include: United States Fire Insurance Company, The North River Insurance Company, Crum & Forster Indemnity Company, Seneca Insurance Company, Inc., Travel Insured International, Inc., Monitor Life Insurance Company of New York, MTAW Insurance Company, Bail USA, Inc. and any other company within the Crum & Forster group of companies.*
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. ■ *Crum & Forster does not share with nonaffiliates so they can market to you.*
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. ■ *Crum & Forster doesn't jointly market.*

Other important information

For Insurance Customers in AZ, CT, GA, IL, ME, MA, MN, MT, NV, NJ, NC, OH, OR and VA only. The term "Information" in this section means customer information obtained in an insurance transaction. We may give your Information to state insurance officials, law enforcement, group policy holders about claims experience or auditors as the law allows or requires. We may give your Information to insurance support companies that may keep it or give it to others. We may share medical information, so we can learn if you qualify for coverage, process claims or prevent fraud or if you say we can.

To see your Information, submit a request via email to CFChiefLegalOfficer@cfins.com. You must state your full name, address, the insurance company, policy number (if relevant) and the Information you want. We will tell you what Information we have. You may see and copy the Information (unless privileged) at our office or ask that we mail you a copy for a fee. If you think any Information is wrong, you must write us. We will let you know what actions we take. If you do not agree with our actions, you may send us a statement.

For California Residents only. We will not share information we collect about you with nonaffiliated third parties, except as permitted by California law. We will limit sharing among our affiliates to the extent required by California law. We do not share information about creditworthiness. For further information visit our website.

You have the right to submit a written request to access, correct, amend, or delete certain personal information we collect about you. To submit a request please write your request and send it to the following privacyinformation@cfins.com. You have the right to receive a response to your request within 30 business days of the date of the submission of your request to access, correct, amend, or delete your personal information. If we refuse your request, you have the right to file a statement regarding what you believe to be accurate and fair information and why you disagree with our response. For more information see C&F's Model 670 Notice at https://www.cfins.com/onlineprivacypolicy/glba/cfmodel670/

For Massachusetts Residents only. You may ask in writing for the specific reasons for an adverse underwriting decision. An adverse underwriting decision is where we decline your application for insurance, offer to insure you at a higher than standard rate or terminate your coverage.

For Nevada Residents only. We are providing you this notice under state law. Nevada law requires we provide the following contact information: Bureau of Consumer Protection, Office of the Nevada Attorney General, 555 E. Washington St., Suite 3900, Las Vegas, NV 89101; Phone number: 702.486.3132; email: aginfo@ag.nv.gov; Crum & Forster: Legal Department, P.O. Box 1973, 305 Madison Avenue, Morristown, NJ 07962, 844.254.5754, CFChiefLegalOfficer@cfins.com.

For North Dakota Residents only. We will not share information we collect about you with nonaffiliated third parties, except as permitted by North Dakota law. We will limit sharing among our affiliates to the extent required by North Dakota law. For further information visit our website.

For Vermont Residents only. Under Vermont law, we will not share information we collect about Vermont residents with companies outside of our affiliates, unless the law allows. We will not disclose information about your creditworthiness to our affiliates and will not disclose your personal information, financial information, credit report, or health information to nonaffiliated third parties to market to you, other than as permitted by Vermont law, unless you authorize us to make those disclosures. Additional information concerning our privacy policies can be found on our website.

CONSUMER DISCLOSURE INFORMATION

This plan provides insurance coverage that only applies during the covered trip. You may have coverage from other sources that provides you with similar benefits but may be subject to different restrictions depending upon your other coverages. You may wish to compare the terms of this policy with your existing life, health, home, and automobile insurance policies. If you have any questions about your current coverage, call your insurer or insurance agent or broker.

Purchasing travel insurance is not required in order to purchase any other products or services offered by the Travel Retailer.

What A Travel Retailer May Do:

Employees of a Travel Retailer may transact Travel Insurance on our behalf and under our direction, including:

1. Offering/disseminating information on our behalf, including brochures, buyer guides, descriptions of coverage, and price;
2. Referring specific coverage/feature/benefit questions to us;
3. Disseminating/processing applications for coverage, coverage selection forms, or other similar forms;
4. Collecting premiums on our behalf; and
5. Receiving/recording information to share with us.

What A Travel Retailer May Not Do:

The Travel Retailer's employees:

1. are not qualified or authorized to answer technical questions about the benefits, exclusions or conditions of any of the insurance offered by the Travel Retailer; or
2. to evaluate the adequacy of a prospective insured's existing insurance coverage.

Definitions:

"Travel Insurance" means coverage for personal risks incidental to planned travel, including one or more of the following:

Interruption or cancellation of a trip or event;
Loss of baggage or personal effects;
Damage to accommodations or rental vehicles; or
Sickness, accident, disability, or death occurring during travel.

The following are excluded from the definition of Travel Insurance: Major medical plans, which provide comprehensive medical protection for travelers on trips lasting 6 months or longer (e.g. working overseas, deployed military personnel, etc.). In some States, Damage waiver contracts that are part of a rental company's agreement. The phrase "damage waiver" or "collision damage waiver" cannot be used to describe travel insurance coverage, but the travel insurance contract may otherwise refer to "damage waiver" or "collision damage waiver" provided by a rental company.

"We, Us or Our" means Travmark.com, Inc.

DISCLOSURE TO CALIFORNIA RESIDENTS: [1754(a)(7) & (8)]

1. Purchasing travel insurance is not required in order to purchase any other product or service offered by the travel retailer.
2. Your travel retailer may not be licensed to sell insurance, and is therefore not qualified or authorized to:
   a. Answer technical questions about the benefits, exclusions, and conditions of any of the insurance offered by
      the travel retailer.
   b. Evaluate the adequacy of your existing insurance coverage.

This plan provides insurance coverage that only applies during the covered trip. You may have coverage from other sources that provide you with similar benefits but may be subject to different restrictions depending upon your other coverages. You may wish to compare the terms of this policy with your existing life, health, home and automobile insurance policies. If you have any questions about your current coverage, call your insurer or insurance agent or broker.

DISCLOSURE TO DELAWARE RESIDENTS: [1772(2)a.7.]

The insurance coverage may duplicate existing coverages you may have. You may wish to compare the terms of this policy with your existing life, health, home and automobile policies, and other sources of protection.

DISCLOSURE TO MARYLAND RESIDENTS: [10-122 (d)(1)(ii)(4)]

This insurance coverage may duplicate certain provisions of insurance coverage already provided by your homeowner's, renter's or similar coverages or insurances, and that the purchase of travel insurance would make travel insurance primary to any other duplicate or similar coverage.

DISCLOSURE TO NEW YORK RESIDENTS: [194 § 30.3(a)]

New York Residents: Licensed producers represent the insurer(s) for the sale of the insurance. Travmark.com, Inc. is a program manager and may also act as a producer. Compensation paid to a producer will vary depending upon the policy purchased, the producer's expenses, volume of business, or profitability. Upon request, the purchaser can obtain additional information about the producer's compensation for the insurance offered.

Travel Assistance Program Description – Provided by On Call International

Emergency Transportation Services:
Emergency Medical Evacuation/Medically-Necessary Repatriation • Repatriation of Mortal Remains • Transportation after Stabilization • Visit by Family Member/Friend • Return of Dependent Children

Travel Support Services
Medical Monitoring • Hotel Arrangements for Convalescence • Medical and Dental Search and Referral • Advance of Emergency Medical Expenses • Assistance with Replacement Medication, Medical Devices, and Eyeglasses or Corrective Lenses • Transfer of Insurance Information and Medical Records • Assistance with Emergency Travel Arrangements • Interpretation/Translation • Locating Lost or Stolen Items • Emergency Cash Advance

FOR 24/7 TRAVEL ASSISTANCE SERVICES ONLY
CALL TOLL FREE:
888-699-0413 (within the United States and Canada)
OR CALL COLLECT:
978-651-1218 (From all other locations)

Travel Assistance Services Details
Travel Support Services

- Interpretation/Translation: Upon request, On Call will assist with telephone interpretation in all major languages. If you require ongoing or more complex translation services, On Call will refer you to local translators.
- Locating Lost or Stolen Items: On Call will assist in locating lost luggage, and help you coordinate the replacement of transportation tickets, travel documents or credit cards.
- Medical Monitoring: During the course of a medical emergency resulting from an accident or sickness, On Call will monitor your case to determine whether the care is adequate from a Western Medical perspective.
- Medical and Dental Search and Referral: On Call will assist you in finding physicians, dentists and medical facilities in the area where you are traveling.
- Advance of Emergency Medical Expenses: On Call will advance on-site emergency inpatient medical payments to secure admit or discharge upon receipt of satisfactory assignment of benefits from you, a family member or friend. Assignment of benefits allows Insurer to claim with the Insured's primary insurance when hospital refuses admission or discharge.
- Assistance with Replacement Medication, Medical Devices, and Eyeglasses or Corrective Lenses: On Call will arrange to fill a prescription that has been lost, forgotten, or requires a refill, subject to local law, whenever possible. On Call will also arrange for shipment of replacement eyeglasses/corrective lenses or medical devices. You are responsible for payments of all costs related to these services.
- Transfer of Insurance Information and Medical Records: Upon your request, On Call will help relay insurance information during your hospital admission and assist with transferring your medical information and records to your treating physician.
- Assistance with Vaccine and Blood Transfers: If based upon your physician's prescription, needed vaccines or blood products are not available locally, On Call will coordinate the transfer where possible and permissible by law. You are responsible for all expenses related to this service.

Non-Insurance Personal Assistance Services

These are Non-Insurance Services provided by On Call International:

- Pre-Trip Information: Upon request, On Call will provide information services such as: visa and passport requirements, health hazard advisories, currency exchange, inoculation and immunization requirements, temperature and weather conditions and embassy and consulate referrals.
- Interpretation/Translation: If during your Trip you need an interpretation, On Call will assist with telephone interpretation in all major languages. If you require ongoing or more complex translation services, On Call will refer you to local translators.
- Legal Referral/Bail: Upon request, On Call will provide you with referrals to a local lawyer. All costs associated with this service are your responsibility. In case of your incarceration, On Call will notify the proper embassy or consulate, arrange the receipt of funds from third party sources and locate an attorney and bail bonds, where permitted by law, with satisfactory guarantee of reimbursement from you, family member or friend. You are responsible for associated fees.
- Emergency Cash Advance: On Call will advance up to $500 after satisfactory guarantee of reimbursement from you. Any fees associated with the transfer or delivery of funds are your responsibility.