

# Travel Max

Travel Protection Plan  
Certificate of Insurance

## TRAVEL MAX TRAVEL PROTECTION PLAN

### UNDERWRITTEN BY:

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

(Hereinafter referred to as “the Company”)

### DESCRIPTION OF COVERAGE

Plan Number: UMTM 0710

This Description of Coverage is a summary of the travel insurance benefits underwritten by United States Fire Insurance Company, herein referred to as the Company and also referred to as We, Us and Our. Notice: Provisions may vary by Your state of residence. Contact Travelex Insurance Services if You have questions.

Insurance provided by this Description of Coverage is subject to all of the terms and conditions of the Group Policy. If there is a conflict between the Policy and this Description of Coverage, the Policy will govern.

### IMPORTANT NOTES

Please take Your Confirmation of Coverage and this Certificate of Insurance with You on Your Trip. Refer to Your Confirmation of Coverage for Your specific protection plan benefits and limits.

Note: Certain capitalized words are defined terms within this document.

If You are not satisfied for any reason, You may return Your certificate to Travelex Insurance Services within 10 days after receipt. Your plan payment will be refunded, provided there has been no incurred covered expense. When so returned, the certificate is void from the beginning.

Base Plan Benefits	Maximum Benefit Amount
Trip Cancellation	100% of Trip Cost
Trip Interruption	150% of Trip Cost
Cancel For Any Reason*	50% of Non-Refundable Trip Cost
Trip Delay	\$1,000
Missed Connection	\$1,000
Accident & Sickness Medical Expense	\$100,000
Emergency Medical Evacuation & Return of Mortal Remains	\$1,000,000
Accidental Death & Dismemberment	
• 24-Hour Other Than Common Carrier	\$25,000
• Common Carrier Only	\$50,000
• Air Flight	\$200,000 Per Person/ \$1,000,000 Per Occurrence
Baggage & Personal Effects	\$2,500
Business Personal Property	\$500 (\$150 deductible)
Baggage Delay	\$600
Collision Damage Waiver	\$50,000
Roadside Assistance Service	Included
Identity Theft Services	Included
Travel Assistance & Concierge	Included

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\* This Cancel For Any Reason Benefit is only included for Trips of \$20,000 or less per person in cost. If the per person Trip Cost is more than \$20,000, the Optional Cancel for Any Reason Pak must be purchased to have Cancel For Any Reason coverage.

For Residents of:  
New Hampshire, New York & Washington



Insurance Services

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# GENERAL DEFINITIONS

**Additional Transportation Cost:** means the actual cost incurred for one-way Economy Transportation by a Common Carrier reduced by the value of an unused travel ticket.

**Baggage and Personal Effects:** means luggage, personal possessions and travel documents taken by You during a Trip.

**Bankruptcy:** means the filing of a petition for voluntary or involuntary bankruptcy in a court of competent jurisdiction under Chapter 7 or Chapter 11 of the United States Bankruptcy Code 11 L.S.C. Subsection 101 et seq.

**Business Partner:** means an individual who (a) is involved in a legal general partnership with You and/or (b) is actively involved in the day to day management of Your business.

**Common Carrier:** means any land, sea, and/or air conveyance operating under a valid license for the transportation of passengers for hire.

**Default:** means a material failure or inability to provide contracted services.

**Domestic Partner:** means a person who is at least eighteen years of age and can show: (1) evidence of financial interdependence, such as joint bank accounts or credit cards, jointly owned property, and mutual life insurance or pension beneficiary designations; (2) evidence of continuous cohabitation throughout the 180 day period prior to Your Effective Date of the Plan; and (3) an affidavit of domestic partnership if recognized by the jurisdiction within which they reside.

**Economy Transportation:** means the lowest published available transportation rate for a ticket on a Common Carrier matching the original class of transportation that You purchased for the Trip.

**Exotic Vehicles:** includes Alfa Romeo, Aston Martin, Auburn, Avanti, Bentley, Bertone, BMC/Leyland, BMW M Series, Bradley, Bricklin, Clenet, Corvette, Cosworth, De Lorean, Excalibre, Ferrari, Iso, Jaguar, Jensen Healy, Lamborghini, Lancia, Lotus, Maserati, Mercedes Benz, MG, Morgan, Pantera, Panther, Pininfarina, Porsche, Rolls Royce, Rover, Stutz, Sterling, Triumph, and TVR, or any other car with a Manufacturers Suggested Retail Price (MSRP) over \$50,000.

**Family Member:** means any of the following who resides in the United States, Canada, or Mexico: Your or Your Traveling Companion's: legal spouse (or common-law spouse where legal), legal guardian, son or daughter (adopted, foster, step or in-law), brother or sister (includes step or in-law), parent (includes step or in-law), grandparent (includes in-law), grandchild, aunt, uncle, niece or nephew, Domestic Partner, whether or not they travel with You.

**Hospital:** means (a) a place which is licensed or recognized as a general hospital by the proper authority of the state in which it is located; (b) a place operated for the care and treatment of resident inpatients with a registered graduate nurse (RN) always on duty and with a laboratory and X-ray facility; (c) a place recognized as a general hospital by the Joint Commission on the Accreditation of Hospitals. Not included is a hospital or institution licensed or used principally: (1) for the treatment or care of drug addicts or alcoholics; or (2) as a clinic, continued or extended care facility, skilled nursing facility, convalescent home, rest home, nursing home or home for the aged.

**Inclement Weather:** means any weather condition that delays the scheduled arrival or departure of a Common Carrier.

**Injury or Injuries:** means accidental bodily injuries: (a) received while insured under the Policy and any attached coverages; (b) resulting in loss independently of sickness and all other causes; and (c) not excluded from coverage.

**Insured:** means the person who purchased the Trip and who has paid the required plan cost for the protection plan provided herein, and also referred to as You and Your.

**Intoxicated:** means a blood alcohol level that equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where You are located at the time of an incident.

**Legally Qualified Physician:** means a physician or a Christian Science Practitioner: (a) other than You, a Traveling Companion or a Family Member; (b) practicing within the scope of his/her license; and (c) recognized as a physician in the place where the services are rendered.

**Maximum Benefit Amount:** means the maximum amount payable for coverage provided to You as shown in the Schedule of Benefits.

**Medical Treatment:** treatment, advice or consultation by a Legally Qualified Physician.

**Medically Necessary:** means a service or supply which: (a) is recommended by the attending Legally Qualified Physician; (b) is appropriate and consistent with the diagnosis in accord with accepted standards of community practice; (c) could not have been omitted without adversely affecting Your condition or quality of medical care; (d) is delivered at the most appropriate level of care and not primarily for the sake of convenience; and (e) is not considered experimental unless coverage for experimental services or supplies is required by law.

**Pre-Existing Condition:** means any injury, sickness or condition (including any condition from which death ensues) of You, Your Traveling Companion, or Your or Your Traveling Companion's Family Member traveling with You which within the 60 day period prior to the effective date of Your Trip Cancellation coverage under the Policy: (a) manifested itself, became acute or exhibited symptoms which would have caused one to seek diagnosis, care or treatment; (b) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or (c) required medical treatment or treatment was recommended by a Legally Qualified Physician.

**Program Medical Advisor:** means On Call International, LLC.

**Scheduled Departure Date:** means the date on which You are originally scheduled to leave on the Trip.

**Scheduled Return Date:** means the date on which You are originally scheduled to return to the point of origin or the original final destination.

**Sickness:** means an illness or disease that is diagnosed or treated by a Legally Qualified Physician after the effective date of insurance and while You are covered under the Policy.

**Strike:** means any stoppage of work: (a) as a result of a combined effort of workers which was unannounced and unpublished at the time travel services were purchased; and (b) which interferes with the normal departure and arrival of a Common Carrier.

**Terrorist Incident:** means an incident deemed a terrorist act by the United States Government that causes property damage and loss of life.

**Third Party:** means a person or entity other than You or the Company.

**Transportation Expense:** means (a) the cost of conveyance of You and any medical personnel (if Medically Necessary); and (b) Medically Necessary services or supplies.

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

**Traveling Companion:** means a person or persons with whom You have coordinated Travel Arrangements and intend to travel with during the Trip.

**Travel Supplier:** means any entity or organization that coordinates or supplies travel services for You.

**Trip:** means scheduled trips, tours or cruises for which: (a) coverage is requested; and (b) the required premium is submitted prior to the Scheduled Departure Date.

**Usual and Customary Charges:** means those comparable charges for similar treatment, services and supplies in the geographic area where treatment is performed.

## WHEN COVERAGE BEGINS AND ENDS

### YOUR TERM OF COVERAGE:

#### FOR TRIP CANCELLATION

Coverage begins on Your "Effective Date" which is at 12:01 a.m. on the date the appropriate cost for this policy for Your Trip is received and ends at the point and time of departure on Your Scheduled Departure Date.

#### FOR TRAVEL DELAY

Coverage is in force while en route to and from and during the Trip.

#### FOR ALL OTHER COVERAGES

All Other Benefits begin on 12:01 a.m. on Your Scheduled Departure Date. Coverage ends at the point and time of return on Your Scheduled Return Date.

In the event the Scheduled Departure Date and/or the Scheduled Return Date are delayed, or the point and time of departure and/or point and time of return are changed because of circumstances over which neither the Travel Supplier nor You have control, Your term of coverage shall be automatically adjusted in accordance with the Travel Supplier's notice to Us of the delay or change.

## GENERAL PROVISIONS

### NOTICE OF CLAIM

Notice of claim must be reported 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 the Company or designated representative and should include sufficient information to identify You.

### 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. Proof must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

### LEGAL ACTIONS

No legal action for a claim can be brought against Us until 60 days after We receive proof of loss. No legal action for a claim can be brought against Us more than 2 years after the time required for giving proof of loss. This 2 year time period is extended from the date proof of loss is filed and the date the claim is denied in whole or in part.

### 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.

### OTHER INSURANCE WITH THE COMPANY

You may be covered under only one travel policy with the Company for each Trip. If You are covered under more than one such policy, You may select the coverage that is to remain in effect. In the event of death, the selection will be made by the beneficiary or estate. Premiums paid (less claims paid) will be refunded for the duplicate coverage that does not remain in effect.

### SUBROGATION

If the Company has 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, the Company will

be subrogated to that right. You shall help the Company exercise the Company's rights in any reasonable way that the Company may request; not do anything after the loss to prejudice the Company's 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 the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss.

### REDUCTIONS IN THE AMOUNT OF INSURANCE

The applicable benefit amount will be reduced by the amount of benefits, if any, previously paid for any loss or damage under this coverage for this Trip.

### ADDITIONAL CLAIMS PROVISIONS SPECIFIC TO BAGGAGE

Your Duties after Loss of or Damage to Property or Delay of Baggage: In case of loss, theft, damage or delay of baggage or personal effects, You must:

- (a) take all reasonable steps to protect, save or recover the property;
- (b) promptly notify, in writing, either the police, hotel proprietors, ship lines, airlines, railroad, bus, airport or other station authorities, tour operators or group leaders, or any Common Carrier or bailee who has custody of Your property at the time of loss;
- (c) produce records needed to verify the claim and its amount and permit copies to be made;
- (d) provide to the Company, within 90 days from the date of loss, a detailed proof of loss signed and sworn to; and
- (e) be examined, if requested.

### ADDITIONAL CLAIMS PROVISIONS SPECIFIC TO COLLISION DAMAGE WAIVER

The following outlines Your duties in the event of any damage to the vehicle. You must:

- (a) take all necessary and reasonable steps to protect the vehicle and prevent further damage to it;
- (b) report the loss to the appropriate local authorities and the rental company as soon as possible;
- (c) obtain all information on any other party involved in the Accident, such as name, address, insurance information and driver's license number;
- (d) provide Us all documentation such as rental agreement, police report and damage estimate.

## BENEFITS

### TRIP CANCELLATION OR TRIP INTERRUPTION

#### TRIP CANCELLATION

Benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, to cover You for the unused non-refundable prepaid expenses for Travel Arrangements, including up to \$200 for the cost of airline-imposed fees to rebook frequent flyer miles for air flights to join Your Trip when You are prevented from taking Your Trip due to:

1. Death involving You or Your Traveling Companion or Your or Your Traveling Companion's Business Partner or Your Family Member;
2. A covered Sickness or Injury involving You, Your Traveling Companion or Business Partner, or Your Family Member which necessitates Medical Treatment at the time of cancellation and results in medically imposed restrictions, as certified by a Legally Qualified Physician, which prevents Your participation in the Trip; or
3. For the **OTHER COVERED REASONS** listed below; provided such circumstances occurred after Your Effective Date.

The maximum payable under this benefit is the lesser of a) the Maximum Benefit Amount shown in the Schedule of Benefits; or b) the total amount of coverage You purchased.

Benefits will be paid, up to \$200, for the cost of an airline-imposed change or reissue fee if Your Trip is cancelled by a Travel Supplier of land or water Travel Arrangements.

#### TRIP INTERRUPTION

Benefits will be paid, up to the Maximum Benefit Amount, for the non-refundable, unused portion of the prepaid expenses for land or water Travel Arrangements and the Additional Transportation Cost paid to return home or rejoin the Trip, when You are prevented from completing Your Trip due to:

1. Death involving You or Your Traveling Companion or Your or Your Traveling Companion's Business Partner or Your Family Member;
2. A covered Sickness or Injury involving You, Your Traveling Companion or Business Partner, or Your Family Member which necessitates Medical Treatment at the time of interruption and results

in medically imposed restrictions, as certified by a Legally Qualified Physician, which prevents Your continued participation in the Trip; or

3. For the **OTHER COVERED REASONS** listed below; provided such circumstances occurred after Your Effective Date.

#### **ADDITIONAL TRIP INTERRUPTION BENEFITS**

If Your Traveling Companion must remain hospitalized, benefits will also be paid for reasonable accommodation and transportation expenses incurred by You to remain with Your Traveling Companion up to \$100 per day.

If You cannot continue travel 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 Legally Qualified Physician, benefits will be paid for additional hotel nights up to \$100 per day.

The maximum payable under this benefit is the lesser of a) the Maximum Benefit Amount shown in the Schedule of Benefits; or b) 150% of the amount of coverage You purchased.

#### **OTHER COVERED REASONS MEANS:**

- (a) You or Your Traveling Companion being hijacked, quarantined, required to serve on a jury (notice of jury duty must be received after Your Effective Date) served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
- (b) Your or Your Traveling Companion's principal place of residence or destination being rendered uninhabitable by fire, flood, burglary or other natural disaster within 10 days of departure;
- (c) a permanent transfer of employment of 250 miles or more;
- (d) You or Your Traveling Companion being directly involved in a traffic accident, which must be substantiated by a police report, while en route to Your scheduled point of departure;
- (e) unannounced Strike that causes complete cessation of services of Your Common Carrier for at least 24 consecutive hours;
- (f) Inclement Weather that causes complete cessation of services of Your Common Carrier for at least 24 consecutive hours;

- (g) involuntary employer termination or layoff affecting You or a person(s) sharing the same room with You during Your Trip. Employment must have been with the same employer for at least 3 continuous years;
- (h) Bankruptcy or Default of an airline, cruise line, tour operator or travel supplier (other than the tour operator or travel agency from whom You purchased Your Travel Arrangements) causing a complete cessation of travel services more than 14 days following Your Effective Date. 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;
- (i) Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them;
- (j) felonious assault of You or Your Traveling Companion within 10 days of the Scheduled Departure Date;
- (k) a cancellation of Your Trip if Your arrival on the Trip is delayed and causes You to lose 50% or more of the scheduled Trip duration due to the reasons covered under the Travel Delay Benefit;
- (l) a Terrorist Incident that occurs in a city listed on the itinerary of Your Trip and within 30 days prior to Your Scheduled Departure Date. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- (m) You or Your Traveling Companion is in the Military and called to emergency duty for a national disaster other than war;
- (n) You or Your Traveling Companion are required to work during the Trip. A written statement by a company officer and/or the Human Resources department demonstrating revocation of previously approved time off will be required;
- (o) You or Your Traveling Companion's place of employment is rendered unsuitable for business due to fire, flood, burglary or other natural disaster and You and/or Your Traveling Companion are required to work as a result;
- (p) You or Your Traveling Companion are directly involved in the merger of Your employer or the acquisition of Your employer by another company;
- (q) revocation of Your previously granted leave or re-assignment due to war. Official written revocation/re-assignment by a supervisor or commanding officer of the appropriate branch of service will be required.

#### **SINGLE SUPPLEMENT**

Benefits will be paid, up to the Maximum Benefit Amount, for the additional cost incurred as a result of a change in the per person occupancy rate for prepaid Travel Arrangements if Your Family Member or Traveling Companion has his/her Trip delayed, canceled or interrupted for a covered reason and You do not cancel.

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

#### **CANCEL FOR ANY REASON**

If You cancel Your Trip for any reason not otherwise covered by this policy, We will reimburse You for 50% of the unused non-refundable prepaid expenses for Travel Arrangements You paid for Your Trip provided:

1. Your payment for this plan is received within 30 days of Your initial deposit/payment for Your Trip; and
2. You insure 100% of all prepaid Travel Arrangements that are subject to cancellation penalties or restrictions by the Travel Supplier; and
3. You cancel Your Trip two (2) days or more before Your Scheduled Departure Date.

#### **TRIP DELAY**

Benefits will be paid for reasonable accommodation, meal, and local transportation expenses incurred by You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, if You are delayed for 5 hours or more while en route to or from, or during a Trip, due to:

- (a) any delay of a Common Carrier (the delay must be certified by the Common Carrier);
- (b) a traffic accident in which You or Your Traveling Companion are not directly involved (must be substantiated by a police report);
- (c) lost or stolen passports, travel documents or money (must be substantiated by a police report);
- (d) quarantine, hijacking, Strike, natural disaster, terrorism or riot;
- (e) a documented weather condition preventing You from getting to the point of departure.

If You are delayed by a Common Carrier while en route to Your return destination after the Trip is completed and has placed their Your or dog in a kennel for the duration of the Trip and You unable to collect them on the day previously agreed with the kennel, benefits will be paid at \$25 per day, on a one-time basis, up to the Maximum Benefit Amount to cover the necessary additional kennel fees.

You must provide the following documentation when presenting a claim for these benefits: (a) Written confirmation of the reasons for delay from the Common Carrier whose delay resulted in the loss, including but not limited to; scheduled departure and return times and actual departure and return times; (b) Written confirmation from the kennel advising the original pick-up date and the actual pick-up date.

Benefits will not be paid for any expenses, which have been reimbursed, or for any services that have been provided by the Common Carrier.

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

### **MISSED CONNECTION**

If You miss Your cruise or tour departure because Your arrival at Your Trip destination is delayed for 3 or more hours, benefits will be paid, on a one-time basis, up to the Maximum Benefit Amount, for a) the Additional Transportation Cost to join the Trip and b) the unused portion of the prepaid expenses for land or water Travel Arrangements, due to: a) any delay of a Common Carrier (the delay must be certified by the Common Carrier); b) a documented weather condition preventing You from getting to the point of departure; c) quarantine, hijacking, Strike, natural disaster, terrorism or riot.

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

### **ACCIDENT & SICKNESS MEDICAL EXPENSE**

For the purpose of this benefit: "Covered Expense" means expense incurred for services and supplies: (a) listed below; and (b) ordered or prescribed by a Legally Qualified Physician as Medically Necessary for diagnosis or treatment; which is limited to:

1. the services of a Legally Qualified Physician;
2. Hospital or ambulatory medical-surgical center services (this will also include expenses for a cruise ship cabin or hotel room, not already included in the cost of Your Trip, if recommended as a substitute for a Hospital room for recovery of a Sickness or Injury);
3. transportation furnished by a professional ambulance company to and/or from a Hospital; and prescribed drugs, prosthetics and therapeutic services and supplies.

Benefits will be paid for the Covered Expense incurred, up to the Maximum Benefit Amount, if You incur a Covered Expense as a result of a Sickness that first manifests itself during the Trip or Injury that occurs during the Trip. Only Covered Expenses incurred during the Trip will be reimbursed. Expenses incurred after the Trip are not covered.

Benefits will include expenses incurred during the Trip for emergency dental treatment due to Injury not to exceed \$750. Expenses for emergency dental treatment incurred after the Trip are not covered.

Benefits will not be paid in excess of the Usual and Customary Charges.

Advance payment will be made to a Hospital, up to the Maximum Benefit Amount, if needed, to secure Your admission to a Hospital, because of a covered Sickness or Injury. The Program Medical Advisor will coordinate advance payment to the Hospital.

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

### **EMERGENCY EVACUATION & RETURN OF MORTAL REMAINS**

When You suffer loss of life for any reason or incur a Sickness or Injury during the course of a Trip, the following benefits are payable, up to the Maximum Benefit Amount.

### **EMERGENCY MEDICAL EVACUATION**

If the local attending Legally Qualified Physician and the Program Medical Advisor determine that transportation to a Hospital or medical facility is Medically Necessary to treat an unforeseen Sickness or Injury which is acute or life threatening and adequate Medical Treatment is not available in the immediate area, the Transportation Expense incurred will be paid for the Usual and Customary Charges for transportation to the closest Hospital or medical facility capable of providing that treatment.

If You are in the Hospital for more than 7 consecutive days and Your dependent children who are under 18 years of age and accompanying You on the Trip are left unattended, Economy Transportation will be paid to return the dependents to their home (with an attendant, if considered necessary by the Program Medical Advisor). If You are traveling alone and will be hospitalized for more than 7 consecutive days and Emergency Evacuation is not imminent, benefits will be paid to transport one person, chosen by You, by Economy Transportation, for a single visit to and from Your bedside.

### **NON-EMERGENCY MEDICAL EVACUATION**

If the local attending Legally Qualified Physician and the Program Medical Advisor determine that it is Medically Necessary for You to return to Your place of permanent residence because of an unforeseen Sickness or Injury which is acute or life-threatening, the Transportation Expense incurred will be paid for Your return to Your permanent residence or to a Hospital or medical facility closest to Your permanent place of residence capable of providing that treatment via one of the following methods of transportation, as approved, in writing, by the Program Medical Advisor: i) one-way Economy Transportation; ii) commercial air upgrade (to Business or First Class), based on Your condition as recommended by the local attending Legally Qualified Physician and verified in writing; or iii) other covered land or air transportation including, but not limited to, commercial stretcher, medical escort, or the Usual and Customary Charges for air ambulance, provided such transportation has been pre-approved and arranged by the Program Medical Advisor. Transportation must be via the most direct and economical route.

## HOSPITAL OF CHOICE

Subject to terms and conditions, You may choose a Non-Emergency Medical Evacuation to a Hospital in a city within the USA or Canada other than Your Home city, but the maximum amount payable is limited to the cost of a Medical Evacuation to Your Home city.

## RETURN OF REMAINS

In the event of Your death, the expense incurred will be paid for minimally necessary casket or air tray, preparation and transportation of Your remains to Your place of residence or to the place of burial.

Benefits are paid less the value of Your original unused return travel ticket. If benefits are payable and You have other insurance that may provide benefits for this same loss, We reserve the right to recover from such other insurance. You shall: a) notify Us of any other insurance; b) help Us exercise the Company's rights in any reasonable way that We may request, including the filing and assignment of other insurance benefits; c) not do anything after the loss to prejudice Our rights; and d) reimburse Us, to the extent of any payment We have made, for benefits received from such other insurance.

## ACCIDENTAL DEATH & DISMEMBERMENT

### 24 HOUR OTHER THAN COMMON CARRIER

You are eligible for benefits 24 hours a day, up to the Maximum Benefit Amount, when You sustain an Injury during the Trip which results in any of the following losses within 180 days of the date of the Injury causing the Loss.

### COMMON CARRIER ONLY

When You sustain covered Injuries: (a) received while a passenger (not as a pilot, operator or member of the crew) riding in, boarding or alighting from a public conveyance provided by a Common Carrier; and (b) resulting in any of the following losses within 180 days from the date of the accident.

### AIR FLIGHT

You are eligible for benefits, up to the Maximum Benefit Amount, when You sustain an Injury during the Trip which results in any of the following losses within 180 days of the date of the Injury causing

the Loss: a) while riding solely as a passenger in an aircraft on a regularly scheduled airline flight or regularly scheduled charter flight; b) while riding as a passenger in any land or water conveyance provided at the expense of the air carrier as a substitute for an aircraft covered by this policy; c) while riding as a passenger in a vehicle licensed to carry passengers for hire, but only when going to an airport to board an aircraft on which You are covered by this policy or when leaving an airport after alighting from such an aircraft; or d) while upon airport premises designated for passenger use immediately before boarding or immediately after alighting from an aircraft on which You are covered by this policy.

Benefits will be paid as follows:

### TABLE OF LOSSES

<u>Loss of:</u>	<u>Percentage of Principal Sum:</u>
Life.....	100%
Both Hands; Both Feet or Sight of Both Eyes ...	100%
One hand and one foot.....	100%
One Hand and Sight of One Eye.....	100%
One Foot and Sight of One Eye .....	100%
One Hand; One Foot or Sight of One Eye.....	50%

Loss of hand or hands, or foot or feet, means severance at or above the wrist joint or ankle joint, respectively. Loss of eye or eyes means the total and irrecoverable loss of the entire sight thereof.

Only one of the amounts shown above (the largest applicable) will be paid for Injuries resulting from one accident.

The benefit for loss of: (a) two limbs; (b) both eyes; or (c) one limb and one eye is payable only when such loss results from the same accident.

The Principal Sum is shown in the Schedule of Benefits.

## BAGGAGE & PERSONAL EFFECTS

Coverage will be provided to You:

- (a) against all risks of permanent loss, theft or damage to Your Baggage and Personal Effects;
- (b) subject to all Exclusions and Limitations in the policy;
- (c) up to the Maximum Benefit Amount; and
- (d) occurring while this coverage is in force.

The lesser of the following amounts will be paid:

1. the actual cash value (cost less proper deduction for depreciation) at the time of loss, theft or damage;
2. the cost to repair or replace the article with material of a like kind and quality; or
3. \$300 per article.

A combined maximum of \$600 will be paid for jewelry, watches, articles consisting in whole or in part of silver, gold or platinum, articles trimmed with fur, cameras and their accessories and related equipment. A maximum of \$50 will be paid for the cost of replacing a passport or visa. A maximum of \$50 will be paid for the cost associated with the unauthorized use of lost or stolen credit cards, subject to verification that You have complied with all conditions of the credit card company.

Additional Limitations and Exclusions Specific to Baggage and Personal Effects:

Benefits are not payable for any loss 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 customs 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; or
- (g) property shipped as freight or shipped prior to the Scheduled Departure Date.

## BAGGAGE DELAY

If, while on a Trip, Your checked baggage is delayed or misdirected by a Common Carrier for more than 12 hours from Your time of arrival at a destination other than at Your place of permanent residence, benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the actual expenditure for necessary personal effects. You must be a ticketed passenger on a Common Carrier. The Common Carrier must certify the delay or misdirection. Receipts for the purchases must accompany any claim.

Additional Provisions applicable to Baggage & Personal Effects & Baggage Delay:

Benefits will not be paid for any expenses which have been reimbursed or for any services which have been provided by the Common Carrier, hotel or Travel Supplier; nor will benefits be paid for loss or damage to property specifically scheduled under any other insurance.

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

**COLLISION DAMAGE WAIVER**

You are eligible for benefits up to the Maximum Benefit Amount if You rent a car while on Your Trip, and the car is damaged due to collision, theft, vandalism, windstorm, fire, hail, flood or any cause not in Your control while in Your possession, or the car is stolen while in Your possession and is not recovered. We will pay the lesser of:

- (a) the cost of repairs and rental charges imposed by the rental company while the car is being repaired;
- (b) the Actual Cash Value of the car; or
- (c) the amount shown on the Schedule.

Coverage is provided to You, provided You are a licensed driver and are listed on the rental agreement.

Coverage is not available to residents of Texas.

**LIMITATIONS AND EXCLUSIONS**

Benefits are not payable for any loss due to, arising or resulting from:

1. Suicide, attempted suicide or any intentionally self-inflicted injury while sane or insane (in Missouri, sane only);
2. An act of declared or undeclared war;
3. Participating in maneuvers or training exercises of an armed service;
4. Riding, driving or participating in races, or speed or endurance contests;
5. Mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes, or other special equipment);
6. Participating as a member of a team in an organized sporting competition;
7. Participating in skydiving, hang gliding, bungee cord jumping, or scuba diving if the depth exceeds 50 feet or if You are not certified to dive and a dive master is not present during the dive;
8. Piloting or learning to pilot or acting as a member of the crew of any aircraft;
9. Being Intoxicated, as specifically defined in the policy, or under the influence of any controlled substance unless administered on the advice of a Legally Qualified Physician;
10. The commission of or attempt to commit a felony or being engaged in an illegal occupation;
11. Normal childbirth, normal pregnancy (except complications of pregnancy) or voluntarily induced abortion;
12. Dental treatment (except as coverage is otherwise specifically provided herein);
13. Amounts which exceed the Maximum Benefit Amount for each coverage as shown in the Schedule of Benefits;
14. Due to a Pre-Existing Condition, as defined in the Policy. The Pre-Existing Condition Limitation does not apply to the Emergency Medical Evacuation or Return of Remains coverage; or
15. A mental or nervous condition, unless hospitalized.

The following exclusions apply to Baggage & Personal Effects, Baggage Delay:

Baggage and Personal Effects does not include:

1. Animals;
2. Automobiles and automobile equipment;
3. Boats or other vehicles or conveyances;

4. Trailers;
5. Motors;
6. Aircraft;
7. Bicycles, except when checked as baggage with a Common Carrier;
8. Household effects and furnishings;
9. Antiques and collectors items;
10. Sunglasses, contact lenses, artificial teeth, dental bridges or hearing aids;
11. Prosthetic limbs;
12. Prescribed medications;
13. Keys, money, credit cards (except as coverage is otherwise specifically provided herein);
14. Securities, stamps, tickets and documents (except as coverage is otherwise specifically provided herein).

The following exclusions apply to Collision Damage Waiver:

Coverage is not provided for loss due to:

1. Any obligation of You, a Traveling Companion or Family Member traveling with You assumed under any agreement (except insurance collision deductible);
2. Rentals of trucks, campers, trailers, motor bikes, motorcycles, recreational vehicles or Exotic Vehicles;
3. Any loss which occurs if You or anyone traveling with You are in violation of the rental agreement;
4. Failure to report the loss to the proper local authorities and the rental car company;
5. Damage to any other vehicle, structure or person as a result of a covered loss;
6. Any loss as the result of or attributed to driving the rental vehicle: while under the influence of alcohol or any illegal substance or the abuse of a legal substance; while using any medication which recommends abstinence from driving; in a speed competition; for compensation for hire; for illegal trade purposes, or transporting contraband;
7. Any loss as the result of physical damage or loss attributed to: mechanical failure or breakdown of the rental vehicle; wear and tear, gradual deterioration, corrosion, rust or freezing; any neglect or abuse of the vehicle; any dishonest act or conversion; any consequence of war (declared or otherwise); or contamination by a radioactive material.

## STATE MANDATES TRAVEL PROTECTION INSURANCE

State Exceptions to the Certificate of Insurance or Policy

### NEW HAMPSHIRE

#### If you reside in the state of NEW HAMPSHIRE:

The definition of **Family Member** is amended to read: **Family Member** means an Insured's or a Traveling Companion's: legal spouse or common-law spouse where legal; legal guardian; son or daughter (adopted, foster or step); child placed for adoption with the Insured or Traveling Companion; son-in-law; daughter-in-law; grandmother; grandmother-in-law; grandfather; grandfather-in-law; grandchild; aunt; uncle; niece; or nephew; brother, step-brother; sister; step-sister; brother-in-law; sister-in-law; mother; father; step-parent.

The definition of **Hospital** is amended to read: **Hospital** means (a) a place that operates according to law in the state where it is located; and b) a place operated for the care and treatment of resident inpatients with a registered graduate nurse (RN) always on duty and with a laboratory and X-ray facility: Not included is a hospital or institution licensed or used principally: (1) for the treatment or care of drug addicts or alcoholics; or (2) as a clinic continued or extended care facility, skilled nursing facility, convalescent home, rest home, nursing home or home for the aged.

"Proof of Loss" is amended to read: 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.

### NEW YORK

#### If you reside in the state of NEW YORK:

Under New York Law, certain mandated benefits are required to be provided under a medical expense policy. The Company will pay benefits as applicable to this program for such mandates.

The definition of **Hospital** is amended to read: **Hospital** means a short-term, acute, general hospital, that: (a) is primarily engaged in providing, by or under the continuous supervision of physicians, to inpatients, diagnostic services and therapeutic services for diagnosis, treatment and care of injured or sick persons; (b) has organized departments of medicine and major surgery; (c) has a requirement that every patient must be under the care of a physician or dentist; (d) provides 24-hour nursing service by or under the supervision of a registered professional nurse (R.N.); (e) if located in New York State, has in effect a hospitalization review plan applicable to all patients which meets at least the standards set forth in section 1861(k) of United States Public Law 89-97,

(42 USCA 1395x[k]); (f) is duly licensed by the agency responsible for licensing such hospitals; and is not, other than incidentally, a place of rest, a place primarily for the treatment of tuberculosis, a place for the aged, a place for drug addicts, alcoholics, or a place for convalescent, custodial, educational, or rehabilitative care.

The definition of **Pre-Existing Condition** is amended to read: **Pre-Existing Condition** means the existence of symptoms in You, Your Traveling Companion Your Family Member booked to travel with him or her that would ordinarily cause a prudent person to seek diagnosis, care or treatment within a 60 day period preceding the effective date of Your coverage, or a condition for which medical advice or treatment was recommended by a Physician or received from a Physician within a 60 day period preceding the effective date of Your coverage.

### WASHINGTON

#### If you reside in the state of WASHINGTON:

There is a Limited Benefit Outline of Coverage available to review.

A FOURTEEN-DAY LOOK provision applies: You may cancel this Policy by giving the Company or the agent written notice within the first to occur of the following: (a) 14 days from the Effective Date of Your Policy; or (b) Your Scheduled Departure Date. If You do this, the Company will refund Your premium paid provided no Insured has filed a claim under this Policy.

Under **ACCIDENTAL DEATH AND DISMEMBERMENT**, 180 days is amended to read 365 days.

Under **MEDICAL EVACUATION AND RETURN OF MORTAL REMAINS**, the following sections are deleted in their entirety: Section 2. For Non-Emergency Medical Evacuation; and Hospital of Choice.

Under **TRIP CANCELLATION & TRIP INTERRUPTION**, the following Other Covered Reasons are deleted: c. You or Your Traveling Companion's place of employment is rendered unsuitable for business due to fire, flood, burglary or other natural disaster and You or Your Traveling Companion is required to work as a result; d. a documented theft of passports or visas; e. a permanent transfer of employment of 250 miles or more; i. mechanical breakdown that causes complete cessation of services of Your Common Carrier for at least 12 consecutive hours; m. Revocation of Your previously granted leave or reassignment due to war. Official written revocation/reassignment by a supervisor or commanding officer of the appropriate branch of service will be required; n. Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them.

Under **TRIP CANCELLATION & TRIP INTERRUPTION**, the following Other Covered Reasons are amended to read as follows: b. the 10 day requirement is deleted; g. 12 hours is amended to 48 hours; h. 12 hours is amended to 48 hours; l. Terrorism in a country which is part of the Trip, which causes the United States Department of State to issue a travel warning that an Insured should not travel within that country for a period of time that would include the Trip. Such travel warning must be made after the Effective Date; o. Bankruptcy or Default of an airline, cruise line, or tour operator (other than the travel agency from whom You purchased the travel arrangements) which stops service more than fourteen (14) days following the Effective Date; Under **TRIP CANCELLATION & TRIP INTERRUPTION**, the following Other Covered Reason is added: p) Felonious Assault of the Insured or a Traveling Companion within 10 days of departure or during the Trip.

Under **MISSED CONNECTION**, Section c) is removed in its entirety.

Under **MISSED CONNECTION**, Section b) the unused portion of the prepaid expenses for land or water Travel Arrangements is amended to read as follows; b) reasonable accommodation and hotel expenses.

Under **DEFINITIONS**, Domestic Partner is removed.

Under **DEFINITIONS**, the Pre-Existing Condition exclusion is amended from 60 days to 180 days.

Under **GENERAL LIMITATIONS AND EXCLUSIONS** the following is added to #9: except for Accidental Death and Dismemberment, Accident & Sickness Medical Expense. Under **GENERAL LIMITATIONS AND EXCLUSIONS** the following exclusion is amended to read as follows: 11. due to normal childbirth, normal pregnancy (except complications of pregnancy) or voluntarily induced abortion.

Under **GENERAL LIMITATIONS AND EXCLUSIONS** the following exclusions are added: 16. for Accidental Death and Dismemberment, Accident Medical, and Sickness Medical benefits; due to alcoholism and drug addiction; 17. loss or damage (including death or injury) and any associated cost or expense resulting directly or indirectly from the discharge, explosion or use of any device, weapon or material employing or involving nuclear fission, nuclear fusion or radioactive force, or chemical, biological, radiological or similar agents, whether in time of peace or war, and regardless of who commits the act, regardless or any other cause or event contributing concurrently or in any other sequence thereto (except for Accidental Death and Dismemberment, Accident Medical, and Sickness Medical benefits).

The following provisions apply: Claim Form, Time of Payment of Claims, Payment of Claims, Physician Examination & Autopsy, Clerical Error, and Conformity with State Statues.

**COORDINATION OF BENEFITS** is deleted in its entirety.

## ROADSIDE ASSISTANCE

Emergency Roadside Assistance is available 24 hours a day, 365 days a year. You are responsible for any non-covered expenses or covered costs in excess of Your \$50 per occurrence maximum. Service must be a covered benefit under the terms and conditions of this contract while You are on a scheduled Trip and is available only for the specific Covered Vehicle registered as part of this agreement. Covered Vehicle means only that vehicles, which is rated 3/4 ton in weight or less, not used for racing, rentals, dealer services, dealer loaners, taxi, limousine, shuttle, delivery, hauling, towing, road repair service, construction service, snow removal, or as a public livery vehicle, or any other commercial use that is purchased or leased.

All of the services provided are described herein and are applicable throughout the United States and Canada.

All 24 Hour Roadside Assistance services are provided by Brickell Financial Services Motor Club, Inc. dba Road America Motor Club, administrative offices at 7300 Corporate Center Drive, Suite 601, Miami, FL 33126. For Mississippi and Wisconsin customers, services are provided by Brickell Financial All Services Motor Club. For California customers, services are provided by Road America Motor Club, Inc.

Just call the **TOLL-FREE** number, **1-866-296-9356** and a service vehicle will be dispatched to Your assistance. **Important:** Please be with Your Covered Vehicle when the service provider arrives, as they cannot service an unattended vehicle. Note: Only one service call for the same cause will be covered during any seven-day period.

### Covered Services include:

1. Towing Assistance - When towing is necessary, Your Covered Vehicle will be towed to the nearest qualified service facility.
2. Flat Tire Assistance - Service consists of the removal of the flat tire and its replacement with the spare tire.
3. Fuel, Oil, Fluid and Water Delivery Service - An emergency supply of fuel, oil, fluid and water will be delivered if You are in immediate need. You must pay for the fluid when it is delivered.

4. Lock-out Assistance - If Your keys are locked inside a compartment of Your Covered Vehicle, assistance will be provided to supply assistance in gaining entry into the locked compartment.
5. Battery Assistance - If battery failure occurs, a jump start will be provided to start Your Covered Vehicle.
6. Collision Assistance - If Your Covered Vehicle is involved in a collision, towing assistance will be provided when needed to direct the Vehicle to the nearest qualified repair facility.

### The following items are not included as part of the emergency roadside assistance benefit:

Cost of parts, replacement keys, fluids, cost of fuel, material, additional labor relating to towing, or the cost of installation of products; non-emergency mounting or removing of any tires, snow tires, off-road tires, or similar items; tire repair at any location other than a roadside disablement site; service for any vehicles in tow; any and all taxes or fines; damage or disablement due to fire, flood, terrorism or vandalism; winching, extrication, towing from, service or repair work performed at a service station, garage or repair shop; service on a Covered Vehicle that is not in a safe condition to be towed; non-emergency towing or other non-emergency service impound towing or towing by other than an authorized service provider; vehicle storage charges; a second tow for the same disablement; towing or service on roads not regularly maintained, such as sand beaches, open fields, forests, and areas designated as not passable due to construction, etc; towing at the direction of a law enforcement officer relating to traffic obstruction, impoundment, abandonment, illegal parking, or other violations of law. Coverage shall not be provided in the event of emergencies resulting from the use of intoxicants or narcotics, or the use of the Covered Vehicle in the commission of a felony. Repeated service calls for a Covered Vehicle in need of routine maintenance or repair. Only one disablement for the same cause during any seven-day period will be accepted. Services obtained independently of Road America. This is not a Reimbursement Service.

## IDENTITY THEFT SERVICES

Powered by Identity Theft 911®, the national leader in identity management and fraud education. You and Your family have unlimited, one-on-one access to a highly experienced Fraud Specialist, who becomes Your personal advocate and ally, guiding You through the resolution process, step-by-step, until Your identity is restored.

### Valuable Services include:

1. Unlimited, one-on-one access to a Fraud Specialist, who will handle all the work for You.
2. Systematic notification to credit bureaus, creditors and collectors, government agencies, police and other relevant parties.
3. Preparation of all necessary documents and phone calls needed to resolve Your identity theft, including placement of a free fraud alert on a credit file.
4. Direct assistance with filing a police report, creating a fraud victim affidavit, plus a comprehensive case file to assist law enforcement and claims' handling.
5. Free advocate-assisted credit file freeze placed with all three credit bureaus.
6. Help re-establishing Your life if You are a fire or disaster victim...so You can replace lost important documents and files and recapture critical account numbers and documentation.
7. PLUS, Identity Travel Services that help You before and while You are traveling. There are pre-travel tips to safeguard You from identity theft, plus You'll be provided with toll-free numbers in the countries You're traveling to call in the event You lose any identity documents while on Your trip. So You can count on worldwide help with emergency travel documents and arrangements in case Your passport, credit cards, or other crucial documents are lost or stolen while traveling.

To stay on top of the latest scams and schemes, visit [www.identitytheft911.org](http://www.identitytheft911.org) regularly. There You'll find a wealth of ongoing education and preventive resources, including up-to-the-minute news alerts, in-depth articles and newsletters.

### **How to use your Identity Theft Services**

Suspect You are a victim of identity fraud or have any identity related concerns that came up during Your Covered Trip?

1. Simply call 1-800-819-9004 during normal business hours.
2. We will verify Your Identity Theft Resolution Services benefits.
3. Then, Your call will be transferred to Identity Theft 911, where a highly trained Fraud Specialist will help You.

### **Planning a Covered Trip out of the country?**

1. Simply call 800-819-9004 during normal business hours.
2. We will verify Your Identity Theft Resolution Services benefits.
3. Then, Your call will be transferred to Identity Theft 911, where they will take Your travel information and send Your pre-travel tips and toll-free travel phone numbers.

### **OPTIONAL - CANCEL FOR ANY REASON PAK UPGRADE**

If You have purchased the Cancel For Any Reason Pak upgrade in addition to Your Travelex Passenger Protection Plan, You will receive the following benefits:

#### **CANCEL FOR ANY REASON**

If You cancel Your Trip for any reason not otherwise covered by this policy, We will reimburse You for 80% of the unused non-refundable prepaid expenses for Travel Arrangements You paid for Your Trip provided:

1. Your payment for this plan is received within 30 days of Your initial deposit/payment for Your Trip; and
2. You insure 100% of all prepaid Travel Arrangements that are subject to cancellation penalties or restrictions by the Travel Supplier; and
3. You cancel Your Trip two (2) days or more before Your Scheduled Departure Date.

#### **CANCEL FOR TRIP DELAY REASONS**

A cancellation of Your Trip if Your arrival on the Trip is delayed and causes You to lose 30% or more of the scheduled Trip duration due to the reasons covered under the Travel Delay Benefit.

### **TRAVEL ASSISTANCE & CONCIERGE SERVICES**

**Travel Assistance Services provided by:  
On Call International**  
24 hours a day / 7 days a week

When outside the USA or Canada, call us collect through a local operator (you will first have to enter the International Access Code of the country you are calling from). Within the USA or Canada, use the toll free number.

<b>Within U.S.A. &amp; Canada</b>	1-866-930-9806
<b>Outside U.S.A. &amp; Canada</b>	1-603-328-1965
<b>Your Plan Number: UMTM 0710</b>	

#### **MEDICAL SERVICES**

**MEDICAL ASSISTANCE** – Our multi-lingual professionals are available 24 hours a day to provide help, advice and referrals for medical emergencies. We will help You locate local physicians, dentists, or medical facilities.

**MEDICAL CONSULTATION AND MONITORING** – If You are hospitalized, we will contact You and Your treating physician to monitor Your condition to assure You are receiving appropriate care and assess the need for further assistance. We will also contact Your personal physician and family at home when necessary or requested to keep them informed of Your situation.

**MEDICAL EVACUATION** – When medically necessary, we will arrange and pay for appropriate transportation, including an escort, if required, to a suitable hospital, treatment facility or home. Payment for Medical Evacuation is available only for covered claims and up to the amount of coverage provided in the Policy. All medical transportation services must be authorized and arranged by On Call International. In the event of an unauthorized Medical Evacuation, reimbursement may be limited or coverage may be invalidated.

**EMERGENCY MEDICAL PAYMENTS** – We will assist You in the advancement of funds or guarantee payments (up to the Policy limit) to a hospital or other medical provider, if required, to secure Your admission, treatment or discharge.

**PRESCRIPTION ASSISTANCE** – We will assist You with replacing medications that are lost, stolen or spoiled during Your Covered Trip, either locally or by special courier.

**DEPENDENT TRANSPORTATION & FAMILY VISITS** – When a minor (age 18 or younger) is left unattended on a Covered Trip due to hospitalization or death of the accompanying adult, we will arrange for his or her return home, including escort expenses. If You are traveling alone and hospitalized 7 days or more, we will arrange transportation for a person You choose to visit You.

**REPATRIATION OF REMAINS** – In the event of death while on a Covered Trip, we will arrange for the preparation and transportation required to return Your remains to Your home.

## **24 HOUR TRAVEL ASSISTANCE SERVICES**

**24 HOUR LEGAL ASSISTANCE** – If while on Your Covered Trip You encounter legal problems, we will help You find a local legal advisor. If You are required to post bail or provide immediate payment of legal fees, we will assist You in arranging a funds transfer from family or friends.

**MESSAGE SERVICES** – We will transmit emergency messages to family, friends or business associates. We will advise You if we have difficulty delivering Your message and let You know that the message has been received. We will also relay non-emergency e-mail or phone messages on Your behalf at any time during Your Covered Trip.

**LANGUAGE INTERPRETATION SERVICES** – We provide interpretation services in major languages and will refer You to appropriate local services, if needed.

**EMERGENCY CASH TRANSFER** – We will help arrange an emergency cash transfer (wire transfer, travelers checks, etc.) of Your funds from home or from friends or family in medical or travel emergency situations where additional funds are required.

**PRE-TRIP TRAVEL SERVICES** – We provide 24-Hour information, help and advice for Your planned Covered Trip such as: passport and visa information, requirements and replacement; travel health information or advisories; vaccine recommendations and requirements; government agency contact information (i.e. embassies, consulates, and other departments or agencies); weather and currency information.

**24 HOUR NURSE HELP LINE** – On Call International shall provide You with clinical assessment, education and general health information. This service shall be performed by a registered Nurse counselor to assist in identifying the appropriate level and source(s) of care for You (based on symptoms reported and/or health care questions asked by or on behalf of You). Nurses shall not diagnose Your ailments.

**TRAVEL DOCUMENT AND TICKET REPLACEMENT** – When important travel documents (such as passports and visas) are lost or stolen, we will help You to secure replacements. We will also help You when airline or other travel tickets are lost or stolen. We will assist You with reporting Your loss, reissuing tickets and obtaining the money required for this purpose (You are responsible for providing the funds).

## **CONCIERGE SERVICES**

- restaurant, shopping, hotel recommendations/reservations
- local transport (rental car, limousine, etc) information and reservations
- sporting, theatre, night life and event information (sports, scores, stock quotes, gift suggestions, etc.), recommendations and ticketing
- golf course information, referrals, recommendations and tee times
- tracking and assisting with the return of lost or delayed baggage

## **BUSINESS SERVICES**

- emergency correspondence and business communication assistance
- assistance with locating available business services such as: express/overnight delivery sites, internet cafes, print and copy services
- assistance with or arrangements for telephone and web conferencing
- emergency messaging to customers, associates, and others (phone, fax, e-mail, text, etc.)
- real time weather, travel delay and flight status information
- worldwide business directory service for equipment repair/replacement, warranty service, etc.
- emergency travel arrangements

## **COORDINATION OF BENEFITS**

**APPLICABILITY** – The Coordination of Benefits (“COB”) provision applies to this Plan when You have health care coverage under more than one Plan.

**TRAVEL MAX IS UNDERWRITTEN BY** – United States Fire Insurance Company under Form Series TP 401. In WA under Form #TP-401-WA.

**NOTICE** – If You are a resident of WA Your coverage is provided on an individual policy form. Your policy number is Your complete name plus UMTM. If You live in any other state Your coverage is provided via a certificate. Your policy or certificate (including State Exceptions for NH, NY and WA) and all General and “COB” Provisions are available calling Travelex Insurance Services at 1-800-819-9004.

## CLAIMS PROCEDURES

To facilitate prompt claims settlement:

### **TRIP CANCELLATION / INTERRUPTION CLAIMS:**

IMMEDIATELY Call Your Travel Supplier and the Claims Administrator to report Your cancellation and avoid non-covered expenses due to late reporting. The Claims Administrator will then advise You on how to obtain the appropriate forms to be completed by You and the attending Physician. Provide all unused transportation tickets, official receipts, etc.

If appropriate, obtain medical statements from the doctors in attendance in the country where Sickness or Accident occurred. These statements should give complete diagnosis, stating that the Sickness or Accident prevented traveling on the dates contracted.

### **TRIP DELAY CLAIMS:**

Obtain receipts for any Additional Expenses (i.e.: meals, lodging, etc.) and submit with written documentation from the source which caused the delay for verification (i.e.: Common Carrier, police report, etc.).

### **MEDICAL EXPENSE CLAIMS:**

Obtain receipts from the providers of services, etc., stating the amount paid and listing the diagnosis and treatment. Provide a copy of their final disposition of Your claim.

### **BAGGAGE CLAIMS:**

In case of Loss, theft, or damage to personal belongings, immediately contact the hotel manager, tour guide or representative, transportation official, or local police; report occurrence and obtain a written statement. Submit claim first to party responsible (i.e.: airline, hotel, etc.). Provide a copy of the outcome of Your claim, along with the written Loss statements, receipts, etc.

US Fire Claims Administration  
Travelex Travel Claims  
P.O. Box 6866  
Shawnee Mission, KS 66206

Phone: 1-800-419-4780

Hours: 7:30 – 5:00 CST Monday - Friday

Questions? Call  
**1-800-819-9004**



Insurance Services