

Accident and Sickness Benefits for Central States Rotary Youth Exchange

You are a Covered Person and eligible for coverage under the plan, if you are in the eligible class defined below. For benefits to be payable the Policy must be in force, the required premium must be paid and you must be engaging in one of the Covered Activities described below. If you are not in Active Service on the date your insurance would otherwise be effective, it will go into effect on the date you return to Active Service.

Class Description: All student participants of the Participating Organization.

Period of Coverage: You will be insured on the later of the Policy Effective Date or the date that you become eligible. Your coverage will end on the earliest of the date: 1) the Policy terminates; 2) you are no longer eligible; or 3) the period ends for which the required premium is paid.

Term of Coverage: This coverage will start on the actual start of the Trip. It does not matter whether the Trip starts at your home, place of work, or other place. It will end on the first of the following dates to occur: 1) The date you return to your Home Country; 2) the scheduled Trip return date; or 3) the date you make a Personal Deviation (unless otherwise provided by the Policy). "Personal Deviation" means: 1) An activity that is not reasonably related to the Covered Activity; and 2) Not incidental to the purpose of the Trip.

Covered Activities:

Athletic Activities - The Covered Accident must result from participation in amateur, club, intramural, interscholastic or intercollegiate tennis, swimming, cross country, track, baseball, softball, volleyball, and golf sports. All other sports are not covered.

Educational Travel - We will pay the benefits described only if you suffer a loss or incurs a Covered Expense as the direct result of a Covered Accident or Sickness while traveling: 1) outside of your Home Country; 2) up to 365 days; and 3) engaging in an educational Trip authorized by the Policyholder.

Personal Deviation – The Covered Accident or Sickness must take place during a Personal Deviation while on a Trip covered by the Policy.

"Personal Deviation" means: 1) An activity that is not reasonably related to the Covered Activity; and 2) Not incidental to the purpose of the Trip.

Coverage under the Policy is extended to U.S. citizens traveling to U.S. Territories. "U.S. Territories" means lands that are directly overseen by the United States Federal Government. A list of these territories would include the United States Virgin Islands, Guam, American Samoa, Northern Mariana Islands, Puerto Rico, and all U.S. Minor Outlying Islands.

Description of Benefits

Medical Expense Benefits - We will pay for Covered Expenses that result directly from a Covered Accident or Sickness. These benefits are payable the earlier of the date your Trip ends, or 52 weeks from the date of a Covered Accident or Sickness provided the first Covered Expense was incurred within 90 days after the date of Covered Accident or Sickness. Your Maximum Medical Expense Benefits for Educational Travel is \$1,000,000 per Covered Accident or Sickness and \$50,000 per Covered Accident for Athletic Activities; subject to a Deductible of \$0.

Maximum for Dental Treatment
(Alleviation of Pain):

\$350

Maximum for Room & Board Charges:
Maximum for

semi-private room rate

ICU Room & Board Charges:

two times semi-private room rate

Maximum for Chiropractic Care:

80% of the Usual and Customary Charges; up to \$35 per visit for a

	maximum of 10 visits
Maximum for Mental and Nervous Disorders:	
Inpatient:	50% of the Usual and Customary Charges up to 30 days
Outpatient:	\$5,000

Other limitations, if any, may apply as shown in the Policy.

Medical Expense Benefits are only payable: 1) for Usual and Customary Charges incurred after the Deductible, if any, has been met; 2) for those Medically Necessary Covered Expenses that you incur; and 3) for charges incurred for services rendered to you while on a covered Trip.

Covered Medical Expenses:

- Hospital semi-private room and board (or room and board in an intensive care unit); Hospital ancillary services (including, but not limited to, use of the operating room or emergency room)
- Services of a Doctor or a registered nurse (R.N.)
- Ambulance service to or from a Hospital
- Laboratory tests
- Radiological procedures
- Anesthetics and their administration
- Blood, blood products, artificial blood products, and the transfusion thereof
- Physiotherapy
- Chiropractic expenses on an inpatient or outpatient basis
- Medicines or drugs administered by a Doctor or that can be obtained only with a Doctor's written prescription
- Dental charges for Injury to sound, natural teeth
- Emergency medical treatment of pregnancy
- Therapeutic termination of pregnancy
- Artificial limbs or eyes (not including replacement of these items)
- Casts, splints, trusses, crutches, and braces (not including replacement of these items or dental braces)
- Oxygen or rental equipment for administration of oxygen
- Rental of a wheelchair or hospital-type bed
- Rental of mechanical equipment for treatment of respiratory paralysis
- Mental and Nervous Disorders: limited to one treatment per day. "Mental and Nervous Disorders" means neurosis, psychoneurosis, psychopathy, psychosis, or mental or emotional disease or disorder of any kind
- Pregnancy and childbirth
- Newborn nursery care
- Emergency treatment for the alleviation of dental pain

Emergency Medical Benefits - We will pay up to \$10,000 for Covered Expenses incurred for emergency medical services to treat you if you: 1) suffer a Medical Emergency during the course of a Trip; and 2) are traveling on a covered Trip. Covered Expenses include expenses for guarantee of payment to a medical provider, Hospital or treatment facility. Benefits for these Covered Expenses will not be payable unless the charges incurred: 1) are Medically Necessary and do not exceed the charges for similar treatment, services or supplies in the locality where the expense is incurred; and 2) do not include charges that would not have been made if there were no insurance. Benefits will not be payable unless We authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider.

Emergency Medical Evacuation Benefit - We will pay 100% of Covered Expenses incurred for your medical evacuation if you: 1) suffer a Medical Emergency during the course of the Trip; 2) require Emergency Medical Evacuation; and 3) are traveling on a covered Trip. Covered Expenses; 1) Medical Transport: expenses for transportation under medical supervision to a different hospital, treatment facility or to your place of residence for Medically Necessary treatment in the event of your Medical Emergency and upon the request of the Doctor designated by Our assistance provider in consultation with the local attending Doctor. 2) Dispatch of a Doctor or Specialist: the Doctor's or specialist's travel expenses and the medical services provided on location, if, based on the information available, your condition cannot be adequately assessed to evaluate the need for transport or evacuation and a doctor or specialist is dispatched by Our service provider to your location to make the assessment. 3) Return of Dependent Child (ren): expenses to return each Dependent child who is under age 18 to his or her principal residence if a) you are age 18 or older; and b) you are the only person traveling with the minor Dependent child(ren); and c) you suffer a Medical Emergency and must be confined in a Hospital. 4) Escort Services: expenses for an Immediate Family

Member, or companion to join you during your emergency medical evacuation to a different hospital, treatment facility or your place of residence. 5) Transportation after Stabilization: if We have evacuated you to a medical facility due to an Emergency Medical Evacuation, We will pay transportation costs to; a) your Home Country, or b) your host country, or c) join the group if they have moved onward to a different location. 6) Return of Baggage and Personal Property for up to \$3,000 per Trip: Expenses incurred to bring your Baggage and Personal Property: to your place of residence or to the place designated by you or your family.

Benefits for these Covered Expenses will not be payable unless: 1) the Doctor ordering the Emergency Medical Evacuation certifies the severity of your Medical Emergency requires an Emergency Medical Evacuation; 2) all transportation arrangements made for the Emergency Medical Evacuation are by the most direct and economical conveyance and route possible; 3) the charges incurred are Medically Necessary and do not exceed the Usual and Customary Charges for similar transportation, treatment, services or supplies in the locality where the expense is incurred; and 4) do not include charges that would not have been made if there were no insurance.

“Baggage” as used in this benefit, means luggage and personal possessions, whether owned, borrowed or rented, taken by you on the study abroad trip.

“Personal Property” as used in this benefit, means personal goods belonging to you or for which the you are responsible and are taken on a study abroad trip or acquired by you during the Trip. It does not include: vehicles (including aircraft and other conveyances) or their accessories or equipment, home furnishings, furniture, or household items.

Benefits will not be payable unless We authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider. In the event you refuse to be medically evacuated, we will not be liable for any medical expenses incurred after the date medical evacuation is recommended.

Repatriation of Remains Benefit - We will pay 100% of Covered Expenses for preparation and return of your body to your home if you die as a result of a Medical Emergency while traveling on a covered Trip. Covered expenses include: 1) expenses for embalming or cremation; 2) the least costly coffin or receptacle adequate for transporting the remains; 3) transporting the remains; 4) Escort Services which include expenses for an Immediate Family Member, or companion to join your body during the repatriation to your place of residence; and 5) Return of Baggage and Personal Property for up to \$3,000: Expenses incurred to bring your Baggage and Personal Property: to your place of residence or to the place designated by Covered Person or his or her family.

“Baggage” as used in this benefit, means luggage and personal possessions, whether owned, borrowed or rented, taken by you on the study abroad trip.

“Personal Property” as used in this benefit, means personal goods belonging to you or for which the you are responsible and are taken on a study abroad trip or acquired by you during the Trip. It does not include: vehicles (including aircraft and other conveyances) or their accessories or equipment, home furnishings, furniture, or household items.

All transportation arrangements must be made by the most direct and economical route and conveyance possible and may not exceed the Usual and Customary Charges for similar transportation in the locality where the expense is incurred. Benefits will not be payable unless We authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider.

Emergency Reunion Benefit - We will pay up to \$12,500 for expenses incurred to have up to 3 people of the Covered Person's choice to accompany the Covered Person to his or her Home Country or the Hospital where the Covered Person is confined if The Covered Person is: 1) confined in a Hospital for at least 24 consecutive hours due to a covered Injury or Sickness and the attending Doctor believes it would be beneficial for you to have a Family Member at your side; or 2) the victim of a Felonious Assault. The person(s) of choice's travel must take place within 7 days of the date you are confined in the Hospital, or the date of the occurrence of the Felonious Assault.

“Felonious Assault” means a violent or criminal act reported to the local authorities which was directed at you during the course of, or an attempt of, a physical assault resulting in serious injury, kidnapping, or rape.

In the event that you die as a result of a covered Injury or Sickness, We will pay the expenses incurred for emergency travel arrangements, up to the Benefit Maximum referenced above, for the person(s) of choice to accompany your mortal remains.

Covered expenses include round-trip economy airline ticket and other travel related expenses.

All transportation and lodging arrangements must be made by the most direct and economical route and conveyance possible and may not exceed the usual level of charges for similar transportation or lodging in the locality where the expense is incurred. Benefits will not be payable unless We (or Our authorized assistance provider) authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider.

Lost Baggage Benefit - We will reimburse your replacement costs of clothes and personal hygiene items, up to \$250 per bag not to exceed \$250 per Trip after satisfaction of the \$0 Deductible, if your luggage is checked onto a common carrier, and is then lost, stolen, or damaged beyond your use. Replacement costs are calculated on the basis of the depreciated standard for the specific personal item claimed and its average usable period. You must file a formal claim with the transportation provider and provide Us with copies of all claim forms and proof that the transportation provider has paid you its normal reimbursement for the lost, stolen, or damaged luggage.

Quarantine Benefit - We will pay expenses incurred for up to \$2,000 if you are subject to Quarantine for H1N1 Influenza/any contagious disease that prevents you from traveling. Symptoms of the disease causing the Quarantine must first be manifested after the start of the Trip and the Quarantine must cause an interruption or delay in your Trip for which suitable accommodations are not otherwise available. Benefits will end on the earlier of 14 days after the Quarantine is issued or the date the Quarantine expires.

Covered Expenses: 1) the reasonable expenses incurred for lodging and meals; 2) the cost of a one-way economy airfare ticket to either your Home Country or to re-join the Trip; and 3) non-refundable travel arrangements.

Coverage is also provided for up to 1 Chaperone or 1 Family Member, who is traveling with you when you are subject to Quarantine.

“Chaperone” means a person who is sponsored by or associated with the Participating Organization to accompany you during the Trip.

“Quarantine” means you are forced into medical isolation by a recognized government authority, their authorized deputies, or medical examiners due to you either having, or being suspected of having, a contagious disease, infection or contamination while you are traveling outside of your Home Country.

Security Evacuation Expense Benefit - We will pay up to \$100,000 if: 1) an Occurrence takes place during the Covered Activity described in the Policy and within your Term of Coverage; and 2) while you are traveling outside of your Home Country.

Aggregate Limit per event - We will not pay more than \$1,000,000 for all expenses incurred as the result of one Security Evacuation event. If, in the absence of this provision, We would pay more than this amount for all expenses incurred for a single event, then the benefits payable to each person with a valid claim will be reduced proportionately.

Security Evacuation Expense Benefits will be paid for:

1. the Covered Person's Transportation and Related Costs to the Nearest Place of Safety, necessary to ensure his or her safety and well-being as determined by Our Designated Security Consultant.
2. the Covered Person's Transportation within 14 days of the Security Evacuation to either of the following locations:
 - a. the Covered Person's Home Country;
 - b. a destination where the Policyholder is located or where the Policyholder directs the Covered Person to travel to continue a Covered Activity. Coverage will be extended for up to 5 days if the Policyholder provides documented proof that it is not possible to make arrangements for the Covered Person's relocation within 14 days.
3. consulting services for seeking information on a Missing Person or kidnapping case, if the Covered Person is considered kidnapped or a Missing Person by local or international authorities.

Security Evacuation Expense Benefits are payable only once for the Covered Person for any one Occurrence.

Benefits will not be payable unless We (or Our authorized assistance provider) authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider. If expenses are not

authorized in advance by Us or Our assistance provider, We will pay 100% of such expenses to the extent that We or Our assistance provider determine(s) that such authorization would have been provided to the Covered Person.

Our assistance provider is not responsible for the availability of Transport services. Where a Security Evacuation becomes impractical due to hostile or dangerous conditions, a Designated Security Consultant will endeavor to maintain contact with the Covered Person until a Security Evacuation can occur.

Right of Recovery – If, after a Security Evacuation is completed, it becomes evident that the Covered Person was an active participant in the events that led to the Occurrence, or that another third party may be liable for evacuation expenses, We have the right to recover all Transportation and Related Costs from the Covered Person or the third party.

Changes in Terms and Conditions – The term and conditions of this benefit may be changed at any time to reflect conditions that constitute a change in the Policyholder's Security Evacuation Exposure. We will give at least 31 days advance written notice (or authorized electronic or telephonic means) to the Policyholder of any change in the terms and condition of this benefit.

“Appropriate Authority(ies)” means the U.S. State Department, the government authority(ies) in the Covered Person's Home Country, or the government authority(ies) of the Host Country or the Company's Designated Security Consultant.

“Baggage” as used in this benefit, means luggage and personal possessions, whether owned, borrowed or rented, taken by the Covered Person on the study abroad trip.

“Designated Security Consultant” means an employee of a security firm under contract with Us or Our assistance provider who is experienced in security and the measures necessary to ensure the safety of the Covered Person(s) in his or her care.

“Host Country” means any country, other than an OFAC excluded country, in which the Covered Person is traveling while covered under the Policy.

“Imminent Danger” means an immediate threat of harm, or the existence of any condition or practice that could reasonably be expected to cause death or serious physical harm if a Covered Person were to proceed in the affected area or if the Covered Person were to enter the affected area before the condition or practice was eliminated.

“Missing Person” means a Covered Person who disappeared for an unknown reason and whose disappearance was reported to the Appropriate Authority(ies).

“Natural Disaster” means storm (wind, rain, snow, sleet, hail, lightning, dust or sand), earthquake, flood, volcanic eruption, wildfire or other similar event that:

1. is due to natural causes; and
2. results in such severe and widespread damage that the area of damage is officially declared a disaster area by the government in which the Covered Person's Trip occurs and the area is deemed to be uninhabitable or dangerous.

Natural disaster does not mean nuclear reactions, uninhabitable property, transportation strikes, lost or stolen passport or travel documents, radiation or radioactive contamination, civil disorder and other similar events.

“Nearest Place of Safety” means a location determined by the Designated Security Consultant where:

1. the Covered Person can be assumed safe from the Occurrence that precipitated the Covered Person's Security Evacuation; and
2. the Covered Person has access to Transportation; and
3. the Covered Person has the availability of temporary lodging, if needed.

“Occurrence” means any of the following situations involving the Covered Person that trigger the need for a Security Evacuation:

1. expulsion from a Host Country or being declared persona non-grata on the written authority of the recognized government of a Host Country;
2. a Political or Military Event involving a Host Country, if the Appropriate Authority(ies) issue a Travel Advisory stating that citizens of the Covered Person's Home Country, or citizens of the Host Country should avoid all but essential

travel to the Host Country; or Our Designated Security Consultant recommends an evacuation due to political or civil unrest;

3. within 7 days of a Natural Disaster;
4. deliberate physical harm to the Covered Person or a threat of Imminent Danger against the Covered Person confirmed by a documented report from a supervising authority, police report or other physical evidence;
5. being found if there is documented evidence that the Covered Person is threatened after being deemed kidnapped or a Missing Person.

“Personal Property” as used in this benefit, means personal goods belonging to you or for which you are responsible and are taken on a study abroad trip or acquired by you during the Trip. It does not include: vehicles (including aircraft and other conveyances) or their accessories or equipment, home furnishings, furniture, or household items.

“Political or Military Event” means social unrest or a military activity such that Appropriate Authorities suggest evacuation of travelers or in-patriates and/or warn travelers to defer all but essential travel, or issue a similar warning of Imminent Danger. Coverage will not be available for any future travel to such an area until the same Appropriate Authorities, who issued the initial warning, have revised or rescinded the warning indicating that it is now nominally safe to travel to the area affected by the original warning.

Related Costs means lodging and, if necessary, physical protection for the Covered Person during or while waiting for Transport to the Nearest Place of Safety. Related Costs will include temporary lodging, if necessary, while the Covered Person is waiting to be transported back to the his or her Home Country or other country where the Policyholder that sponsored the Covered Person’s Trip is located, or where the Policyholder directs the Covered Person to travel to continue a Covered Activity. Related Costs do not include charges for alcoholic beverages, tobacco, entertainment, or non-emergency use of a mobile device.

Benefits will not be payable for Related Costs unless We authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider. If expenses are not authorized in advance by Us or Our assistance provider, We will pay such expenses to the extent that We or Our assistance provider determine(s) that such authorization would have been provided to the Covered Person.

“Security Evacuation” means the extrication of the Covered Person from an area of conflict or hostility due to an Occurrence which could result in the likelihood of grave physical harm or death to the Covered Person.

“Transport” or **“Transportation”** means the most efficient and available method of conveyance, where practical, economy fare will be utilized. If possible, the Covered Person’s common carrier tickets will be used. Transportation includes any expenses associated with transporting the Covered Person’s Baggage and Personal Property for up to \$3,000 per Occurrence, subject to availability.

“Travel Advisory” means a formal recommendation issued by the Appropriate Authority(ies) that the Covered Person or citizens of his or her Home Country, or citizens of the Host Country should avoid all but essential travel in the Host Country. In the U.S. this is a Level 4 Travel Advisory.

“Trip” means your sponsored travel by air, land, or sea from the Covered Person’s Home Country. It includes the period of time from the start of the trip until its end provided the Covered Person is engaged in a Covered Activity or personal deviation if covered under the Policy.

Additional Exclusions - We will not pay Security Evacuation Expense Benefits for expenses and fees:

- payable under any other provision of the Policy.
- that are recoverable through the Covered Person’s employer or other entity sponsoring the Covered Person’s Trip.
- due to the Covered Person’s failure to maintain and possess duly authorized and issued required travel documents and visas.
- for repatriation of remains expenses.
- for common or endemic or epidemic diseases or global pandemic disease as defined by the World Health Organization.
- for medical services.
- for monies payable in the form of a ransom, if a Missing Person case evolves into a kidnapping.
- arising from or attributable, in whole or in part, to:

- a debt, insolvency, commercial failure, the repossession of any property by any title holder or lien holder or any other financial cause;
- non-compliance by the Covered Person with regard to any obligation specified in a contract or license.
- failure of the Covered Person to cooperate with Us or Our assistance provider with regard to a Security Evacuation. Such cooperation includes, but is not limited to, failure to provide any documents needed to extricate the Covered Person, failure to follow the directions given by Our designated security consultants during a security evacuation.

If the Covered Person refuses to participate in a Security Evacuation, or any part of a Security Evacuation, no further benefits will be payable under the Security Evacuation Expense Benefit for that Occurrence.

Trip Cancellation Benefit - We will reimburse you for the amount of non-refundable Covered Expenses you paid for your Trip, up to \$2,500, if you are prevented from taking your Trip as the result of Terrorism, Injury, Sickness, or you or your Family Member's death prior to the scheduled Trip departure date. The Injury or Sickness must be so disabling as to reasonably cause a Trip to be canceled. If you must cancel the Trip due to Injury or Sickness of a Family Member, it must be because his or her condition is life-threatening, or because the Family Member requires your care. Cancellation due to the death of a Family Member is covered under only if the death occurs within 30 days of your scheduled Trip departure date.

Covered Expenses: 1) any cancellation charges imposed by a travel agency, tour operator, or other recognized travel supplier for the Covered Trip; 2) any prepaid, unused, non-refundable airfare and sea or land accommodations; 3) any other reasonable additional Trip expenses for travel, lodging, or scheduled events that are prepaid, unused, and non-refundable.

"Terrorism" means: 1) An act of violence directed against American interests and determined by United States officials to be a terrorist act. The terrorist act must occur within any country of destination and after your enrollment form and premium are received for the Trip Cancellation coverage and within 45 days of the date you are originally ticketed to travel; or 2) An act of violence directed at or occurring in an aircraft traveling or scheduled to travel where you are ticketed to travel, that is determined by United States officials to be a terrorist act. The terrorist act must occur after the enrollment form and premium are received for your Trip Cancellation coverage and within 45 days of the date you are ticketed to travel; or 3) The issuance of a Level 4 Travel Advisory (T) by the United States Department of State to avoid a country of destination to which you are ticketed to travel. As used by the State Department, "T" means Terrorism: terrorist attacks have occurred and/or specified threats against civilians, groups, or other targets may exist. The Level 4 Travel Advisory (T) must be issued after the enrollment form and premium are received for your Trip Cancellation coverage and within 45 days of the date you are ticketed to travel.

Trip Delay Benefit - We will reimburse Covered Expenses you incur if your trip is delayed for more than 12 hours. The maximum we will pay is \$100 per person per day up to 5 days, subject to a benefit maximum of \$500.

Covered Expenses include charges incurred for reasonable, additional accommodations and traveling expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable only for one delay of your Trip.

Travel Delay must be caused by one of the following reasons: a) Injury, Sickness or death to you; b) carrier delay; c) lost or stolen passport, travel documents or money; d) Natural Disaster; e) you being delayed by a traffic accident while en route to a departure; f) hijacking; g) unpublished or unannounced strike; h) civil disorder or commotion; i) riot; j) inclement weather which prohibits Common Carrier departure; k) equipment failure of a Common Carrier; l) a Common Carrier strike or other job action; or m) the loss of your and/or your traveling companion's travel documents, tickets or money due to theft.

Your Duties in the Event of Loss: you must provide Us with proof of the Travel Delay such as a letter from the airline, cruise line, or Tour operator/ newspaper clipping/ weather report/ police report or the like and proof of the expenses claimed as a result of Trip Delay.

Trip Interruption Benefit - We will reimburse the cost of a round-trip economy air and/or ground transportation ticket for your Trip, up to 5,000 if your Trip is interrupted as the result of: 1) the death of a Family Member; or 2) the unforeseen Injury or Sickness of you or a Family Member. The Injury or Sickness must be so disabling as to reasonably cause a Trip to be interrupted; or 3) a Medically Necessary covered Emergency Medical Evacuation to return you to your Home Country or to the area from which you were initially evacuated for continued treatment, recuperation and recovery of an Injury or Sickness; or 4) substantial destruction of your principal residence by fire or weather related activity. "Family Member" means your parent, sister, brother, spouse, child, grandparent, or in-law.

Accidental Death and Dismemberment Benefits - If your Injury results, within 365 days from the date of a Covered Accident, in any one of the losses shown below, We will pay the Benefit Amount shown below for that loss. Your Principal Sum is \$100,000. If multiple losses occur, only one Benefit Amount, the largest, will be paid for all losses due to the same Covered Accident.

Schedule of Covered Losses

Covered Loss	Benefit Amount
Life	100% of the Principal Sum
Two or more Members.....	100% of the Principal Sum
Quadriplegia.....	100% of the Principal Sum
One Member	50% of the Principal Sum
Hemiplegia	50% of the Principal Sum
Paraplegia	50% of the Principal Sum
Thumb and Index Finger of the Same Hand	25% of the Principal Sum
Uniplegia	25% of the Principal Sum

“Quadriplegia” means total Paralysis of both upper and lower limbs. “Hemiplegia” means total Paralysis of the upper and lower limbs on one side of the body. “Uniplegia” means total Paralysis of one lower limb or one upper limb. “Paraplegia” means total Paralysis of both lower limbs or both upper limbs. “Paralysis” means total loss of use. A Doctor must determine the loss of use to be complete and not reversible at the time the claim is submitted.

“Member” means Loss of Hand or Foot, Loss of Sight, Loss of Speech and Loss of Hearing. “Loss of Hand or Foot” means complete Severance through or above the wrist or ankle joint. “Loss of Sight” means the total, permanent Loss of Sight of one eye. “Loss of Speech” means total and permanent loss of audible communication that is irrecoverable by natural, surgical or artificial means. “Loss of Hearing” means total and permanent Loss of Hearing in both ears that is irrecoverable and cannot be corrected by any means. “Loss of a Thumb and Index Finger of the Same Hand” means complete Severance through or above the metacarpophalangeal joints of the same hand (the joints between the fingers and the hand). “Severance” means the complete separation and dismemberment of the part from the body.
Aggregate Limit - We will not pay more than \$1,000,000 for all Accidental Death & Dismemberment losses per Covered Accident. If, in the absence of this provision, We would pay more than this amount for all losses under the policy, then the benefits payable to each person with a valid claim will be reduced proportionately.

Exclusions and Limitations: We will not pay benefits for any loss or Injury that is caused by or results from:

- intentionally self-inflicted injury; suicide or attempted suicide. (applicable to Accidental Death and Dismemberment Benefit only)
- war or any act of war, whether declared or not.
- a Covered Accident that occurs while a Covered Person is on active duty service in the military, naval or air force of any country or international organization. Upon receipt of proof of service, we will refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days.
- piloting or serving as a crewmember in any aircraft (unless otherwise provided in the Policy).
- commission of, or attempt to commit, a felony.
- sickness, disease, bodily or mental infirmity, bacterial or viral infection, or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food (Applicable to accident benefits only).
- riding in any aircraft except as a fare-paying passenger on a regularly scheduled or charter airline.

In addition, We will not pay Medical Expense Benefits for any loss, treatment, or services resulting from:

- routine physicals, immunizations, or other examinations where there are no objective indications or impairment in normal health.
- routine dental care and treatment.
- routine nursery care.
- cosmetic surgery, except for reconstructive surgery needed as the result of an Injury.
- eye refractions or eye examinations for the purpose of prescribing corrective lenses or for the fitting thereof; eyeglasses, contact lenses, and hearing aids.
- services, supplies, or treatment including any period of Hospital confinement which is not recommended, approved, and certified as Medically Necessary and reasonable by a Doctor, or expenses which are non-medical in nature.
- treatment or service provided by a private duty nurse.

- treatment by any Immediate Family Member or member of the Insured's household.
- expenses incurred during travel for purposes of seeking medical care or treatment, or for any other travel that is not in the course of the Policyholder's activity (unless Personal Deviations are specifically covered).
- medical expenses for which the Covered Person would not be responsible to pay for in the absence of the Policy. Expenses incurred for services provided by any government Hospital or agency, or government sponsored-plan for which, and to the extent that, the Covered Person is eligible for reimbursement.
- any treatment provided under any mandatory government program or facility set up for treatment without cost to any individual.
- custodial care.
- services or expenses incurred in the Covered Person's Home Country.
- elective treatment, exams or surgery; elective termination of pregnancy.
- expenses for services, treatment or surgery deemed to be experimental and which are not recognized and generally accepted medical practices in the United States.
- expenses payable by any automobile insurance policy without regard to fault.
- organ or tissue transplants and related services.
- Pre-Existing Conditions, unless otherwise provided in the Policy.
- Injury or Sickness for which benefits are paid or payable under any Workers' Compensation or Occupational Disease Law or Act, or similar legislation, whether United States federal or foreign law.
- Injury sustained while participating in intercollegiate, interscholastic, professional or semi-professional sports.
- birth defects and congenital anomalies, or complications which arise from such conditions.
- Injury resulting from off-road motorcycling; scuba diving; mountain climbing (where ropes or guides are used); sky diving; amateur automobile racing; automobile racing or automobile speed contests.
- pregnancy or childbirth. This does not apply if treatment is required as a result of a Medical Emergency.

In addition to the Policy Exclusions, We will not pay Lost Baggage, for:

- Loss or damage due to:
 - i. Moth, vermin, insects, or other animals; wear and tear; atmospheric or climatic conditions; or gradual deterioration or defective materials or craftsmanship;
 - ii. Mechanical or electrical failure;
 - iii. Any process of cleaning, restoring, repairing, or alteration;
- More than a reasonable proportion of the total value of the set where the loss or damaged article is part of a set or pair;
- Devaluation of currency or shortages due to errors or omissions during monetary transactions;
- Any loss not reported to either the police or transport carrier within 24 hours of discovery;
- Any loss due to confiscation or detention by customs or any other authority.

If We determine the benefits paid under the Policy are eligible benefits under any other benefit plan, We may seek to recover any expenses covered by another plan to the extent that you are eligible for reimbursement.

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims.

Personal Liability Coverage

A. Personal Liability Insurance Coverage: We will pay \$500,000 per claim and per Claim Expense, inclusive of defense costs, subject to a \$0 deductible, on your behalf all sums which you shall become legally obligated to pay as Damages for personal liability claims first made against you and reported to Us, during the Policy Term that the Personal Liability Insurance Coverage is in force, arising out of any Incident covered under this coverage, provided always that such Incident occurs: (a) on or after the Policy Effective Date on which this Coverage becomes effective; or (b) on or after the effective date of the earliest claims-made policy covering you. The Aggregate Limit per Insured for any Claim or Claim Expenses, inclusive of defense costs, per Policy Term is \$500,000. We will have the right and duty to defend any suit against you seeking Damages to which this coverage applies even if any of the allegations of the suit are groundless, false or fraudulent. We may make such investigation and settlement of any Claim, or suit as it deems expedient. In no event, shall We be obligated to pay Damages or Claim Expenses or to defend, or continue to defend, any suit after the applicable Maximum Benefit per Claim or Aggregate Limit per Insured has been exhausted by payment of Damages.

Other Insurance: If other valid and collectible insurance is available to you for a covered loss, Our obligations are limited as follows: (a) **Primary Insurance:** This insurance is primary over the Policyholder's liability insurance. If this insurance is primary, CL1

Our obligations are not affected unless any insurance other than the Policyholder's insurance is also primary. Then we will share with all that other insurance by the Method of Sharing described in (b) below. (b) **Method of Sharing:** If the other insurance permits the contribution by equal shares, We will follow this method also. Under this approach, each insurer contributes equal amounts until it has paid its applicable limit of insurance or none of the loss remains, whichever comes first.

B. Medical Payments Coverage: We will pay up to \$5,000 on your behalf for Medical Expenses that are incurred or medically ascertained within 52 weeks after the date of the Incident and which result from an Incident causing Bodily Injury to: (a) a person who is on the Insured Location with the permission of the Host Family; or (b) a person not on the Insured Location. Medical Expenses are defined as those expenses recommended and approved by a doctor for hospital room and board, use of an operating room, emergency room, ambulatory medical center, fees of physicians and nurses, laboratory tests, prescription medicines or drugs, anesthetics, transfusions, diagnostic testing, and therapeutics. We will pay the benefit pursuant to this provision only after you have submitted to Us, due proof of the Medical Expenses incurred. This coverage does not apply to you.

C. Additional Living Expenses Coverage: If an Incident results in the Insured Location becoming unfit to live in, We will pay for any necessary increase in living expenses incurred by the Host Family so that the household can maintain its normal standard of living. Payment will be for the shortest time required to repair or replace the damage to the Insured Location or, if the Host Family permanently relocates, the shortest time required for the Host Family to settle elsewhere. We will pay the Host Family benefits, up to \$5,000, on your behalf per Policy Term for Additional Living Expenses. We will pay the benefit pursuant to this provision only after you have submitted to Us due proof of the Additional Living Expenses incurred.

D. Payment of Deductible Under Homeowner's Insurance Coverage: If an Incident results in a claim being paid under a valid and collectible homeowner's insurance policy of the Host Family covering the Insured Location, We will pay the Host Family for the loss incurred, up to the amount of the deductible under the Host Family's homeowner's insurance policy, up to \$1,000, per Policy Term. We will pay the benefit pursuant to this provision only after you have submitted to Us due proof of the deductible amount which was incurred.

Exclusions and Limitations: No Benefit will be payable as the result of: 1) Bodily Injury or Property Damage arising out of the ownership, maintenance, operation, use, loading or unloading of any Automobile, watercraft, Mobile Equipment or aircraft owned or operated by you or rented or loaned to you; 2) Based on or arising out of liability assumed by you under any contract or agreement, except liability arising out of the performance of written duties required by the Policyholder as part of the covered Trip/Program; 3) Arising out of discrimination on the basis of age, sex, race, religion, marital status, national origin or sexual preference by you, including Personal Injury resulting therefrom; 4) Arising from the transmission of or infection by, or the testing or the failure to test for the presence of Acquired Immune Deficiency Syndrome (AIDS), any AIDS related virus or any other disease transmitted through sexual contact or another person's body fluids; 5) Dishonest, fraudulent, criminal or malicious act or omission or deliberate misrepresentation committed by you, at your direction, or with your knowledge; 6) Arising from acts committed by you expected or intended to cause Bodily Injury or Property Damage sustained (This exclusion does not apply to Bodily Injury resulting from the use of reasonable force to protect person or property.); 7) Arising from any obligation for which you or any carrier as your insurer may be held liable under any worker's compensation, unemployment compensation or disability benefits law, or under any similar law; 8) Property Damage to property owned or being transported by you, or rented to, occupied by you or in your care; 9) Brought against you alleging, in whole or part sexual assault, abuse, molestation or habitual neglect, or licentious, immoral, amoral other behavior that was threatened, committed, or alleged to have been committed, by you or by any person for whom you are legally responsible; however, notwithstanding the foregoing, you shall be protected under the terms of this policy as to any claim and/or allegation which may be covered by the policy upon which suit may be brought against you, for your such alleged behavior unless a judgment or a final adjudication adverse to you shall establish that such behavior occurred as an essential element of the cause of action so adjudicated; 10) Injuries caused by or contributed to by the use of controlled substances not administered by doctor; 11) Bodily Injury or Property Damage arising from the use of alcohol, intoxicants or any drug unless prescribed by a doctor; 12) Bodily Injury or Property Damage due to war, whether or not declared, civil insurrection, rebellion or revolution or to any act or condition incidental to any of the foregoing; 13) Personal Injury to you; 14) Brought against you arising out of your business pursuits, investments, or other for-profit activities; 15) Injuries caused directly or indirectly by nuclear reaction, radiation, contamination whether radioactive or not, regardless of how caused; or 16) Injuries caused directly or indirectly by pollution or asbestos, regardless of how caused.

Automobile means: a land motor vehicle, trailer or semi-trailer designed for travel on public roads, including any machinery or apparatus attached thereto. **Bodily Injury** means: bodily injury, sickness or disease sustained by any person, including death. **Claim(s)** means: a demand for money or the service of a suit naming you and alleging an Incident. Claim(s) does not include proceedings seeking injunctive or other non-pecuniary relief. Punitive damages will not be covered. **Claim(s) Expenses** means: (a) Fees charged by an attorney or attorneys designated by Us and all other fees, costs, and expenses resulting from

the investigation, adjustment, defense settlement and appeal of a Claim, suit or proceeding arising in connection therewith, if incurred by Us, or incurred by you with Our written consent, but does not include salary charges or expenses of regular employees or officials, or fees and expenses of independent adjusters; (b) All costs against you in such suits and all interest on the entire amount of any judgment therein which accrues after entry of the judgment and before We have paid or tendered or deposited, whether in court or otherwise, that part of the judgment which does not exceed Our limit of liability thereon; (c) Premiums on appeal bonds and premiums on bonds to release attachments in such suits, but not for bond amounts in excess of the applicable limit of liability of this policy. We will have no obligation to pay for or furnish any bond; (d) Up to \$250 for your loss of earnings for each day or part of a day of your attendance at Our request at a trial, hearing or arbitration proceeding involving a civil suit against you for covered Damages, but the amount so payable for any one or series of trials, hearings or arbitration proceedings arising out of the same Incidents will in no event exceed \$5,000. **Damages** mean: compensatory judgments, settlement or awards, but does not include punitive or exemplary damages, fines or penalties, the return of fees or other consideration paid to you, or that portion of any award or judgment caused by the trebling or multiplication of actual damages under federal or state law. **Host Family** means: the person(s) responsible for providing your room, board, general welfare, and care while on a covered Trip/Program. **Incident** means: any act or omission committed by you during the Policy Term which results in Bodily Injury, Property Damage or Personal Injury, provided the act or omission committed by you was during the Policy Term. **Insured Location** means: (1) the Host Family residence premises and the part of any other premises, structures and grounds you use; or (2) any part of a premises where you are temporarily staying. **Mobile Equipment** means: a land vehicle (including any machine or apparatus attached thereto, whether or not self-propelled), (1) not subject to motor vehicle registration, or (2) maintained for use exclusively on premises owned by or rented to you, including the ways immediately adjoining, or (3) designed for use principally off public roads, or (4) designed or maintained for the sole purpose of affording mobility to equipment of the following types forming an integral part of or permanently attached to such vehicle: power cranes, shovels, loaders, diggers and drills; concrete mixers (other than the mix-in-transit type); graders, scrapers, rollers and other construction or repair equipment; air compressors, pumps and generators, including spraying, welding and building cleaning equipment; and geophysical exploration and well servicing equipment, or (5) anything with a motor that rolls, flies or dives, such as snowmobiles, mopeds, motorbikes, dirt bikes or (6) anything that flies such as parasails, parachutes and hang gliders. **Personal Injury** means: (a) false arrest, detention or imprisonment, wrongful entry or eviction, other invasion of private occupancy, or malicious prosecution; (b) the publication or utterance of a libel, slander or other defamatory or disparaging material; or (c) a publication or an utterance in violation of an individual's right of privacy. **Property Damage** means: (a) physical injury to or destruction of tangible property, including the loss of use thereof at any time resulting therefrom; or (b) loss of use, or loss of the value of tangible property which has not been physically injured or destroyed.

Definitions: "Country of Permanent Assignment" means a country, other than your Home Country, in which the Policyholder requires you to work for a period of time that exceeds 365 continuous days. **"Country of Permanent Residence"** means a country or location in which you maintain a primary permanent residence. **"Covered Accident"** means an accident that occurs while coverage is in force for a Covered Person and results directly of all other causes in a loss or Injury covered by the Policy for which benefits are payable. **"Covered Person"** means any eligible person for whom the required premium is paid. **"Home Country"** means the country where a Covered Person has his or her true, fixed and permanent home and principal establishment or the United States. **"Injury"** means accidental bodily harm sustained by a Covered Person that results, directly and independently from all other causes, from a Covered Accident. All injuries sustained by one person in any one Covered Accident, including all related conditions and recurrent symptoms of these injuries, are considered a single Injury. **"Medical Emergency"** means a condition caused by an Injury or Sickness that manifests itself by symptoms of sufficient severity that a prudent lay person possessing an average knowledge of health and medicine would reasonably expect that failure to receive immediate medical attention would place the health of the person in serious jeopardy. **"Sickness"** means an illness, disease or condition that causes a loss for which you incur medical expenses while covered under the Policy. All related conditions and recurrent symptoms of the same or similar condition will be considered one Sickness. **"Trip"** means travel by air, land, or sea from your Home Country. It includes the period of time from the start of the trip until its end provided you are engaged in a Covered Activity or Personal Deviation if covered under the Policy. **"We, Our, Us"** means the insurance company underwriting this insurance or its authorized agent.

You must provide notification of a claim within 90 days of an Accident or Loss. If notice cannot be given within that time, it must be given as soon as reasonably possible. This notice should identify you, the Policyholder, and the Policy Number.

Policy Number: GLM N00060501, Underwritten by ACE American Insurance Company, 436 Walnut Street, Philadelphia, PA 19106

Contact Information: For customer service, eligibility verification, plan information, or to file a claim, contact: Administrative Concepts, Inc. (ACI) at 1-888-293-9229 (from inside the U.S.) or 610-293-9229 (from outside the U.S.);

fax 610-293-9299 for claims or inquiries, or e-mail aciclaims@acitpa.com. Mail claims to: PO Box 4000, Collegeville, PA 19426.

This Description of Coverage is a brief description of the important features of the insurance plan. It is not a contract of insurance. The terms and conditions of coverage are set forth in the Policy issued to the Policyholder. The Policy is subject to the laws of the state in which it was issued. Coverage may not be available in all states or certain terms or conditions may be different if required by state law. Please keep this information as a reference.

IMPORTANT NOTICE

This plan provides travel insurance benefits for individuals traveling outside of their home country. It does not constitute comprehensive health insurance coverage (often referred to as “major medical coverage”) and does not satisfy a person’s individual obligation to secure the requirement of minimum essential coverage under the Affordable Care Act (ACA).

For more information about the ACA, please refer to www.HealthCare.gov.

For medical evacuation, repatriation, or other assistance services call: AXA Assistance at 855-327-1414 (Toll-Free) or 1-630-694-9764 (Direct Dial); or UK/FOS +44 2039 015895; or e-mail medassist-usa@axa-assistance.us.

To access Chubb’s Travel Assistance Website go to travelassistance.chubb.com.

Travel Assistance Services: In addition to the insurance protection provided by your insurance plan, Chubb NA has arranged with our Assistance Provider to provide you with access to its travel assistance services around the world. These services include:

- Medical Assistance including referral to a doctor or medical specialist, medical monitoring when you are hospitalized, emergency medical evacuation to an adequate facility, medically necessary repatriation and return of mortal remains.
- Personal Assistance including pre-trip medical referral information and while you are on a trip: emergency medication, embassy and consular information, lost document assistance, emergency message transmission, emergency cash advance, emergency referral to a lawyer, translator or interpreter access, verifies medical benefits and assists with medical claims process.
- Travel Assistance including emergency travel arrangements, arrangements for the return of your traveling companion or dependents and vehicle return.
- Access to a secure, web-based system for tracking global threats and health or location based risk intelligence.
- Crisis hotline and on the ground security assistance to help address safety concerns or to secure immediate assistance while traveling.

When you call, please be prepared with the following information: 1) name of caller, phone number, fax number, and relationship to the Covered Person; 2) Covered Person’s name, age, sex, and the policy number for your insurance plan; 3) a description of the insured’s condition; 4) name, location, and telephone number of the hospital or other service provider; and 5) other insurance information including health insurance, workers’ compensation, or auto insurance if the insured was involved in an accident.

This information provides you with a brief outline of the services available to you. These services are not insured benefits. Reimbursement for any service expenses is limited to the terms and conditions of the policy under which you are insured. You may be required to pay for services not covered. A third party vendor may provide services to you. Our Assistance Provider makes every effort to refer you to appropriate medical and other service providers. It is not responsible for the quality or results of service provided by independent providers. In all cases, the medical provider, facility, legal counsel or other professional service provider suggested by Chubb’s Assistance Provider are not employees or agents of our Assistance Provider and the choice of provider is yours alone. Chubb’s Assistance Provider assumes no liability for the services provided to you under this arrangement, nor is it liable for any negligence or other wrongful acts or omissions of any of the legal or health care professionals providing services to you. Travel assistance services are not available if your coverage under the policy is not in effect.

