



GLOBAL ASSISTANCE AND INSURANCE PROGRAM

If you need Medical, Security or Travel assistance, regardless of the nature or severity of your situation, contact the On Call Global Response Center 24 hours a day, 7 days a week:

Call collect from anywhere in the world: +1 603-328-1325

Call toll free from US or Canada: 1-855-878-9589

Email: mail@oncallinternational.com

You will be connected directly with an Assistance Coordinator ready to assist you with your inquiry or problem. On Call provides you with a resource experienced in navigating through any crisis and making sure you can continue your trip, or get home safely. On Call assists during critical emergencies such as illness or injury that may require an evacuation or during a political or natural disaster event that may threaten your safety. On Call also assists with smaller problems you may not realize you have a resource for. Review a listing of services on the following pages.

Global Assistance Services must be paid and arranged by On Call; no claims for reimbursement of transportation will be considered.

If you are experiencing a medical emergency, you should proceed immediately to the nearest hospital or emergency department and then contact On Call as soon as you or a companion can safely do so.

The following Plan Description is a summary of coverage for insured participants. This is not a contract of insurance. Coverage is governed by an insurance policy issued to Texas Tech University Systems. The policy is underwritten by International Insurance Co. of Hannover Ltd. Complete information on the insurance is contained in the Certificate of Insurance on file with Texas Tech University Systems. If there is a difference between this program description and the certificate wording, the certificate controls.



DESCRIPTION OF SERVICES

I. GLOBAL ASSISTANCE SERVICES

1) MEDICAL ASSISTANCE SERVICES

- a. **Pre-Trip Plan** On Call shall provide up-to-date information either by e-mail, fax or over the phone regarding required vaccinations, health risks, travel restrictions and weather conditions for destinations worldwide.
- b. **Medical Monitoring** On Call shall, via telephone, email and fax, monitor the Participant's conditions when hospitalized. On Call shall maintain an appropriate level of contact with the treating physician and nursing staff as well as obtain relevant medical, surgical and treatment plan reports and information. On Call will use information obtained to assess the available level of care in relation to the patient's condition and geographical location where treatment is being performed.
- c. **24 Hour Nurse Help Line** On Call shall provide, at the Participant's request, 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 Participant's (based on symptoms reported and/or health care questions asked by or on behalf of Participant's). Nurses shall not diagnose Participant's ailments.
- d. **Prescription Replacement Assistance** If a Participant requires prescription medication or eyeglasses, On Call International will consult with the prescribing physician and locate and arrange to send the prescription medication or eyeglasses when it is possible and legally acceptable or arrange an appointment with a local medical provider.
- e. **Guarantee of Payment** Guarantees shall be made by On Call for any expenses either covered by a benefit of the Program or authorized by the Client.
- f. **Medical, Behavioral or Mental Health, Dental and Pharmacy Referrals** On Call shall provide, at the Participant's request, referrals to medical and/or dental professionals and pharmacies in the given geographic area locations of western style medical facilities and English speaking doctors, dentists and other healthcare providers in an area served by On Call to the extent possible.
- g. **Coordination of Benefits** On Call shall request primary health insurance information and/or any supplemental travel/secondary insurance from the participant and attempt to coordinate benefits during an active assistance case. Coordination includes attempt to facilitate direct payment of covered expenses from the insurer to the medical provider and facilitating assistance with claims documentation by notifying the insurance carrier and requesting a pre-certification of medical expenses.

2) MEDICAL TRANSPORTATION SERVICES

Terms, conditions and limitations included in Section II apply to services described in this section.

- a. **Emergency Medical Evacuation** On Call shall arrange and coordinate air and/or surface transportation and medical care during transportation to the nearest hospital where appropriate medical care is available.

Following a Medical Evacuation, if the Participant is discharged and deemed fit to travel unescorted, On Call shall arrange transportation to return the Participant to the original location or to the Participant's home if the reason for travel has ended.

- b. **Medical Repatriation** After being treated at a medical facility, On Call shall arrange the transport of the Participant with a qualified medical attendant to their residence or home hospital for further medical treatment or recovery.
- c. **Return of Remains** In the event of a Participant's death, On Call shall make the arrangements coordinate for casket or air tray, preparation and transportation of his/her remains to his/her place of residence or to the place of burial.

3) EMERGENCY (COMMERCIAL) TRAVEL SERVICES

Terms, conditions and limitations included in Section II apply to services described in this section.

- a. **Emergency Travel Arrangements (Visit by Family or Friend; Family Reunion)** If the Participant is hospitalized On Call shall arrange travel and suitable hotel accommodations for a person of the Participant's choice to join them.
- b. **Return of Dependent Children** If the Participant's Dependent(s) are present but left unattended as a result of the Participant's Medical Evacuation or hospitalization, On Call shall make arrangements to return them home, including a non-medical escort as needed.
- c. **Return of Traveling Companion** If a Participant's traveling companion loses previously-made travel arrangements due to a delay caused by the Participant's medical emergency or death, On Call shall arrange one-way economy airfare to return the companion to his or her original departure point.

4) TRAVEL ASSISTANCE SERVICES

- a. **Pre-Trip Information** On Call shall provide to Participants pre-trip information such as visa, passport and inoculation requirements; cultural information; weather conditions; embassy and consulate referrals; foreign exchange rates; and travel advisories.
- b. **24/7 Emergency Travel Arrangements** On Call shall assist Participant once a trip has started with changing airline, hotel or car rental reservations.
- c. **Translator and Interpreter Referral** On Call shall provide the Participant with access to an interpreter via telephone 24 hours a day or referrals to local translators and interpreters in the case of communication problems which cannot be solved via telephone.
- d. **Emergency Travel Funds Assistance** On Call shall provide assistance to Participants by arranging for the forwarding of funds from Participant's credit cards or family Participants.
- e. **Legal Consultation and Referral** If a Participant is arrested, or requires the services of an attorney, On Call shall arrange for an initial telephone consultation with an attorney without charge to Participant. If needed, a Participant will be referred to an attorney in the appropriate geographical area. This service applies only when a Participant is traveling internationally.
- f. **Lost/Stolen Travel Documents Assistance** On Call shall provide assistance to Participants for the replacement of passports, airline documents, birth certificates and other travel-related documents.
- g. **Emergency Message Forwarding** In the event a Participant is unable to reach an employer, family Participant or traveling companion, On Call shall forward a message via telephone to the intended party.
- h. **Lost Luggage Assistance** On Call shall assist the Participant with the tracking of luggage lost in transit.

5) SECURITY ASSISTANCE SERVICES

- a. **Travel Risk Brief** Upon request, On Call will email a country or city security overview that includes intelligence on crime, civil unrest, getting around, cultural info, embassies, vaccinations, health infrastructure.
- b. **Incident Briefing** Upon request, a Global Security Specialist will provide a non-emergency briefing following an incident to discuss impacts to current and future travel for an individual, group or operations in the location of the incident.
- c. **24/7 Global Security Specialist Assistance** If a Participant's safety is at risk, a Global Security Specialist is available 24 hours a day to provide immediate advice and assistance to the Participant or Client.

6) SECURITY TRANSPORTATION SERVICES

Terms, conditions and limitations included in Section II apply to services described in this section.

- a. **Political Evacuation** If Participant requires emergency evacuation due to political or military events, On Call will arrange the Participant's transportation to the nearest safe location, lodging within the safe haven and onward travel arrangements to their home or an alternate study or work location.

The method of transportation will be as deemed most appropriate to ensure the Participant's safety. If evacuation becomes impractical due to hostile or dangerous conditions, On Call will maintain contact with and advise Participant until evacuation becomes viable or the political or social upheaval has resolved.

Should commercial transportation be available, but transportation to the commercial transportation departure point represents an imminent threat to the Participants safety, On Call shall arrange secure transport to the departure point.

- b. **Natural Disaster Evacuation** If Participant requires emergency evacuation due to a Natural Disaster, On Call will arrange the Participant's transportation to the nearest safe location, lodging within the safe haven and onward travel arrangements to their home or an alternate study or work location.

The method of transportation will be as deemed most appropriate to ensure Participant's safety. If evacuation becomes impractical due to hostile or dangerous conditions, On Call will maintain contact with and advise the Participant until evacuation becomes viable or the natural disaster situation has been resolved.

Should commercial transportation be available, but transportation to the commercial transportation departure point will represents an imminent threat to the Participants safety, On Call shall arrange secure transport to the departure point.

7) ADMINISTRATION OF INTERNATIONAL MEDICAL EXPENSE COVERAGE

The Program includes Accident and Sickness coverage, Accidental Death and Dismemberment / Personal Accident benefit and other benefits as shown in Section II. Terms, conditions and limitations included in Section II apply.

II. Terms, Conditions and Limitations

BENEFIT TABLE	Covered / Not Covered	Limits Per Insured Person
Medical Evacuation and/or Repatriation	Covered	\$250,000
Repatriation of Remains or Burial	Covered	\$50,000
Security Evacuation	Covered	\$100,000
Emergency Reunion	Covered	\$12,500 when hospitalized for more than 3 days
Emergency Assistance	Included	Included
Medical Expenses and Hospitalisation	Covered	\$250,000
Deductible: All Cause / Co-Insurance	Covered	0 / 100%
Emergency Pain relieving Dental Treatment	Covered	100% of customary charges up to \$3,000 for accidental injury and \$500 for pain relief
Prescribed Medicines by a doctor or specialist	Covered	Maximum of 60 days per subscription
Maternity	Covered	Serious Complications up to 26 weeks of pregnancy
Outpatient treatment by a doctor or specialist	Covered	100 % of Customary Charges
Treatment by physiotherapists and chiropractors as prescribed by an authorized physician	Covered	100% of customary charges if in connection with covered injury/illness
Acute Onset of Pre-existing condition Clause	Covered	Up to a maximum of \$15,000 per lifetime
Ambulance transportation	Covered	100% of customary charges if in connection with covered injury/illness
Mental Health Disorder	Covered	Up to a maximum of \$10,000
Personal Accident Accidental death, loss of sight, loss of limb(s), permanent total disablement	Covered	\$15,000
Personal Liability Physical injury and property damage	Covered	\$100,000
Emergency Bail Bond	Covered	\$1,500
Catastrophe Coverage	Covered	100% of customary costs up to \$1,000
Search and Rescue	Covered	100% of customary costs up to \$10,000
Loss of Personal Belongings	Covered	Up to \$1,000, Max \$100 per article
Loss of checked in Luggage	Covered	\$500
Luggage Delay	Covered	\$200
Lost Documents, Equipment or Money	Covered	\$200
Trip Interruption	Covered	\$2,500
Travel Delay	Covered	\$100 a day; Max 5 days
Financial Instrument Reimbursement Benefit	Covered	Up to \$1,000
Legal Expense Benefit	Covered	Up to \$5,000
Continuing Medical Charges	Covered	\$20,000 or 30 days

PRE-EXISTING MEDICAL CONDITIONS

This policy provides for unseen medical events only. Pre-existing Medical Conditions are covered only up to USD 15,000 limit for acute onset of any medical condition. You are not covered for any claims that you make that related to a Pre-existing Medical Condition over this limit. These limitations apply to Medical Expense benefits only.

GENERAL CONDITIONS

Pre-authorization requirements for treatments, costs charges or expenses.

All Inpatient Hospital treatments or care, Surgery or Surgical Procedure, computerized tomography (CAT Scan) and Magnetic Resonance Imaging (MRI), Emergency Medical Evacuations and Repatriations, Repatriation of Remains and Burial, Emergency Reunions and Trip Interruption must be pre-authorized by Our Emergency Assistance Company,

If You do not comply with this pre-authorization requirement We will be unable to pay for Your treatments or costs, charges or expenses that You incur.

To comply with the pre- authorization requirements, You or a third party must:

1. Contact the Emergency Assistance Company at the telephone number contained in Your Certificate as soon as possible before the expense is to be incurred; and
2. Comply with the reasonable instructions of the Emergency Assistance Company and submit any information or documents they may reasonably require; and
3. Take reasonable steps to notify your treating Physicians, Hospitals and other providers that this Policy contains pre-authorization requirements and ask them to fully cooperate with Our Emergency Assistance Company.

If in an emergency it is not reasonably possible for You to obtain pre-authorization from Our Emergency Assistance Company for Inpatient Hospital treatments or care, Surgery or Surgical Procedure or Emergency Medical Evacuations and Repatriations. You or a third party must notify them as soon as reasonably practicable of admission as an In-patient in which case all Your charges will be paid by Us subject to the terms and conditions, benefit limits, restrictions and exclusions contained in this Policy.

Reciprocal Health Arrangements

If travelling within Europe, and you are eligible, you must obtain a European Health Card (EHIC). You can apply by postal application from Your local Post Office or online through www.dh.gov.uk/travellers or by telephoning 0845 606 2030. If travelling within Australia, and you are eligible, you must enrol for the free treatment available whilst in Australia. Details of how to enrol can be found in Health advice for Travellers booklet available from Your local Post Office or by visiting www.dh.gov.uk/travellers or the MEDICARE website on www.hic.gov.au

Right of Recovery

If any benefit paid to You or on Your behalf under this Policy is in excess of the amount allowed in the Benefit Table, or if a payment is made to You due to clerical or administrative error, then We reserve the right to recover such payment from You or any institution, insurer or other organization or party to whom such payment has been made.

Right of Repatriation

In the event of You requiring any medical treatment or Hospital or medical services, We may at our sole discretion arrange Your Repatriation to Your Home Country either before or after You receive medical treatment or Hospital or medical services if in the opinion of Our Emergency Assistance Company and Your treating Physician You are medically fit to travel and it is safe for You to do so. If You refuse to return when declared medically fit to do so We will not pay for any continuing medical treatment or Hospital or medical services or any recurrence or complications arising from or directly or indirectly related thereto.

Subrogation

Under the law applicable to this Policy, We have the legal right to stand in your shoes in the event that you make a claim under this policy and another party is responsible for causing the loss or damage. This is called Subrogation. We will be entitled to pursue Our rights of Subrogation in Your name and in doing so You will give Us reasonable information, documentation, co-operation and assistance to allow Us to do so. You agree not to make any payment, admit liability, offer or promise to make any payment without written consent from us.

Definitions

Each time We use one of the words or phrases listed below, it will have the same meaning wherever it appears in Your Policy unless We state otherwise. A defined word or phrase will start with a capital letter each time it appears in the Policy, except for headings and titles. Each Section of the Policy contains Definitions which apply to that particular Section and they must be read in conjunction with the following Policy Definitions.

Accident: A sudden, unintentional and unexpected occurrence caused by external, visible means and resulting in Your physical Injury.

Accidental Bodily Injury: Injury which is sustained by You as the result of an Accident which solely and independently of any other cause except surgical treatment rendered necessary by the Accident results in Your death, disablement or injury that incurs Medical Expenses.

Act of Terrorism: means an act, including but not limited to, the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s) committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

Acute Onset of a Pre-existing Medical Condition: A sudden and unexpected occurrence of a pre-existing medical condition which occurs spontaneously and without such advance warning as would have caused a prudent person to seek medical or dental attention prior to the onset of pain.

Acute Onset of Pain (Emergency Dental): A sudden and unexpected occurrence of pain which occurs spontaneously and without such advance warning as would have caused a prudent person to seek medical or dental attention prior to the onset of pain.

Adventure Activities and Sports: Abseiling, Archery, Ballooning (organised excursion), Baseball (excluding competitions), Boccer, Boogie Boarding, Bungee Jumping(maximum 2 jumps in all during Your Trip), Canoeing, Cricket, Cycling, Deep Sea Fishing, Fencing, European Football/Soccer (excluding competitions), Frisbee, Gliding, Go-Karting, Gymnastics, Light Aircraft (as a passenger), High Diving (platform only), Hiking under 6000m, Hockey (field only), Horse Riding (casual with no jumping), Hot Air Ballooning, Ice Skating, Jet skiing, Kayaking, Kite Surfing, Kite Buggy, Lacrosse, Marathon Running/Triathlon, Martial Arts Training (no contact) , Motorcycling up to 125cc where claims and conviction free for previous 3 years and where wearing a helmet, Mountain Biking (not off road), Overland Expedition, Paintballing, Quad Biking, Roller Blading, River Boarding, Safari, Sail Boarding, Sand Boarding, Scrambling, Scuba Diving (down to 30 meters only), Sea Canoeing, Skate Boarding), Surfing, Trekking (not requiring the use of ropes, guides or supplementary oxygen or under 6000 metres), Wake Boarding, Water Polo, Water Skiing, Weightlifting, White Water Rafting (grades 1-3), Windsurfing, Yachting (in territorial waters) Zip Wiring/Climbing

AIDS: Acquired Immune Deficiency Syndrome as that term is defined by the United States Centers for Disease Control.

Application: The completed and signed document submitted by You when applying for this Policy.

Appropriate Authorities: The Foreign and Commonwealth Office of the United Kingdom, The United States Department of State, the Foreign Office of Canada or similar authority of Your Home Country.

ARC: AIDS Related Complex as that term is defined by the United States Centers for Disease Control.

Athletics/Amateur Athletics: A sport or other athletic activity that is organized and/or sanctioned, involving regular or scheduled practices and/or regular or scheduled games. This definition does not include either athletic activities that are engaged in by You solely for recreational, entertainment or fitness purposes and not for wage, reward or profit.

Benefits Table: means the table of benefits set out in your Certificate

Certificate of Insurance / Schedule of Insured Persons: The document issued to You by the Participating Organization or the Plan Administrator which provides evidence of benefits payable under this Policy. If You are purchasing the coverage as an individual you will receive a Certificate of Insurance and if You receive the benefits as part of a group You will be listed in the Schedule of Insured Persons.

Certificate Period: means the dates of coverage period set out in your Certificate. The maximum Certificate Period is 12 months unless declared by You to Us and accepted by Us.

Children: Any person who is unmarried and under 19 years of age or 23 years of age if in full time education and is travelling with an adult insured under this policy.

Claims Handlers: means **On Call International** whose contact details are set out in this Policy above.

Close Relative: Your Partner, parent(s) or parent(s) in law, grandparent(s), brother(s), brother(s) -in-law sister(s), sister(s)-in-law, Dependents, grandchild(ren).

Coinsurance: The payment made by You of any of the Benefits at the percentage stated in the Benefit table and/or as shown on the Certificate of insurance.

Common Carrier: An airplane, bus, train or watercraft operating for commercial purposes and carrying fare-paying passengers on regularly scheduled and published routes.

Complications of Pregnancy: Illnesses prior to the 26th week of Your pregnancy whose diagnoses are distinct from Pregnancy, but are adversely affected by Pregnancy or caused by Pregnancy and not associated with a normal Pregnancy. This includes: ectopic Pregnancy, spontaneous abortion, hyperemesis gravidarum, pre-eclampsia, eclampsia, missed abortion and conditions of comparable severity. Complications of Pregnancy does not include: false labor, edema, prolonged labor, prescribed rest during the period of Pregnancy, morning sickness and conditions of comparable severity associated with management of a difficult Pregnancy, and not constituting a medically distinct condition.

Contact Sports: A sport or other athletic activity that necessarily involves physical contact with opposing players as part of normal play.

Coverage Period: The period of time starting on the Effective Date and ending on the End Date during which You are outside Your Home Country or travelling to or from or in the Host Country.

Custodial Care: The type of care or service, wherever furnished and by whatever name called, that is designed primarily to assist You in performing the activities of daily living. Custodial Care also includes non-acute care for the comatose, semi-comatose, paralyzed or mentally incompetent patients.

Deductible / Excess: A defined currency amount, as stated in the Benefit Table that You must pay per claim prior to any payment by Us.

Dental Treatment: The care of teeth, gums or bones supporting the teeth, including dentures and preparation for dentures.

Dependents: Your natural or legally adopted Children or legal wards, foster or step-child(ren) of You or those of Your Partner (where applicable) living at the same address who are no older than 19 years of age or 23 years of age if in full time education at the time of the event giving rise to a claim under this insurance Policy.

Documents: Means travel tickets, passports and driving licenses held by You for social, domestic and/or pleasure purposes.

Educational or Rehabilitative Care: Care for restoration (by education or training) of one's ability to function in a normal or near normal manner following an illness or injury. This type of care includes, but is not limited to, vocational or occupational therapy and speech therapy.

Effective Date: means the Effective Date specified on Your Certificate.

Eligibility Criteria: means the qualifications and requirements needed for You to purchase this Policy as set out in the General Conditions.

Eligible Person: means a person satisfying the Eligibility Criteria.

Emergency: A medical condition manifesting itself by acute signs or symptoms which could reasonably result in placing Your life or limb in danger if medical attention is not provided within 24 hours.

Emergency Assistance Company means On Call International whose contact details are set out in this Policy above.

Emergency Medical Evacuation: means Your transportation by air and/or surface transportation following Your Accidental Bodily Injury or Illness.

Emergency Security Company: means **Tangiers International via On Call International**

Emergency Security Evacuation: means Your extraction from the Host Country due to an Insured Event that puts You in imminent physical danger by the most efficient and available method of conveyance. In all cases and where practical, an economy ticket fare will be used and whenever possible Your common carrier tickets will be utilised.

End Date: Means the End Date specified on Your Certificate.

Extended Care Facility: An institution, or a distinct part of an institution, which is licensed as a Hospital, extended care facility or rehabilitation facility by the state or country in which it operates; and is regularly engaged in providing 24-hour skilled nursing care under the regular supervision of a Physician and the direct supervision of a Registered Nurse; and maintains a daily record on each patient; and provides each patient with a planned program of observation prescribed by a Physician; and provides each patient with active treatment of an illness or injury. Extended Care Facility does not include a facility primarily for rest, the aged, Substance Abuse treatment, Custodial Care, nursing care or for care of Mental Health Disorders or the mentally incompetent.

Felonious Assault: 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.

Geographic Location: The country or region You have stated you are travelling to.

Hazardous Activities and Sports: Bamboo Boat Rafting, Black Water Rafting, Bouldering, Bungee Jumping* (more than 2 jumps in all during Your Trip) Canyoning, Cave Tubing, Caving, Cycle Touring, Dog Sleighing, Hang Gliding, Horse Trekking, Ice Climbing, Flying in a Helicopter (as a passenger only) Jet Boating/Shotover Jet, Micro Lighting, Mountaineering (with ropes), Off-Road Mountain Biking, Potholing/Caving (as part of a group), Parachuting, Paragliding, Parapenting, Parasailing (behind a boat), Parapenting (behind a motorised vehicle), Polo, River Kayaking, Rock Climbing (with ropes), Sea Kayaking, Shark Cage Diving, Skydiving, Show-jumping, Spelunking or White Water Rafting (grade 4-5).

HIV+: Laboratory evidence defined by the United States Centers for Disease Control as being positive for Human Immunodeficiency Virus infection.

Home Country: For US Citizens, Home Country is the United States of America, regardless of the location of their principal residence. For non-US Citizens, Home Country is the country where they principally reside and receive regular mail.

Home Health Care Agency: A public or private agency or one of its subdivisions, which operates pursuant to law and is regularly engaged in providing Home Nursing Care under the supervision of a Registered Nurse, and maintains a daily record on each patient, and provides each patient with a planned program of observation and treatment by a Physician.

Home Nursing Care: Services provided by a Home Health Care Agency and supervised by a Registered Nurse, which are directed toward the personal care of a patient, provided always that such care is provided in lieu of Medically Necessary Inpatient care in a Hospital.

Hospital: An institution which operates as a hospital pursuant to law, and is licensed by the State or Country in which it operates; and operates primarily for the reception, care and treatment of sick or injured persons as Inpatients; and provides 24-hour nursing service by Registered Nurses on duty or call; and has a staff of one or more Physicians available at all times; and provides organized facilities and equipment for diagnosis and treatment of acute medical conditions on its premises; and is not primarily a long-term care facility, Extended Care Facility, nursing, rest, Custodial Care or convalescent home, a place for the aged, drug addicts, alcoholics or runaways; or similar establishment.

Host Country: Means the destination country within the Geographical Location You are traveling to.

Illness: A sickness, disorder, pathology, abnormality, ailment, disease or any other medical, physical or health condition. For purposes of this insurance, Illness includes Complications of Pregnancy during the first 26 weeks of Pregnancy. Illness does not include learning disabilities, attitudinal disorders or disciplinary problems.

Imminent Physical Danger: means You are subject to possible physical Injury or Illness that could result in Your grave physical harm or death.

Incurred: A charge is incurred on the date the service is provided or supply is purchased.

Injury: Bodily injury resulting from an Accident.

Inpatient: When You are an overnight resident patient of a Hospital, using and being charged for room and board.

Incidental Travel Days A related trip up to a maximum of 72 hours taken during and/or immediately after the coverage period for overnight stays outside Your Home Country or Your Host Country.

Intensive Care Unit: A cardiac care unit or other unit or area of a Hospital that, where applicable, meets the required standards of the Joint Commission on Accreditation of Hospitals for Special Care Units.

Investigational, Experimental or for Research Purposes: Terms used to describe procedures, services or supplies that are by nature or composition, or are used or applied, in a way which deviates from generally accepted standards of current medical practice.

Legal Permanent Resident: means a person who has been granted full lawful permanent residence as defined by the immigration law in the country of their legal permanent residence.

Loss of Limb: Loss by physical separation of a hand at or above the wrist or a foot at or above the ankle and includes total and irrecoverable loss of use of hand, arm or leg.

Loss of Sight: Permanent and total Loss of Sight shall be considered as having occurred:

- a) in both eyes, if You are added to the Register of Blind Persons in your Home County on the authority of a fully qualified ophthalmic specialist and is without hope of improvement;
- b) in one eye, if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale and is without hope of improvement.

Luggage: means the personal articles, which are Your property for which You are responsible and which are taken or acquired whilst travelling.

Medically Necessary: A service or supply which is necessary and appropriate for the diagnosis or treatment of an Illness or Accidental Bodily Injury based on generally accepted current medical practice. A service or supply will not be considered Medically Necessary if is provided only as a convenience to You and/or is not appropriate for Your diagnosed symptoms, and/or exceeds in scope, duration or intensity that level of care which is needed to provide safe, adequate and appropriate diagnosis or treatment of an Illness or Injury.

Medical Practitioner: means someone who practices medicine.

Mental Health Disorder: A mental or emotional disease or disorder which generally denotes a disease of the brain with predominant behavioral symptoms; or a disease of the mind or personality, evidenced by abnormal behavior; or a disorder of conduct evidenced by socially deviant behavior. Mental Health Disorders include: psychosis, depression, schizophrenia, bipolar affective disorder, and those psychiatric illnesses listed in the current edition of the diagnostic and Statistical Manual for Mental Disorders of the American Psychiatric Association.

Money: Coins, bank notes, postal or money orders, signed travelers checks and other checks letters of credit, travel tickets, petrol coupons or other prepaid coupons which belong to or are in the custody and control of You and are intended for travel, meals, accommodation and personal expenditure only.

Natural Disaster: Any avalanche, earthquake, flood, hurricane, impact event, landslides, mudslides, tornado, tsunami, tropical cyclone, typhoon, volcanic eruption, and wildfire.

Nearest Place of Safety: means a location determined by our Emergency Security Company where You can either be presumed safe from the Insured Event that precipitated Your Evacuation or a location that has available access to transportation to Your Home Country

Outpatient: When You receive Medically Necessary treatment by a Physician for Accidental Bodily Injury or Illness that does not require overnight stay in a Hospital.

Participating Organization: **Texas Tech University Systems** who is the organization that applies for coverage on Your behalf from the Plan Administrator.

Partner: Your spouse or civil partner living at the same address as You for the last 12 months and sharing financial living expenses and where applicable is also responsible for Your Dependents.

Permanent Total Disablement: Disablement that has lasted for at least twelve months and which in the opinion of a Physician is beyond hope of recovery and shall in all probability continue for the remainder of Your life and result in Your inability to perform or give attention to gainful occupation of any and every kind.

Personal Belongings: means personal articles, which are Your property; or property for which You are responsible and which is taken on or acquired during Your trip.

Physical Manual Work: Any work involving physical labor such as but not limited to building, butchery, construction, farming, fishing, forestry, meat packing, mining, maintenance or involving the use of power tools or hazardous equipment such as explosives.

Physician: Means a qualified doctor of medicine lawfully licensed to practice in the place where medical services are performed but this does not include You or a relative of Yours.

Plan Administrator: On Call International who is the insurance advisor You or the Participating Organization arranges coverage from.

Pre-existing Medical Condition: Any ongoing medical or dental condition or related complication You have or which you are aware of or have symptoms of or for which You are currently being or have been investigated or treated by a health professional (including dentist or chiropractor) or for which you take prescribed medicine or for which You have had or have planned surgery, or Pregnancy.

Pregnancy; Routine pre-natal care, child birth, and post natal care false labor, edema, prolonged labor, prescribed rest during the period of Pregnancy, morning sickness and conditions of comparable severity associated with the management of a difficult Pregnancy, and not constituting a medically distinct condition, and all charges related to Pregnancy other than for conditions constituting a medically distinct Complication of Pregnancy and only prior to the 26th week of Pregnancy or Abortions, except in connection with covered Complications of Pregnancy.

Proof of Claim: A completed and signed Claimant's Statement and Authorization Form provided by Our Claims Handler, together with any/all required attachments, original itemized bills from Physicians, Hospitals and other medical providers, original receipts for any expenses which have already been paid by or on behalf of the Insured, and any other documentation that is deemed necessary by Us.

Registered Nurse: A nurse who has been registered or licensed to practice by a State Board of Nurse Examiners or other state authority, and who is legally entitled to place the letters "RN" after his or her name.

Repatriation: means Your transportation by air and/or surface transportation with a qualified medical attendant to Your Home Country to obtain further medical treatment or to recover or both.

Repatriation of Remains: The ground or air transportation of Your bodily remains or ashes to Your Home Country including the costs of preparation of the remains necessary for transportation.

Routine Physical Exam: Examination of the physical body by a Physician for preventative or informative purposes only, and not for the diagnosis or treatment of any condition.

Student: means a person who is studying at college or university or other place of higher education.

Substance Abuse: Alcohol, drug or chemical abuse, overuse or dependency.

Surgery or Surgical Procedure: An invasive diagnostic procedure, or the treatment of Illness or Injury by manual or instrumental operations performed by a Physician while the patient is under general or local anesthesia.

Us, We or Our: The International Insurance Company of Hannover SE, UK Branch.

Unattended: Outside of Your custody, care and control and beyond the reasonable prospect of You being able to prevent unauthorized interference with it.

Usual, Reasonable and Customary: In relation to a charge, the most common charge for similar services, medicines or supplies within the area in which the charge is incurred, so long as those charges are reasonable. What is defined as Usual, Reasonable and Customary charges will be determined by the following factors: the level of skill, extent of training, and experience required to perform the procedure or service; the length of time required to perform the procedure or services as compared to the length of time required to perform other similar services; the severity or nature of the Illness or Injury being treated; the amount charged for the same or comparable services, medicines or supplies in the locality; the amount charged for the same or comparable services, medicines or supplies in.

Valuables: Cameras, photographic, audio, video, computer, telecommunications and electrical equipment, telescopes, binoculars, spectacles, sunglasses, antiques, watches, jewelry, furs and articles made of precious stones and metals.

You or Your or Insured: means the person or persons named in the Certificate of Insurance as the insured or the insured's under this Policy.

Winter Sports: Big Foot Skiing, Bobsleigh/Skeleton/Luge, Curling, Glacier Crossing/Hiking, Heli-skiing/Boarding, Ice skating (other than on an indoor rink), Kite Skiing, Mono Skiing, Skiing (including off piste with a guide), Ski Bobbing, Skiing Cross Country, Snow Blading (on piste only), Snowboarding (including off piste with a guide), Snow Kiting, Snow Mobiles/Skidoos, Snow Shoeing, Tobogganing.

Work Abroad: Clerical office work of any kind or work in hospitality, entertainment, retail consumer or tourism.

General Exceptions

Each Section of the Policy contains specific Exceptions. They must be read in conjunction with the following Policy Exceptions which apply to all Sections unless otherwise stated.

The Policy does not cover

- a. Your claim for any losses that are not directly covered by the terms and conditions of this Policy.
- b. Your claim for additional expense(s) or fee(s) arising from errors or omissions in your booking arrangements or your failure to obtain relevant visa or passport documents.
- c. Your claim occurring because you act illegally or break any government prohibition, travel warning or regulation including visa requirements.
- d. Your claim occurring if You fail to be in compliance with all conditions and provisions of this insurance
- e. Your claim occurring from You being in control of or a motor cycle or vehicle without a current motorcycle or vehicle license valid for the country you are travelling in or You being a passenger travelling on a motorcycle or in a motor vehicle that is in the control of a person that does not hold a current motorcycle or motor vehicle license valid for the country you are travelling in.
- f. Your claim arising because You did not follow advice of Your Home Country government or Appropriate Authorities or other official body's warning against travel to a particular country or parts of a country
- g. Your claim arising from any act of war, whether war is declared or not, or from any rebellion, revolution, insurrection or taking of power by the military, any nuclear reaction or contamination from nuclear weapons or radioactivity, biological and or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and or create public fear or as a result of your service in the military, naval or air service of any country or Acts of Terrorism (other than for personal accident, medical expenses, Emergency Medical Evacuation, Repatriations , Repatriation of Remains and Burial and Emergency Reunion, Trip Interruption and Cancellation of trip where You have no direct or indirect involvement in the Act of Terrorism).
- h. Your claim arising from any participation you may undertake in either a professional or semi- professional basis for any sport, activity or Athletics.
- i. Your claim arising from any participation in Adventure Activities and Sports, Hazardous Activities and Sports or Winter Sports as defined herein unless this has been accepted by Us and the appropriate additional premium has been paid by You.
- j. Your claim arising because you dive underwater using an artificial breathing apparatus, unless you are PADI or NAUI certified or hold an open water diving license issued in the USA or you were diving under licensed instruction.
- k. Your claims arising from Your participation in any team sport (other than for non-competitive leisure or recreational purposes) Amateur Athletics (but this exclusion does not apply to You solely participating for recreational, entertainment, fitness, or intra-mural or inter-collegiate purposes and not for wage, reward or profit), american football, contact sports, martial arts, rugby, hunting and racing other than racing on foot.
- l. Your claim arising from treatment of Substance Abuse.
- m. Your claim occurring out of you flying other than as a passenger in a licensed passenger carrying aircraft or charter company.
- n. Your claim if You had attained the age of 81.
- o. Your claim arising from Your participation any other sport or athletic activity which is undertaken for thrill seeking and exposes You to abnormal or extraordinary risk of Injury.
- p. Your claims arising from Your failure to comply with the current safety rules and regulations in place for the sport or activity You are undertaking.
- q. Your claim arising from Your engaging in any form of Physical Manual Work as defined herein.

Medical Expenses and Hospitalization, Emergency Medical Evacuation and Repatriation

We will pay up to the amount stated in the Benefits Table if You sustain an Injury or suffer from an Illness which results in You being charged by a Hospital for services that are Usual, Reasonable and Customary and relate to services and supplies that are Medically Necessary for:

1. A semi private room and board including daily room and board and nursing services in an Intensive Care Unit, and other necessary services and supplies whilst confined in a Hospital for medical reasons.
2. Surgery at an Outpatient surgical facility, including services and supplies, the use of operating, treatment or recovery room, dressings, sutures, casts or other supplies which are Medically Necessary and administered by or under the supervision of a Physician.
3. Charges made by a Physician for professional services, including Surgery and reconstructive Surgery when it is directly related to Surgery which is covered hereunder.
4. Artificial limbs, eyes or larynx, breast prosthesis or basic functional artificial limbs, but not the replacement or repair thereof.
5. Prescription drugs which require prescription by a Physician for treatment of an covered Injury or Illness, but not for the replacement of lost, stolen, damaged, expired or otherwise compromised drugs, for a maximum supply of 60 days per prescription.
6. Care in a licensed Extended Care Facility upon direct transfer from an acute care Hospital.
7. Home Nursing Care provided by a qualified licensed professional, provided by a Home Health Care Agency upon direct transfer from an acute care Hospital and only in lieu of Medically Necessary Inpatient hospitalization.
8. Emergency local ambulance transport necessarily incurred in connection with Your Accidental Bodily Injury or Illness.
9. Emergency Dental Treatment and dental Surgery necessary to restore or replace sound natural teeth lost or damaged in an Accident which was covered under this insurance.
10. Emergency Dental Treatment necessary to resolve the Acute Onset of Pain.
11. Physical therapy if prescribed by a Physician who is not affiliated with the physical therapy practice providing the physical therapy, provided that it is necessary, to continue recovery from a covered Injury or Illness.
12. Charges for the treatment of an Acute Onset of a Pre-existing Medical Condition up to a maximum benefit of USD 15,000 limit. You are not covered for any claims that you make that related to a Pre-existing Medical Condition over this limit

Maximum Benefit

The aggregate amount payable by Us for incurred Medical Expenses and Hospitalization for any one Accidental Bodily Injury or Illness will never exceed the amount stated in the Benefits Table.

Emergency Medical Evacuations

The cost of transporting the Insured Person by air and/or surface transportation If the Insured Person's medical condition warrants immediate transportation (due to inadequate medical facilities) by Our Emergency Medical Assistance Provider from the place where the Insured Person is located to the nearest adequate medical facility where medical treatment can be obtained, including the costs of all medical care and ancillary costs associated with that transportation.

Repatriation

After being treated at a local medical facility, and following the advice of Our Emergency Medical Assistance Provider and if the Insured Person's medical condition warrants it, the costs of transporting the Insured Person by air and/or surface transportation and with a qualified medical attendant to their Country of Domicile to obtain further medical treatment or to recover, or both.

Repatriation of Remains or Burial

Following Your death and with the agreement of Your executors or administrators We will pay up to the amount stated in the Benefits Table for the Repatriation of Your remains following Your death, including costs of preparation of the remains necessary for transportation, or for the cost of preparing Your remains for cremation or burial and a burial plot in the Host Country where Your death occurred.

Emergency Travel Expenses

We will pay up to the amount stated in the Benefits Table for the following Emergency Travel Expenses

The cost of an economy round-trip air or ground transportation ticket for one relative or friend to visit You if You are or are to be hospitalized for more than 3 days; and

1. Reasonable expenses for lodging and meals for that relative or friend to remain whilst You are hospitalised, for a period not to exceed 15 days.
2. The cost of any additional Hotel charges You incur following discharge but during any convalescence period with the relative or friend prior to Your return to Your Home Country, for a period not exceeding 15 days.

Extensions

Bereavement Reunion (if Covered as stated in the Benefits Table)

In the event of the death of the Insured Person whilst on an Insured Journey We will indemnify the Insured Person's estate for the cost of economy round trip transportation up to the amount stated in the Benefits Table for an assigned advocate to travel to the location of the Insured Person's death to accompany the remains back to the Country of Domicile.

Emergency Reunion due to Felonious Assault (if Covered as stated in the Benefits Table)

We will pay the reasonable cost of economy round trip transportation and accommodation up to the amount stated in the Benefits Table incurred by any one relative or friend who has to travel to remain with or escort You home to Your Country of Domicile following a Felonious Assault.

Return Home due to Felonious Assault (if Covered as stated in the Benefits Table)

We will pay the reasonable cost of economy transportation up to the amount stated in the Benefits Table Reasonable incurred by You to travel home to Your Country of Domicile following a Felonious Assault.

Chaperone Replacement (if Covered as stated in the Benefits Table)

In the event a chaperone or faculty leader designated by the Participating Organization for a group of travelers is unable to continue with the trip due to illness or injury, On Call will pay and arrange pay for a replacement faculty or chaperone designated by the Participating Organization to be flown to the group's location to take over the program.

Continuing Medical Charges (if Covered as stated in the Benefits Table)

In the event of a valid claim under for Medical Emergency Travel Expenses We will pay the reasonable and necessary cost of Hospital in-patient medical charges incurred by You immediately following the date of Your Repatriation to their Country of Domicile.

Return of Dependent Children (if Covered as stated in the Benefits Table)

In the event of the death or hospitalization of the Insured Person whilst on an Insured Journey which leaves dependent children traveling with the Insured Person unattended, We will indemnify the Insured Person's estate for the cost for transportation, and escort as required, to return dependent(s) to a designated advocate.

Exclusions for Medical Expenses, Emergency Medical Evacuation, Repatriation of Remains or Burial, Emergency Reunion or Extensions

We will not be liable for any expense arising directly or indirectly from:

- a. Charges for a Pre-existing Medical Condition over the maximum benefit of USD 15,000 limit. You are not covered for any claims that you make that related to a Pre-existing Medical Condition over this limit. This exclusion applies only to Medical Expenses.
- b. Pregnancy other than Complications of Pregnancy.
- c. Treatment for or related to any congenital condition, as defined herein.
- a. Charges for a Mental Health Disorder over the maximum benefit of USD 20,000 limit. You are not covered for any claims that you make that related to a Mental Health Disorder over this limit. This exclusion applies only to Medical Expenses.
- b. Surgeries, treatments, services or supplies which are Investigational, Experimental or for Research purposes.
- c. Weight modification or surgical treatment of obesity, including wiring of the teeth and all forms of intestinal bypass Surgery, modifications of the physical body in order to improve Your psychological, mental or emotional well-being such as sex-change Surgery, Surgeries, treatments, services or supplies for cosmetic or aesthetic reasons, except for reconstructive Surgery when such Surgery is directly related to and follows a Surgery which was covered hereunder.
- d. Treatment or procedure that either promotes or prevents conception or procedure that either promotes, enhances or corrects impotency or sexual dysfunction.
- e. Dental Treatment, except for Emergency Dental Treatment necessary to replace sound natural teeth lost or damaged in an Accident covered hereunder or for the Emergency relief of Acute Onset of Pain.
- f. Eyeglasses, contact lenses, hearing aids, hearing implants, eye refraction, visual therapy, and any examination or fitting related to these devices, and all vision and hearing tests and examinations for eye surgery, such as radial keratotomy, when the primary purpose is to correct near-sightedness, farsightedness or astigmatism, Immunizations and Routine Physical Exams.
- g. Any services or supplies performed or provided by a Close Relative of Yours or any other family member of Yours or any person who ordinarily resides with You
- h. The supply of medications commonly available without prescription.

Accidental death, Loss of Sight, Loss of Limb or Permanent Total Disablement

We will pay You, Your executors or Your administrators the relevant amount shown in the Benefit Table if, as a result of an Accident which results in Your Accidental Bodily Injury You suffer in one or more of the following:

- Your accidental death
- Your Loss of Sight (in one or both of Your eyes)
- You Loss of Limb
- Your Permanent Total Disablement

Payment of Benefit

We will not pay a claim for more than one of the accidental death, loss of sight, loss of limb or Permanent Total Disablement arising in conjunction with the same Accident.

Disappearance

If You have been missing for a period of 180 consecutive days and there is sufficient evidence to support the conclusion that Your death has been caused by Accidental Bodily Injury, You will be presumed to have died and the amount stated in the Benefit Table will be paid to Your executors or Your administrators. However they will repay any benefit if You are subsequently found to have been alive or are found alive.

The following exclusions apply to Accident death, Loss of Sight, Loss of Limb or Permanent Total Disablement

We will not be liable for any claim arising directly or indirectly from;

- a. Accidental Bodily arising as a result of Your Illness, sickness or disease where such illness, sickness or disease does not itself arise from prior Accidental Bodily Injury.
- b. Your Accidental Bodily Injury if it is caused directly or in-directly by any degenerative medical condition.

Personal Liability

We will indemnify You up to the amount stated in the Benefits Table in relation to Personal Liability for any one occurrence or a series of occurrences arising directly or indirectly from one source or original cause if You become legally liable to pay damages for accidentally injuring someone or causing accidental loss or damage to someone else's property. Included within these limits are:

1. All costs and expenses recoverable by a claimant from You.
2. All costs and expenses incurred with Our written consent.
3. Solicitors' fees for representation at any coroner's inquest or fatal accident enquiry or in any court of Summary Jurisdiction; except that in respect of occurrences happening in or claims or legal proceedings brought or originating in the United States of America and Canada.

For benefits to be payable under this section:

1. You must not make any admission, offer, promise, or indemnity without Our consent. We shall be entitled to take over and conduct in Your name the defence or settlement of any claim or to prosecute in Your name for Your own benefit any claim for indemnity or damages or otherwise and shall have full discretion in the conduct of any proceedings and in the settlement of any claim and You shall give all reasonable information and assistance as We may reasonably require. Every letter, claim, writ, summons and process shall be forwarded to us on receipt. Written notice shall be given to Us as soon as reasonably practicable should You have notice of any prosecution or inquest in connection with any circumstances that may give rise to liability under this Section.
2. We may at any time pay You in connection with any claim or series of claims the limit of Indemnity for personal liability stated in this section (after deduction of any sum(s) already paid by Us as compensation) or any lesser amount for which such claim(s) can be settled and upon such payment being made. We shall relinquish the conduct and control of and be under no further liability in connection with such claim(s) except for the payment of costs and expenses recoverable or incurred prior to the date of such payment.

The following exclusions apply to Personal Liability:

We shall not be liable for any expense arising directly or indirectly from:

- a. Your liability in respect of Accidental Bodily Injury to any person who is;
 - i. Under a contract of service or apprenticeship with You if such injury arises out of and in the course of their employment..
 - ii. A member of Your family.
 - iii. Also insured under this Policy.
- b. Your liability in respect of loss or damage to property belonging to or held in trust by You or in Your custody or control other than temporary accommodation occupied by You.
- c. Your liability in respect of Accidental Bodily Injury, loss or damage caused directly or indirectly in connection with the ownership, possession or use by You of:
 - i. Mechanically propelled vehicles (other than golf buggies used on golf courses and not on public roads).
 - ii. Aircraft, hovercraft, watercraft, (other than non-mechanically powered watercraft less than 30 feet in length used on inland waters).
 - iii. Firearms (other than sporting guns).
- d. Your liability in respect of Accidental Bodily Injury loss or damage arising directly or indirectly in connection with:
- e. Your ownership, possession or occupation of land or buildings, immobile property or caravans other than temporary accommodation occupied by You.
 - i. Any willful or malicious act committed by You..
 - ii. The carrying on by You of any trade, business or profession except as a Teacher.
 - iii. The supply of goods or services by You.
- f. Your Insanity, You being under the influence of alcohol, or drugs (except as medically prescribed) or Your drug addiction.
- g. Any liability assumed by You under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
- h. The cost of punitive or exemplary damages being damages intended to reform or deter You from engaging in conduct similar to that which formed the basis of your liability.

Emergency Bail Bond

We will make the arrangement of a Bail Bond up to the amount stated in the Benefit Table if You have been arrested following a car Accident.

We will only arrange for payment of this benefit following confirmation from you that:

You can confirm that the financial guarantee of any payment required by Us has been secured through Your credit card or personal assets and that no benefit will be made for payment due to any shortage of funds, error or omission, currency fluctuation or loss of value or any exclusion included under general exclusions.

Catastrophe Coverage

We will pay up to the amount stated in the Benefits Table if You are forced to move from Your pre-booked accommodation as a result of fire, lightning, explosion, earthquake, avalanche, storm, tempest, tsunami, hurricane, flood, medical epidemic or local government directive which is confirmed in writing by local or national authority for irrecoverable travel or accommodation costs necessarily incurred for You to continue with the trip or, if the trip cannot be continued, for Your return to Your Home Country.

The following exclusions are applicable to Catastrophe Coverage:

We will not pay any expense arising directly or indirectly from:

- a. Any costs incurred following Your decision not to remain in Your booked accommodation when official directives from local or national authorities state that it is acceptable to do so.
- b. Any costs or expenses payable by or recoverable from the tour operator, airline, hotel or other provider of services.

Emergency Security Evacuation and Repatriation Expenses

We will pay up to the amount stated in the Benefits Table if You require emergency evacuation to the nearest place of safety and repatriation to Your Home Country following evacuation as a result of an Insured Event as shown hereunder.

Insured Event

- a. Your Appropriate Authority issues travel advices for the Host Country You are staying in, recommending that certain categories of person which includes You should leave that country or region.
- or -
- b. The recognized Government in Your Host Country :
 - a) Declares a state of emergency necessitating immediate evacuation or
 - b) Formally recommends or instructs that You should leave that country or region for safety or
 - c) Expels You or declares You "persona non grata".
- c. Natural Disaster within Your Host Country which puts Your life in Imminent Physical Danger.
- d. The political or military events in the Host Country put Your life in Imminent Physical Danger.
- e. You are kidnaped or having a missing persons report filed with the local/international authorities.
- f. Following a verified physical attack or threat of physical attack on You.

For benefits to be payable under this section:

1. You must contact Our Crises Management Company as soon as reasonably practicable after You became aware of any situation that may give rise to an Insured Event or as soon as reasonably possible after the occurrence of the Insured Event. If the Crises Management Company is not so contacted, Our liability to pay any subsequent claim under this section will cease.
2. You must provide the Crises Management Company with all reasonable assistance and information requested in a timely manner.
3. You must follow the reasonable advice of the Crises Management Company at all times.
4. If You are entitled to any refund on unused tickets or returnable deposits or advanced payments We are entitled to deduct these from the value of any claim.
5. You must be able to reasonably prove that there is Imminent Physical Danger to Your Life with either physical or documented evidence.
6. You must be able to prove that, In the event of physical attack or threat of physical attack, such attack or threat occurred by either physical or documented evidence.

The following exclusions are applicable to Emergency Security Evacuation Expenses;

We will not pay any expense arising directly or indirectly from:

1. Your failure to reasonably prove that there is any Imminent Physical Danger to Your Life
2. Your taking part in any political activity or operations of any security or armed forces unless declared to and agreed by Us.

3. Your failure to maintain and possess duly authorised and issued required immigration, work, residence or similar visas or permits or other relevant documentation required in Your Host Country.
4. Any evacuation expenses or costs incurred more than 30 days after the event giving rise to your evacuation.
5. Any expense attributable in whole or in part to debt insolvency, commercial failure, the repossession of any property by any title holder or lien holder, or any other financial cause.
6. Any Losses incurred by You or claim costs that have been unnecessarily increased by Your unreasonable failure to follow the reasonable advice of Our Emergency Security Company

Search and Rescue

We will pay up to the amount stated in the Benefits Table for all reasonable and necessary costs incurred by the authorities in searching for You and bringing You to a place of safety You are either (1) reported missing and it is known or reported that You may have sustained Accidental Bodily Injury or suffered illness, or (2) the weather conditions are such that to in order to prevent Accidental Bodily Injury or the suffering of illness the police or rescue authorities instigate a search and rescue for You.

For benefits to be payable under this section:

1. You must comply at all times with local safety advice that is offered to all members of the public and You must comply with all recommendations and restrictions prevalent at the time.
2. You must agree that the chargeable proportion of any search and rescue made by Us will be limited to the amount stated in the Benefit Table.
3. You must agree that expenses will only be made by Us to the time where You are recovered by Our search and rescue team and no additional payment will be made by Us if we decided that continuing the search is no longer viable.
4. You must obtain an additional written report from the authorities and provided it to Us before an expense can be paid.

The following exclusions are applicable to Search and Rescue:

We will not pay any expense arising directly or indirectly from:

1. Any circumstances where You were knowingly endangering Your life.
2. Any activities where Your experience or skill level falls below those reasonably required to participate in such activities.

Loss of Personal Belongings

We will pay You up to the amount stated in the Benefit Table in relation to Loss of Personal Belongings if Your Personal Belongings are lost or stolen less a consideration, if applicable, for wear, tear and depreciation.

For benefits to be payable under this section:

1. You must ensure that any Valuables are locked in a suitable sized safe or safety deposit box provided by Your accommodation provider, or if safe or safety deposit box are not available, in Your locked accommodation and there is evidence that entry into the accommodation was effected by violent and forcible means
2. You must report the theft of Your Personal Belongings or Luggage to the Police (and the hotel management if it is stolen in a hotel) as soon as is reasonably practicable and an written report is obtained from the appropriate authorities and provided by You to Us.
3. You must provide proof of ownership of any Valuables.

4. You must provide proof of purchase of replacement items of clothing or toiletries.
5. Any loss or damage occurring in the custody of an airline or other transport carrier must be reported immediately upon discovery and in the case of an airline a Property Irregularity Report must be obtained by You and provided to Us.
6. You must take all reasonable precautions for the safety of any insured article.
7. We are entitled to take and keep possession of any valuable and to manage all aspects of any salvage in a reasonable manner. .
8. We will decide, based on our own opinion, whether we repair or replace any valuable for which a benefit it paid to You under this section. .

The following exclusions apply to Loss of Personal Belongings:

We shall not be liable for any expense arising directly or indirectly from:

- a. Any amount within the Deductible, as shown in the Benefits Table.
- b. Any Personal Belongings stolen from an Unattended vehicle unless
 - i. They were In the locked boot of the vehicle or concealed by a parcel shelf in the fixed position in a hatchback or estate vehicle or in the case of campervans and motorhomes locked away and out of public view.
 - ii. There is evidence that entry was affected by violent and forcible means.
 - iii. Other than between the hours of 8.00pm and 8.00am.
- c. Any Valuables stolen from an Unattended vehicle.
- d. Any Valuables left unattended by You in Your accommodation if the accommodation is left unlocked or the valuables were not left in a suitable sized safe or safety deposit box. However, this exclusion will not apply if a suitable sized safe or safe deposit box was not available and there is evidence that entry into the accommodation was effected by violent and forcible means.
- e. Loss of or damage to Valuables contained in baggage whilst such baggage is in the custody of an airline or other carrier and outside Your control.
- f. Loss or corruption of or damage to software, information or data contained in any computer, tapes or recording equipment or any consequential loss arising there from
- g. Loss or damage due to:
 - i. Moth, vermin, wear and tear, atmospheric or climatic conditions or gradual deterioration.
 - ii. Inherent mechanical or electrical failure, breakdown or derangement.
 - iii. Any process of cleaning, restoring, repairing or alteration.
- h. More than a reasonable proportion of the total value of a pair or set where the lost or damaged article is part of a pair or set.
- i. Loss of or damage to pedal or motor cycles, watercraft, prams, buggies, pushchairs and wheelchairs.
- j. Loss of or damage to stamps, documents (other than Passports), contact or corneal lenses, dentures, hearing-aids, fragile articles or business goods and samples.
- k. Loss due to confiscation or detention by customs or any other authority.
- l. Loss of or damage to sports equipment whilst in use.
- m. Any article more specifically insured or recoverable under any other insurance.
- n. Loss or damage to mobile phones or lap tops or tablets or other similar devices arising from any coverage under the manufacturer's warranty or, unexplained disappearance or, any loss of airtime or, loss or damage due to moisture or, superficial damage due to chipping or cracking screen or damage due to any theft not reported to the police within 24 hours.

Loss of checked in Luggage

We will pay You the amount stated in the Benefit Table in relation to Loss of Checked in Luggage if You are temporarily deprived of Your Luggage for at least 12 hours by the loss or miss-direction of Your Luggage by an International Airline Carrier subject to:

For benefits to be payable under this section:

1. The Lost Checked Luggage must have been checked by You in accordance with routine luggage checking procedures, for transportation on board a regularly scheduled commercial airline or cruise line, upon which You are a fare-paying passenger; and
2. You must file a formal claim for lost luggage with the transportation provider, and follow all instructions and take all measures as directed by the transportation provider to locate and retrieve the Lost Checked Luggage; and
3. You must provide Us with copies of all documentation of the claim filed with the transportation provider, and a written statement from the transportation provider confirming that the luggage was checked and after careful search, the luggage remains missing; and
4. Any expense will only be paid by Us 10 days after the items have been lost

Luggage Delay

We will pay up to the amount stated in the Benefits Table if the common carrier on which You are booked to travel on Your outward or return trip has delayed your Luggage due to strike, industrial action, adverse weather conditions, traffic flow congestion or mechanical breakdown for at least 24 hours. Prior to payment by Us, You must provide original written details from the airline, shipping company, coach or train operators detailing the length of and reason for the delay or, in respect of mechanical breakdown, a garage or motoring organization report confirming the date, cause and time of the breakdown .

The following exclusions are applicable to Luggage Delay:

We will not pay any expense arising directly or indirectly from:

- a. Your failure to check in for departure before the scheduled departure time and in accordance with the travel operator's ticket itinerary.
- b. Your departure or arrival was delayed as a result of strike or industrial action that was public knowledge when Your travel arrangements were first booked.
- c. Your failure to obtain written confirmation from Your carriers or the handling agents of the total time of the Luggage delay and the reason for such delay
- d. Compensation is recoverable from the common carrier

Legal Expense Benefit

We will reimburse legal fees incurred by You up to the amount stated in the Benefits Table, in defense of a legal action taken against You arising from Your participation in an activity related to the Participating Organization. Coverage must be in-force under the policy at the time the incident causing the legal action occurs. Covered expenses include reasonable attorney's fees to defend, mediate or arbitrate a claim, court costs, other fees, costs and expenses resulting from the investigation or defense of a suit or proceeding in which You are a named party.

This benefit does not cover bail, fees or expenses of an independent adjuster, damages, settlements or any salaries, office expenses or incidental expenses incurred by the Participating Organization, the Insured, or anyone related to the Insured.

Financial Instrument Reimbursement Benefit

We will reimburse expenses incurred on Your behalf for loss or damage to a Financial Instrument up to the amount stated in the Benefits Table. You must take all reasonable precautions for the safety of any covered Financial Instrument.

In addition to the Policy Exclusions, We will not pay Financial Instrument Reimbursement Benefits for:

- a. any loss not reported to either the police or transport carrier within 24 hours of discovery
- b. any loss or damage due to confiscation or detention by customs or any other authority
- c. any loss not reported to Our not coordinated by Our Emergency Assistance Company

Lost Documents or Money

We will pay up to the amount stated in the Benefits Table if Your personal Documents or Money are lost or stolen:

For benefits to be payable under this section:

1. You must ensure your documents or monies are in a locked safe or safety deposit box provided by Your accommodation provider and there must be evidence of forcible and violent entry for any benefit to be paid.
2. You must report the loss to the police or equivalent local law enforcement authority as soon as reasonably practicable after discovery and a written police report obtained and sent to Us.

The following exclusions are applicable to Lost Documents or Money:

We will not be liable for any expense arising directly or indirectly from;

- a. Any amount within the Deductible, as shown in the Benefits Table.
- b. Loss due to confiscation or detention by customs or any other authority.
- c. Loss due to devaluation of currency or shortage due to error or omission during monetary transaction
- d. Loss of promotional vouchers or awards or any goods or services obtained through the conversion of such voucher or awards
- e. Loss of travelers' checks where the issuing company provides a replacement service
- f. Loss of travelers' checks or checks not reported to the local bank or agent of the supplier as soon as reasonably practicable.
- g. Any loss resulting from loss or theft of credit cards
- h. Money and/or documents left unattended by You in Your accommodation if the accommodation is left unlocked or the Money and/or documents were not left in a suitable sized safe or safety deposit box. However, this exclusion will not apply if a suitable sized safe or safe deposit box was not available and there is evidence that entry into the accommodation was affected by violent and forcible means.
- i. Money and/or documents in the custody of a person who does not have official responsibility for the safekeeping of the property

Pre-Trip Cancellation

We will pay the up to the amount stated in the Benefit Table for loss to You of deposits, or charges, or advance payments for travel or accommodation or other charges which have not or will not be used, but which become forfeit or payable under contract if You are forced to cancel Your arrangements as the direct and necessary result of Your Accidental Bodily Injury or Illness or the death or Accidental Injury or Illness of Your Partner, Dependents or Close Relative.

The following exclusions apply to Pre-Trip Cancellation:

We will not be liable for any expense arising directly or indirectly from:

- a. Any charges payable by the tour operator, hotel, airline or other carrier.
- b. Any surcharges levied by the tour operator that increase the brochure prices.
- c. Any losses arising from Your failure or delay in notifying the travel agent, tour operator or provider of service immediately it may be necessary to cancel Your travel arrangements.
- d. Any loss arising from Your financial failure, insolvency, bankruptcy or default or the Participating Organization, the travel agent, tour operator or organizer, accommodation provider or carrier.
- e. Your disinclination to travel.
- f. Any Cancellation due to Accident or Illness that has not been confirmed as being Medically Necessary by a Physician.
- g. The Pre-existing Medical Condition of Your Dependent or Close Relative before they purchased this Policy or the condition could have reasonably been expected to result in sudden deterioration in their health or their death or they had been given terminal prognoses.
- h. If You are called as an expert witness or Your occupation normally requires their attendance at court.
- i. You being aware at the time of purchasing this Policy of any reason why You might cancel.

Trip Interruption

We will pay up to the amount shown in the Benefit Table following receipt by Us of proof of the cost to You of an economy one-way air or ground transportation ticket for You to return to Your Home Country as the direct and necessary result of Your Accidental Bodily Injury or Illness or the death or Accidental Bodily Injury or Illness of Your Partner, Dependents or Close Relative or the destruction of your Principal Residence by fire or storm following departure from Your Home Country.

Travel Delay

We will pay up to the amount stated in the Benefits Table if the common carrier on which You are booked to travel on Your outward or return trip is delayed due to strike, industrial action, adverse weather conditions, traffic flow congestion or mechanical breakdown for at least 24 hours. Prior to payment by Us, You must provide original written details from the airline, shipping company, coach or train operators detailing the length of and reason for the delay or, in respect of mechanical breakdown, a garage or motoring organization report confirming the date, cause and time of the breakdown .

The following exclusions are applicable to Travel Delay:

We will not pay any expense arising directly or indirectly from:

- a. Your failure to check in for departure before the scheduled departure time and in accordance with the travel operators ticket itinerary.
- b. Your departure or arrival was delayed as a result of strike or industrial action that was public knowledge when Your travel arrangements were first booked.



- c. Your failure to obtain written confirmation from Your carriers or the handling agents of the total time of the delay and the reason for such delay
- d. Your failure to accept alternative means of transport within the time delay period where and when offered to You on reasonable terms.
- e. Compensation is recoverable from the common carrier