



## How to use UnitedHealthcare Global services

24 hours a day, 7 days a week, 365 days a year  
**For Non-U.S. Residents Traveling to the United States**

If you have a medical or travel problem, simply call us for assistance. Our standard telephone numbers are printed on your ID card. You can call us at the number listed below or email us:

**Toll Free:** 1-800-527-0218 / **Call:** +1-410-453-6330

**Email:** [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)

An assistance coordinator will ask for your name, the UnitedHealthcare Global ID number shown on your card, and a description of your situation. **If the condition is an emergency, you should go immediately to the nearest physician or hospital without delay and then contact the 24-hour Emergency Response Center.** We will then take the appropriate action to assist you and monitor your care until the situation is resolved.

**Payments arranged by UnitedHealthcare Global:** most physicians and hospitals will provide you with the necessary medical treatment and will either send their bill directly to UnitedHealthcare Global, or in the case of small dollar amounts, may ask you to pay at time services are rendered. Ask the hospital or physician to contact UnitedHealthcare Global. UnitedHealthcare Global will confirm your protection plan coverage and arrange for prompt payments if possible and where allowed. You will be asked to pay for any items not covered by your plan.

**Advance payment:** if you require admission to a hospital, We may arrange advance payment (directly to the provider) necessary for your admission to a hospital because of a covered injury or sickness, up to the maximum benefit amount shown in the Schedule of Benefits, provided you agree to reimburse us if it is determined that your medical expense claim is not covered.

We reserve the right to deny a request for advance payment if we confirm that your claim is not covered under the policy. An advance payment made by us is not a guarantee that your medical expense claims are covered.

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

**Payments made by you:** if you are required to pay for medical treatment, obtain a signed receipt and a signed statement by a physician describing the problem and the treatment. To initiate a claim for reimbursement, please contact:

UnitedHealthcare Global  
Emergency Response Center  
**Toll Free:** 1-800-527-0218 / **Call:** +1-410-453-6330

[www.uhcsafetrip.com](http://www.uhcsafetrip.com)

Once a claim is submitted, adjudication and payment will be handled by:  
Co-Ordinated Benefit Plans, LLC., P.O. Box 26222, Tampa, FL

## Worldwide emergency assistance services

These non-insurance services are provided by UnitedHealthcare Global. #

### Medical assistance services

**Worldwide medical and dental referrals:** upon your request, UnitedHealthcare Global will provide referrals to pre-approved physicians, hospitals, dentists, and dental clinics in the area you are traveling in order to assist you in locating appropriate treatment and quality care.

**Monitoring of treatment:** as and to the extent permissible, UnitedHealthcare Global will continually monitor your medical condition. Physician advisors will provide consultative and advisory services to UnitedHealthcare Global in relation to your medical condition, including review and analysis of the quality of medical care received by you.

**Facilitation of hospital payment:** upon securing payment or a guarantee to reimburse, UnitedHealthcare Global will either wire or guarantee funds needed for admitting you into a hospital for medical treatment.

**Relay of insurance and medical information:** upon your request and authorization, UnitedHealthcare Global will relay your insurance benefit information and/or medical records and information to a health care provider or treating physician, as appropriate and permissible, to help prevent delays or denials of medical care. UnitedHealthcare Global will also assist with hospital admission and discharge planning.

**Medication and vaccine support:** in the event a necessary medication or vaccine is not available locally, or a prescription medication is lost or stolen, UnitedHealthcare Global will provide the logistical support needed to get you the medication or vaccine, or their equivalent upon the prescribing physician's authorization, if it is legally permissible.

**Updates to family, employer, and home physician:** upon your approval, UnitedHealthcare Global will provide periodic case updates to appropriate individuals designated by you in order to keep them informed.

**Hotel arrangements:** UnitedHealthcare Global will assist you with the arrangement of hotel stays and room requirements before or after hospitalization or for ongoing care.

**Replacement of corrective lenses and medical devices:** UnitedHealthcare Global will assist with the replacement of corrective lenses or medical devices if they are lost, stolen, or broken during travel.

## Travel assistance services

**Replacement of lost or stolen travel documents:** UnitedHealthcare Global will assist you in taking the necessary steps to replace passports, tickets, and other important travel documents.

**Emergency travel arrangements:** UnitedHealthcare Global will make new reservations for airlines, hotels, and other travel services for you in the event of an illness or injury.

**Transfer of funds:** UnitedHealthcare Global will endeavor to provide you with an emergency cash advance subject to UnitedHealthcare Global first securing funds from you (via a credit card) or a person designated by you. Any bank or exchange fees will be incurred by you.

**Legal referrals:** should you require legal assistance, UnitedHealthcare Global will direct you to a duly licensed attorney in or around the area where you are located.

**Language services:** UnitedHealthcare Global will provide immediate interpretation assistance to you in a variety of languages in an emergency situation. If a requested interpretation is not available or the requested assistance is related to a non-emergency situation, UnitedHealthcare Global will provide you with referrals to interpreter services. Written translations and other custom requests, including an on-site interpreter, will be subject to an additional fee.

**Message transmittals:** you may send and receive emergency messages toll-free, 24-hours a day, through the UnitedHealthcare Global Emergency Response Center.

## Worldwide destination intelligence

**Destination profiles:** when preparing for travel, you can contact the Emergency Response Center to have a pre-trip destination report sent to you. This report draws upon the UnitedHealthcare Global intelligence database of over 280 cities covering subjects such as health and security risks, immunizations, vaccinations, local hospitals, crime, emergency phone numbers, culture, transportation information, entry and exit requirements. Our global medical and security database of over 170 countries and 280 cities are continuously updated and includes intelligence from thousands of worldwide sources.

© 2024 United HealthCare Services, Inc. All Rights Reserved. UnitedHealthcare Global is part of UnitedHealth Group, Incorporated. Insurance coverage under the UnitedHealthcare Global travel protection products is underwritten by Centurion Casualty Company or H&W Indemnity SPC for and on behalf of Global Solutions SP. Non-insurance assistance services are provided by or through United HealthCare Services Inc., or other UnitedHealth Group entities under the UnitedHealthcare Global brand. See more about our underwriters at [uhcsafetrip.com/faqs](https://uhcsafetrip.com/faqs). Claims administered by Co-Ordinated Benefits Plans, LLC, which is not related to UnitedHealth Group.

UnitedHealthcare Global shall not be responsible for the availability, timing, quality, results of, or failure to provide the travel assistance service described herein for any reason beyond its reasonable control, including, but not limited to, acts of God, acts of any government or governmental agency, war or other hostility, civil disorder, the elements, fire, explosion, power failure, equipment failure, industrial or labor dispute, pandemic, or the failure or inability of any third-party to perform.

**For Non-U.S. Residents Traveling to the United States**

**H&W Indemnity SPC for and on behalf of Global Solutions SP Travel Medical and Trip Cancellation** provides You with United States domestic travel medical, Trip cancellation Insurance, and Travel Assistance Services. The Insurance coverages and assistance services are shown on the following pages. For full United States domestic travel medical and Trip cancellation Insurance details, please see the enclosed Policy. For additional information please visit [www.uhcsafetrip.com](http://www.uhcsafetrip.com).

**NOTE:** Coverage is Secondary to any other benefits payable under any other medical or travel Policy, or compensation provided by a Common Carrier or Travel Supplier.

**SCHEDULE OF BENEFITS**

**Travel Insurance Features**

Trip Cancellation	100% of Insured Trip Cost; \$75,000 maximum, per policy
Hurricane & Weather	Included
Cancel for Work Reasons	Included
Trip Interruption	100% of Insured Trip Cost, per policy
Trip Delay	6+ hour delay; \$200 per day; \$600 maximum, per policy
Baggage Loss	\$250 per item; \$1,000 maximum, per person*
Baggage Delay	24+ hour delay; \$500 maximum, per person*
Sporting Equipment Loss	\$2,000 maximum, per person*
Sporting Equipment Delay	3+ hour delay; \$200 maximum, per person*
AD&D 24-hour Full Coverage	Principal Sum \$25,000, per person*
AD&D Common Carrier	Included in 24-hour Full Coverage
Accident & Sickness Medical Expense	\$50,000 maximum, per person; \$200,000 per policy
Emergency Dental Treatment	\$500 maximum, per person*
Palliative Dental Treatment	\$500 maximum, per person*
Medical Evacuation	\$1,000,000 maximum, per policy
Emergency Reunion	Included
Return of Dependent Child(ren)	Included
Medical Repatriation	Included
Return of Remains	\$50,000 maximum, per person*

*\*Not to exceed 10 people.*

*All benefits will be payable up to the maximum limits described in the above Schedule of Benefits.*

**POLICYHOLDER: ITA Global Trust Ltd. As Trustee of the Global Solutions Insurance Trust**

**POLICYHOLDER ADDRESS: Governors Square Unite 3-107A, PO Box 32203, Grand Cayman, KY1-1208, Cayman Islands**

**INSURER: H&W Indemnity SPC Ltd. for and on behalf of Global Solutions SP**

**INDIVIDUAL TRAVEL POLICY  
For Non-U.S. Residents Traveling to the United States**

**PLEASE READ THIS DOCUMENT CAREFULLY!**

The Policy is a legal contract between the Policyholder and H&W Indemnity SPC for and on behalf of Global Solutions SP.

This Policy is issued in the Cayman Islands by H&W Indemnity SPC for and on behalf of Global Solutions SP to ITA Global Trust Ltd. As Trustee of the Global Solutions Insurance Trust.

This Policy is not subject to U.S. jurisdiction.

Make sure to confirm the benefits and coverages for the plan that You purchased. Defined terms are capitalized, and their meanings are listed in the Definitions, Section III.

This Policy is a legal contract between Policyholder and the Company. As the Covered Person, it is important that You, and Your Traveling Companion(s) read this Policy carefully. Please refer to the Schedule of Benefits, which provides You, and Your Traveling Companion(s) with specific information about the program You purchased. You should contact the Company immediately if You believe that the Schedule of Benefits is incorrect.

Any payments under this Policy will only be made in full compliance with all *United States* economic or trade sanction laws or regulations, including, but not limited to, sanctions, laws and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"). Therefore, any expenses incurred, or claims made involving travel that is in violation of such sanctions, laws and regulations will not be covered under the policy. For more information, you may consult the OFAC internet website at [www.treas.gov/resource-center/sanctions](http://www.treas.gov/resource-center/sanctions) or a Company representative. In addition, coverage is not available in certain countries. For a complete list of excluded countries, please visit [www.uhcsafetrip.com](http://www.uhcsafetrip.com).

**30 DAY FREE LOOK:** If You are not satisfied for any reason, You may cancel Insurance under this Policy by giving the Company or the agent written notice within: (a) 30 days from the Effective Date of Your Insurance; or (b) prior to Your Scheduled Departure Date, whichever occurs first. If You do this, Your premium will be refunded, provided You have not already departed on the Trip or filed a claim. If premium is returned, all coverages under this Policy are invalid from date of initial purchase.

**Renewal:** Coverage under this Policy is not renewable.

**THIS IS LIMITED BENEFIT SHORT DURATION COVERAGE.**

**TABLE OF CONTENTS**

<b>SECTION I.</b>	<b>EFFECTIVE DATE AND TERMINATION DATE</b>
<b>SECTION II.</b>	<b>COVERAGES</b>
<b>SECTION III.</b>	<b>DEFINITIONS</b>
<b>SECTION IV.</b>	<b>GENERAL EXCLUSIONS AND LIMITATIONS</b>
<b>SECTION V.</b>	<b>PAYMENT OF CLAIMS</b>
<b>SECTION VI.</b>	<b>GENERAL PROVISIONS</b>

## SECTION I. EFFECTIVE DATE AND TERMINATION DATE

### When Coverage For Your Trip Begins – Coverage Effective Date:

**Trip cancellation:** Coverage begins at 12:01 a.m. on the day after the date the appropriate premium for this Policy is received by the Company.

**All Other Coverages:** Coverage begins when You, and Your Traveling Companion(s) depart on the first Travel Arrangement (or alternate Travel Arrangement if You or a Traveling Companion must use an alternate Travel Arrangement to reach Your Trip Destination) for Your Trip. This is Your “Effective Date” and time for all other coverages, except Trip cancellation.

### When Coverage For Your Trip Ends – Coverage Termination Date:

**Trip cancellation:** Your coverage automatically ends on the earlier of: 1) the date and time You or a Traveling Companion depart on Your Trip; or 2) the date and time You cancel Your Trip.

**All Other Coverages:** Your coverage will automatically end at 11:59 p.m. local time on the date that is the earliest of the following: 1) the date Your Trip is completed; 2) the Scheduled Return Date; 3) Your arrival at Your return Destination on a round-Trip, or the Destination on a one-way Trip; 4) cancellation of Your Trip covered by this Policy. Termination of this Policy will not affect a claim for loss that occurs after premium has been paid.

**Automatic Extension of Coverage:** All coverages under this Policy will be extended if Your entire Trip is covered by this Policy and Your return is delayed due to circumstances beyond Your control. This extension of coverage will end on the earlier of the date You reach Your originally scheduled return Destination or 5 days after the Scheduled Return Date.

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

**Accident and Sickness Medical Expense Extension:** If You are hospitalized due to a covered Injury or Sickness on Your Trip and a treating Physician certifies that You are not Medically Fit to Travel to Your Return Destination on Your Scheduled Return Date, this benefit will be extended for an additional 10 days, or until You are released from the Hospital and Medically Fit to Travel, or You reached the Maximum Benefit Amount shown in the Schedule of Benefits, whichever is earlier, provided that hospitalization goes beyond the date Your coverage ends.

## SECTION II. COVERAGES

### TRIP CANCELLATION

Prior to Your Trip departure, benefits will be paid, to reimburse You for the amount of unused non-refundable Prepaid Payments or Deposits You paid for Travel Arrangements, when You are prevented from taking Your Trip due to:

1. Your, a Family Member’s, or a Traveling Companion’s death, which occurs before departure on Your Trip;
2. Your, a Family Member’s, or a Traveling Companion’s covered Sickness or Injury, which:
  - a) occurs before departure on Your Trip;
  - b) requires Medical Treatment at the time of cancellation resulting in medically imposed restrictions, as certified by a Physician; and
  - c) prevents Your, or a Traveling Companion’s, participation in the Trip;
3. for the **Other Covered Reasons** listed below; provided such circumstances occur while coverage is in effect.

“**Other Covered Reasons**” means:

- a. You or Your Traveling Companion(s) being hijacked; government required Quarantine prior to Your Trip departure; required to serve on a jury (notice of jury duty must be received after Your Effective Date); served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
- b. Your or Your Traveling Companion’s primary place of residence or Destination being rendered uninhabitable and remaining uninhabitable during Your scheduled Trip, by fire, flood, burglary, or other Natural Disaster. The Company will only pay benefits for losses occurring within 30 calendar days after the Natural Disaster makes Your primary place of residence or Destination accommodations uninhabitable. Your Destination is uninhabitable if:
  - (i) the building structure itself is unstable and there is a risk of collapse in whole or in part;
  - (ii) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail, or flood;
  - (iii) immediate safety hazards have yet to be cleared such as debris on roofs or downed electrical lines; or

- (iv) the rental property is without electricity or water. Benefits are not payable if a storm, snowstorm, blizzard, or hurricane is named on or before the Effective Date of Your Trip cancellation coverage;
- c. after two years of continuous employment at the same company You have a permanent transfer of employment of 250 miles or more;
- d. You, or Your Traveling Companion(s) being directly involved in a traffic Accident, substantiated by a police report, while en route to Your, or a Traveling Companion(s), scheduled point of departure;
- e. You, or Your Traveling Companion, is in the military and called to emergency duty for a national disaster other than war;
- f. a Terrorist Incident that occurs within 30 days of Your Scheduled Departure Date in a city listed on the itinerary of Your Trip. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing You to cancel Your Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- g. revocation of Your, or a Traveling Companion's, previously granted military leave or re-assignment due to war. Official written revocation/re-assignment by a supervisor or commanding officer of the appropriate branch of service will be required;
- h. after two years of continuous employment at the same company Your, or a Traveling Companion's, previously approved time-off is revoked by Your, or a Traveling Companion's, employer;
- i. after two years of continuous employment at the same company, You, or a Traveling Companion, are terminated or laid-off from full-time employment by that company within 30 days of the date of Your Trip;
- j. weather that causes complete cessation of services of the Common Carrier for at least 48 consecutive hours and prevents You from reaching Your Destination. This benefit will not apply if the potential Natural Disaster has been forecasted or a storm has been named prior to purchase of this coverage;
- k. strike that causes complete cessation of services for at least 48 consecutive hours; (after Common Carrier/Travel Supplier reimbursements);
- l. the death or hospitalization of Your host at Destination;
- m. the primary or secondary school that You or Your Traveling Companion's dependent child(ren) attends continues classes beyond the predefined school year, due to Unforeseen circumstances that:
- 1) occur after Your Effective Date for Trip cancellation; and
  - 2) cause the classes to extend beyond the Scheduled Departure Date of Your Trip. Extensions due to extra-curricular or athletic events are not covered;
- n. Bankruptcy or Default of an airline, or Cruise line, or tour operator, other than an organization or firm from whom You, or a Traveling Companion, have purchased Travel Arrangements supplied by others causing a complete cessation of travel services provided the Bankruptcy or Default occurs more than 14 days following Your Effective Date. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You, or a Traveling Companion, to transfer to another airline in order to get to Your intended Destination. Coverage for these other covered reasons only applies if Your premium for this Policy is received within the time sensitive period.

Coverage will apply in the event of issued Alerts/Warnings, country-specific entry-bans or Quarantine requirements upon entry that would impact Your Trip only if this policy is effective prior to the issuance of such Alert/Warning, entry ban or Quarantine requirement. This includes Alert/Warnings, entry bans or Quarantine entry requirements related to named Epidemics or Pandemics.

**All cancellations must be reported to Us within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, the event should be reported as soon as possible. Increased amounts of unused non-refundable Prepaid Payments or Deposits that result from all other delays of reporting beyond 72 hours are not covered.**

The maximum payable under this Trip cancellation Benefit is the Maximum Benefit Amount shown in the Schedule of Benefits.

In addition to the General Exclusions and Limitations, the following additional limitations, and exclusions for Trip cancellation apply. Benefits are not payable for any loss due to, arising or resulting from:

1. Trip cancellation coverage for any reason not described above.
2. Trip cancellation based on an issued country-specific or a global Alert/Warning if the policy is effective after the Alert/Warning was issued. This includes Alert/Warnings related to named Epidemics or Pandemics.
3. Trip cancellation based on an issued country-specific entry ban if this policy was effective after the ban was issued. This includes bans related to named Epidemics or Pandemics.
4. Trip cancellation based on an issued Quarantine requirement upon entry if this policy was effective after the Quarantine requirement was issued. This includes Quarantines related to named Epidemics or Pandemics.
5. Trip cancellation based on Epidemic or Pandemic when no Alert/Warning has been issued.

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

## TRIP INTERRUPTION

While on Your Trip, benefits will be paid, to reimburse You for the Prepaid Payments or Deposits for:

- a. any Prepaid, unused, non-refundable land and water accommodations; such as Prepaid hotel accommodations, booked excursions or tours;
- b. an economy fare from the point where You ended Your Trip to a Destination where You can catch up to the Trip;
- c. a one-way economy fare to return You, or a Traveling Companion, to Your originally scheduled return Destination;

Trip interruption must be due to:

1. Your, a Family Member's, or a Traveling Companion's death, which occurs while You are on Your Trip;
2. Your, a Family Member's, or a Traveling Companion's covered Sickness or Injury which: a) occurs while You are on Your Trip, b) requires Medical Treatment at the time of interruption resulting in medically imposed restrictions, as certified by a Physician, and c) prevents Your, or a Traveling Companion's, continued participation on Your Trip;
3. For the **Other Covered Reasons** listed below; provided such circumstances occur while coverage is in effect.

**"Other Covered Reasons"** means:

- a. You, or Your Traveling Companion(s), being hijacked, government required Quarantine after Your Trip departure, required to serve on a jury (notice of jury duty must be received after Your Effective Date) served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
- b. Your or Your Traveling Companion's primary place of residence or Destination being rendered uninhabitable and remaining uninhabitable during Your scheduled Trip, by fire, flood, burglary, or other Natural Disaster. The Company will only pay benefits for losses occurring within 30 calendar days after the Natural Disaster makes Your Destination accommodations uninhabitable. Your Destination is uninhabitable if:
  - (i) the building structure itself is unstable and there is a risk of collapse in whole or in part;
  - (ii) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail, or flood;
  - (iii) immediate safety hazards have yet to be cleared such as debris on roofs or downed electrical lines; or
  - (iv) the rental property is without electricity or water. Benefits are not payable if a storm, snowstorm, blizzard, or hurricane is named on or before the Effective Date of Your Trip interruption coverage;
- c. You, or Your Traveling Companion(s), being directly involved in a traffic Accident, substantiated by a police report, while en route to Your, or Your Traveling Companion(s), scheduled point of departure;
- d. You, or Your Traveling Companion(s), are in the military and called to emergency duty for a national disaster other than war;
- e. a Terrorist Incident that occurs within 30 days of Your Scheduled Departure Date in a city listed on the itinerary of Your Trip. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing Your interruption of the Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- f. revocation of Your, or Your Traveling Companion's, previously granted military leave or re-assignment due to war. Official written revocation/re-assignment by a supervisor or commanding officer of the appropriate branch of service will be required;
- g. Bankruptcy or Default of an airline, or Cruise line, or tour operator, other than an organization or firm from whom You, or a Traveling Companion, have purchased Travel Arrangements supplied by others causing a complete cessation of travel services provided the Bankruptcy or Default occurs more than 14 days following Your Effective Date. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You, or a Traveling Companion, to transfer to another airline in order to get to Your intended Destination. Coverage for this other covered reason only applies if Your premium for this Policy is received within the time sensitive period.

Coverage will apply in the event of issued Alert/Warnings, country-specific entry-bans or Quarantine requirements upon entry that would impact Your Trip only if this policy is effective prior to the issuance of such Alert/Warning, entry ban or Quarantine requirement and the departure timing of Your Trip occurs prior to the issuance of such Alert/Warning, entry ban or Quarantine requirement. This includes Alert/Warnings, entry bans or Quarantine entry requirements related to a named Epidemics or Pandemics.

Coverage will apply in the event there is a government/country order that requires You to Quarantine after entry. Reimbursement will be provided for hotel and a per diem of \$100 for meals which will be applied to the Maximum Benefit Amount as shown in the Schedule of Benefits.

The maximum payable under this Trip interruption benefit is the Maximum Benefit Amount shown in the Schedule of Benefits. These benefits will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

In no event shall the amount reimbursed for Trip interruption exceed the Maximum Benefit Amount shown in the Schedule of Benefits.

In addition to the General Exclusions and Limitations, the following limitations, and exclusions for Trip interruption also apply. Benefits are not payable for any loss due to, arising or resulting from:



Trip interruption coverage for any reason not described above.

1. Trip interruption based on an issued country-specific or a global Alert/Warning when Your Trip departure timing occurred after the Alert/Warning was issued. This includes Alert/Warnings related to named Epidemics or Pandemics.
2. Trip interruption based on an issued country-specific entry ban when Your Trip departure timing occurred after the ban was issued. This includes bans related to named Epidemics and Pandemics.
3. Trip interruption based on an issued Quarantine requirement upon entry when Your Trip departure timing occurred after the Quarantine requirement was issued. This includes Quarantines related to named Epidemics or Pandemics.

### **TRIP DELAY**

We will reimburse You for Covered Expenses on a one-time basis, if You, or a Traveling Companion, are delayed, while coverage is in effect, and en route to or from the Trip for 6 or more hours. We will reimburse You for reasonable additional expenses incurred by You, or a Traveling Companion, for lodging accommodations, meals, telephone calls, local transportation, and additional vehicle parking charges incurred due to the delay.

We will not pay benefits for expenses incurred after travel becomes possible. Travel delay must be caused by or result from:

- a. any delay of a Common Carrier (including inclement weather);
- b. any delay by a traffic Accident en route to a departure, in which You or a Traveling Companion is not directly involved;
- c. any delay due to lost or stolen passports, travel documents or money, government required Quarantine, hijacking, unannounced strike, Natural Disaster, civil commotion, or riot;
- d. a closed roadway causing cessation of travel to the Destination of the Trip (substantiated by the department of transportation, state police, etc.).

### **BAGGAGE LOSS**

We will reimburse You or (if applicable) your Traveling Companion, if Your, or a Traveling Companion's, baggage or personal effects, are lost, stolen, damaged or destroyed during Your Trip, less any amount paid or payable by a Common Carrier, hotel, Travel Supplier, or any other party responsible for Your loss. This includes losses or damage to property specifically scheduled under any other Insurance, provided You have taken all reasonable measures to protect, save and/or recover Your property at all times.

#### **Valuation and Payment of Loss:**

The lesser of the following amounts will be paid:

- a. the Actual Cash Value as determined by Us;
- b. the current replacement cost for the lost, stolen, damaged or destroyed item; or
- c. the cost to repair or replace the item with material of a like kind and quality.

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

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

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

**In addition to the Baggage Loss benefit, noted on the Schedule of Benefits, a combined maximum of \$500, \$250 per item, will be paid for the following items:**

- a. jewelry;
- b. precious or semi-precious stones;
- c. watches;
- d. articles consisting in whole or in part of silver, gold, or platinum;
- e. furs or articles trimmed with fur;
- f. cameras and their accessories and related equipment;
- g. computers, electronic equipment and other digital or electronic equipment/media.

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

**Passport, Visa, or Other Travel Documents Replacement**

A maximum of \$150, per person, will be reimbursed for the cost of replacing Your, or a Traveling Companion's, passport, visas, and other travel documents, which are lost, stolen, damaged or destroyed during Your Trip. The loss, theft or damage must be documented by a police report and by providing a request for the passport replacement proof.

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

**Baggage Loss does not include:**

- a. animals;
- b. automobiles and automobile equipment;
- c. boats or other vehicles or conveyances;
- d. trailers;
- e. motors;
- f. aircraft;
- g. bicycles, except when checked as baggage with a Common Carrier;
- h. household effects and furnishings;
- i. antiques and collector's items;
- j. eyeglasses, sunglasses, contact lenses, artificial teeth, dentures, dental bridges, retainers, or other orthodontic devices, or hearing aids;
- k. artificial limbs or other prosthetic devices;
- l. prescribed medications;
- m. keys, money, stamps, and credit cards (except as otherwise specifically covered herein);
- n. securities, stamps, tickets, and documents (except as coverage is otherwise specifically provided herein);
- o. professional or occupational equipment or property, whether or not electronic business equipment;

**Additional Limitations and Exclusions Specific to Baggage Loss:**

Benefits are not payable for any loss caused by or resulting from:

- a. breakage of brittle or fragile articles;
- b. wear and tear or gradual deterioration;
- c. confiscation or appropriation by order of any government or custom's rule;
- d. theft or pilferage while left in any unlocked vehicle;
- e. property illegally acquired, kept, stored, or transported;
- f. Your, or a Traveling Companion's, negligent acts or omissions;
- g. property shipped as freight or shipped prior to the Scheduled Departure Date;
- h. insects or vermin;
- i. radioactive contamination;
- j. war or any act of war whether declared or not;
- k. delay or loss of market value;
- l. electrical current including electric arcing that damages or destroys electrical devices.

**Additional Claims Provisions Specific to Baggage**

Your duties after loss of or damage to property: In case of loss, theft, damage or delay of Your, or a Traveling Companion's, baggage or personal effects, You must:

- a. take all reasonable steps to protect, save or recover the property;
- b. promptly notify, in writing, either the police, hotel proprietors, ship lines, airlines, railroad, bus, airport or other station authorities, tour operators or group leaders, or any Common Carrier or bailee who has custody of Your, or a Traveling Companion's, property at the time of loss;
- c. produce records needed to verify the claim and its amount, and permit copies to be made;
- d. send proof of loss as soon as reasonably possible after date of loss, providing date, time, and cause of loss, and a complete list of damaged/lost items; and
- e. allow the Company to examine baggage or personal effects, if requested.

These benefits will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy. The Maximum Benefit Amount is shown in the Schedule of Benefits.

## SPORTING EQUIPMENT LOSS

We will reimburse You for loss, theft, or damage to sporting equipment during the Trip, provided You, or a Traveling Companion, have taken all reasonable measures to protect, save and/or recover the property at all times. The sporting equipment must be owned by You, or a Traveling Companion, and accompany You, or Your Traveling Companion, during the Trip. The police or other authority must be notified within 24 hours in the event of theft.

## BAGGAGE DELAY

We will pay You for the actual expenditure for necessary personal effects if, while on a Trip, Your, or a Traveling Companion's, checked baggage is delayed or misdirected by a Common Carrier for more than 24 hours from Your, or a Traveling Companion's time of arrival at a Destination other than Your, or a Traveling Companion's, return Destination. You, or a Traveling Companion, must be a ticketed passenger on a Common Carrier. The Common Carrier must certify the delay or misdirection. Receipts for the purchases must accompany any claim.

Incurred expenses over \$25 must be accompanied by receipts.

## SPORTING EQUIPMENT DELAY

We will reimburse You for the rental of sporting equipment if, while on a Trip, Your, or a Traveling Companion's, sporting equipment is delayed or misdirected by the Common Carrier for at least 3 consecutive hours.

Incurred expenses over \$25 must be accompanied by receipts.

## 24-HOUR AND COMMON CARRIER ACCIDENTAL DEATH AND DISMEMBERMENT

We will pay the percentage of the Principal Sum shown in the Table of Losses below when You, or a Traveling Companion, suffer a loss shown in the Table of Losses below. The loss must be the result of an Injury occurring during Your Trip, including while a passenger (not as a pilot, operator, or member of the crew) riding in, boarding or alighting from a public conveyance provided by a Common Carrier. The loss must occur within 90 days after the date of the Injury causing the loss. The Principal Sum is the Maximum Benefit Amount shown in the Schedule of Benefits.

Table of Losses	
Type of Loss	Benefit Amount
Loss of life	100% of Principal Sum
Loss of both hands	100% of Principal Sum
Loss of both feet	100% of Principal Sum
Loss of both eyes	100% of Principal Sum
Loss of one hand and one foot	100% of Principal Sum
Loss of one hand and one eye	100% of Principal Sum
Loss of one foot and one eye	100% of Principal Sum
Loss of one hand	50% of Principal Sum
Loss of one foot	50% of Principal Sum
Loss of one eye	50% of Principal Sum
Loss of thumb and index finger of the same hand	25% of Principal Sum

**Loss of hand, hands, foot, or feet**, means severance at or above the wrist joint. Or ankle joint, respectively.

**Loss of eye or eyes** means the total and irrecoverable loss of the entire sight thereof.

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

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

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

The Principal Sum is shown in the Schedule of Benefits.

### **Exposure and Disappearance**

We will pay for covered losses, as shown in the Table of Losses, which result from You, or a Traveling Companion, being unavoidably exposed to the elements due to an Accident occurring during Your Trip. The loss must occur within 365 days after the event that caused the exposure.

If, while under this Coverage, You, or a Traveling Companion, are in an Accident resulting in the disappearance, sinking or damaging of an air or water conveyance on which You, or a Traveling Companion, are covered by this coverage, and if Your, or a Traveling Companion's, body has not been found within 52 weeks from the date of the Accident, it will be presumed, unless there is evidence to the contrary, that You, or a Traveling Companion, suffered loss of life as a result of those Injuries.

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

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

Benefits will be paid for the Covered Expenses incurred by You Your Traveling Companion as a result of a covered Injury or Sickness, which first occurs during Your, Trip. Only Covered Expenses incurred during Your Trip will be reimbursed. Expenses incurred after Your covered Trip are not covered.

Benefits will be paid for emergency dental and Palliative Dental Treatment for expenses incurred during Your Trip. Only expenses to sound natural teeth will be reimbursed. Expenses incurred after Your Trip are not covered.

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

For the purpose of this benefit:

“Covered Expense” means expense incurred only for the following:

1. the medical services, prescription drugs, therapeutic services and supplies ordered or prescribed by a Physician as Medically Necessary for treatment;
2. Hospital or ambulatory medical-surgical center services (including expenses for a Cruise ship cabin or hotel room, not already included in the cost of the Your Trip, if recommended as a substitute for a Hospital room for recovery from a Covered Accidental Injury or covered Sickness);
3. Virtual Visit for Accidental Injury or covered Sickness that include the diagnosis and treatment of less serious medical conditions through live audio with video technology or audio only. Virtual Visit provides communication of medical information in real-time between the patient and a distant Physician or health specialist, through use of live audio with video technology or audio only outside of a medical facility (for example, while on vacation);
4. transportation furnished by a professional ambulance company to and/or from a Hospital;
5. mental health and substance use disorder services include those received on an inpatient or outpatient basis in a Hospital, an alternate facility or in a provider's office. All services must be provided by or under the direction of a properly qualified behavioral health provider;
6. dental treatment for Accidental Injury to sound natural teeth. Both the Accidental Injury and the dental treatment must occur during the Trip;

These benefits will not duplicate any benefits payable under the Policy or any coverage(s) attached to the Policy. Covered Expenses due to a Sickness are limited to a total of 90 days of treatment during Your Trip.

### **EMERGENCY MEDICAL EVACUATION, MEDICAL REPATRIATION, EMERGENCY REUNION, RETURN OF MINOR CHILDREN, RETURN OF REMAINS**

Transportation Expenses for the emergency medical evacuation, medical repatriation, emergency reunion, return of minor children, and return of remains must be authorized and arranged in advance by Us.

In the event that Your Injury or Sickness prevents You, or a Traveling Companion, from obtaining prior authorization of the emergency medical evacuation, medical repatriation, and repatriation of remains, You must make all efforts to notify Us as soon as reasonably possible.

In the event You, or a Traveling Companion, have not contacted Us to arrange for emergency medical evacuation, medical repatriation, and repatriation of remains, benefits will be limited to the amount We would have paid had We been contacted and related services pre-approved.

**1. Emergency Medical Evacuation:** We will provide emergency evacuation (under medical supervision if necessary) to the nearest facility capable of providing adequate care by whatever means is necessary if You, or a Traveling Companion, suffer a Sickness or Injury and adequate medical facilities, in the opinion of Our medical director, the medical director of Our affiliate or authorized vendor under Our direction, are not available locally. Covered Expenses include arranging and providing for transportation and related medical services (including medical escort if necessary) and medical supplies necessarily incurred in connection with the emergency evacuation.

**Baggage and Personal Effects Return:** We will reimburse You or Your Travel Supplier, for any cost associated with transporting You, or a Traveling Companion's, Baggage and Personal Effects if You, or a Traveling Companion, are evacuated, as covered under this Policy, and Your, or a Traveling Companion's, Baggage and Personal Effects do not accompany You, or a Traveling Companion, during Your, or a Traveling Companion's, evacuation. Your, or a Traveling Companion's, Baggage and Personal Effects will be returned to:

- (a) the location You, or a Traveling Companion, were evacuated to; or
- (b) Your, or Your Traveling Companion's, return Destination or scheduled Destination in case of a one-way Trip.

This benefit is provided as a supplement to the Baggage Delay benefit and the total benefits paid may not exceed the Baggage Delay limits as per the Schedule of Benefits.

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

**2. Medical Repatriation:** After You, or Your Traveling Companion, receive initial treatment and stabilization for a Sickness or Injury, if the attending Physician and Our clinical team or the clinical team of Our affiliate or authorized vendor under Our direction determine that it is Medically Necessary, We will transport You, or Your Traveling Companion, back to Your, or Your Traveling Companion's, permanent place of residence for further Medical Treatment or to recover. Covered Expenses include arranging and providing for transportation and related medical services (including medical escort if necessary) and medical supplies necessarily incurred in connection with the repatriation.

Benefits are available for medical repatriation, provided both of the following apply:

- The treatment required is a Covered Expense.
- The treatment is recommended by Your, or Your Traveling Companion's, Physician.

You must provide Us with any information or proof that We may reasonably request.

Physicians from Our appointed representatives will discuss all relevant factors with Your, or Your Traveling Companion's, own Physician before authorizing payment for repatriation.

Includes:

- a. one-way Economy Transportation or class required for Your, or Your Traveling Companion's, condition recommended by the local attending Physician and verified in writing and considered necessary by Us; or
- b. other covered land or air transportation including, but not limited to, commercial stretcher, medical escort, or the Usual and Customary Charges for air ambulance. Transportation must be via the most direct and economical route.

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

**3. Emergency Reunion:** We will pay to transport one person, chosen by You, or a Traveling Companion, by Economy Transportation, for a single visit to and from Your, or a Traveling Companion's, bedside if You, or a Traveling Companion, are traveling alone and will be hospitalized for more than three consecutive days and Emergency Evacuation is not imminent.

**4. Return of Minor Children:** We will pay for the evacuation of children (under the age of 18) either to Your, or Your Traveling Companion's, location or to a location where the children can be placed under the care of another guardian or relative, provided they are left unattended as a result of Your, or Your Traveling Companion's, hospitalization or Medical Evacuation.

**5. Return of Remains:** In the event of Your, or Your Traveling Companion's, death, We or Our affiliate or authorized vendor will render assistance and provide for the return of mortal remains. Services include:

- location of a sending funeral home;
- transportation of the body from the site of death to the sending funeral home;
- preparation of the remains for either burial or cremation;
- transportation of the remains from the funeral home to the airport;

- minimally necessary casket or air tray for transport;
- coordination of consular services (in the case of death overseas);
- procuring death certificates required to release the remains and gain entry back to the Home Country or permanent place of residence;
- transport of the remains from the airport to the receiving funeral home.

Other services that may be performed in conjunction with those listed above include making Travel Arrangements for any Traveling Companions and identification and/or notification of next-of-kin.

**All repatriation expenses must be authorized and arranged in advance by Us. Once Your remains are claimed by the receiving funeral home or morgue, or in the event of local cremation, coverage under this benefit ends.**

### SECTION III. DEFINITIONS

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

**“Actual Cash Value”** means current replacement cost for items of like kind and quality.

**“Alert/Warning”** means any government, *Center for Disease Control and Prevention (CDC)* or *World Health Organization (WHO)* alert or warning which may include notice of disease, Epidemic or Pandemic.

**“Baggage and Personal Effects”** means luggage, personal possessions and travel documents taken by You, or Your Traveling Companion, on Your Trip.

**“Bankruptcy or Default”** means the total cessation of operations due to insolvency, with or without the filing of a Bankruptcy petition by an airline, or Cruise line, tour operator or other travel provider provided the Bankruptcy or Default occurs more than 14 days following Your Effective Date for the Trip benefits. There is no coverage for the Bankruptcy or Default of any person, organization, agency, or firm from whom You purchased Travel Arrangements supplied by others.

**“Common Carrier”** means any land, sea, or air conveyance operating under a valid license for the transportation of passengers for hire, not including taxicabs or rented, leased, or privately owned motor vehicles.

**“Company”** means H&W Indemnity SPC for and on behalf of Global Solutions SP.

**“Complications of Pregnancy”** means conditions (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include non-elective cesarean section, ectopic pregnancy, which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.

Complications of Pregnancy does not include false labor, occasional spotting, Physician-prescribed rest during the period of pregnancy, morning sickness, hyperemesis gravidarum, preeclampsia and similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct Complication of Pregnancy.

**“Covered Accident”** means an Accident that occurs while coverage is in force and results in a loss for which benefits are payable.

**“Covered Expense(s)”** means expenses that would be reimbursed according to the terms of the Insurance Policy.

**“Covered Person”** means a person(s) who is booked to travel on a Trip, and for whom the required premium is paid, also referred to as You, Your, and Traveling Companion(s). The limit is nine Traveling Companions accompanying the purchaser.

**“Cruise”** means a voyage on a Common Carrier ship or boat taken for pleasure or as a vacation, usually including several ports of call.

**“Deductible”** means the dollar amount of expenses which must be incurred and paid by You, or Your Traveling Companion, before benefits are payable under this Policy. It applies separately to each Covered Person.

**“Destination”** means the place where You, and Your Traveling Companion(s), are going.

**“Domestic Partner”** means an opposite or same sex partner who, for at least 12 consecutive months, has resided with You, or a Traveling Companion, and shared financial assets/obligations with You, or a Traveling Companion. Both You, or a Traveling Companion, and the Domestic Partner must: (1) intend to be life partners; (2) be at least the age of consent in the state in which You, or Your Traveling Companion, both reside; and (3) be mentally competent to contract. Neither You, or Your Traveling Companion, nor the Domestic Partner can be related by blood to a degree of closeness that would prohibit a legal marriage, be married to anyone else, or have any other Domestic Partner. The Company may require proof of the Domestic Partner relationship in the form of a signed and completed affidavit of Domestic Partnership.

**“Economy Transportation”** means the lowest published available transportation rate for a ticket on a Common Carrier matching the original class of transportation that You, or a Traveling Companion, purchased for Your Trip.

**“Effective Date”** means the day the contract begins.

**“Elective Treatment and Procedures”** means any Medical Treatment or surgical procedure that is not Medically Necessary, including any service, treatment, or supplies that are deemed by the federal, state, or local government authority, or by Us to be research or experimental or that is not recognized as a generally accepted medical practice.

**“Epidemic”** means an outbreak of an illness or disease that spreads rapidly, widely, and affects a large number of people. Epidemics are identified by *Center for Disease Control and Prevention (CDC)* or *World Health Organization (WHO)*.

**“Extreme Sports Activities”** means B.A.S.E. jumping, bull riding, running of the bulls, free diving, bungee jumping, hot air ballooning, parachuting, skydiving, cliff diving, fly-by-wire, paragliding, hang gliding, heli-skiing, heli-snowboarding, wingsuit flying, rock climbing without equipment, bodily contact sports excluding limited contact sports, mountain climbing over 9,000 feet (2,700 meters), motor sport or motor racing, multi-sport endurance competitions, parkour, scuba diving if the depth exceeds 131 feet (40 meters) and any activity materially similar to the above.

**“Family Member”** means You, or Your Traveling Companion’s:

- brother (including stepbrother and in-law)
- sister (including stepsister and in-law)
- child (including stepchild, foster child, and in-law, adopted children, and children currently in the adoption process)
- grandchild, great grandchild (including step-grandchild)
- parent (including stepparent, adoptive parent or legal guardian)
- spouse (by marriage, common law, domestic partnership, or civil union)
- grandparent (including step-grandparent, in-law)
- aunts, uncles, nieces, and nephews;
- legal guardians and wards;
- paid, live-in caregivers; and
- service animals (as defined by the Americans with Disabilities Act)

**“Home”** means Your, or Your Traveling Companion’s, primary place of residence.

**“Home Country”** means the country or territory as shown on Your, or Your Traveling Companion’s, passport.

**“Host Country”** means a country or territory You, or Your Traveling Companion(s), are visiting or in which You, or Your Traveling Companion(s), are living which is not Your, or Your Traveling Companion(s), Home Country.

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

**“Injury”, “Injuries”** means bodily harm caused by an Accident which: 1) occurs while Your, and Your Traveling Companion’s, coverage is in effect under the Policy; and 2) requires examination and treatment by a Physician. The Injury must be the direct cause of loss and must be independent of all other causes and must not be caused by, or result from, Sickness.

**“Insurance”** means a guarantee of compensation for specified loss, damage, illness, or death in return for payment of a premium.

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

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

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

**“Medically Necessary”** means a service which is appropriate and consistent with the treatment of the condition in accordance with accepted standards of community practice.

**“Medical Treatment”** means examination and treatment by a Physician for a condition which first manifested itself, worsened or became acute or had symptoms which would have prompted reasonable person to seek diagnosis, care, or treatment.

**“Natural Disaster(s)”** means a tsunami, earthquake, mudslide, avalanche, volcanic eruption, windborne dust or sand, fire, wildfire, blizzard, precipitation, or wind that results in widespread and severe damage, while You, and Your Traveling Companion(s), are on your Trip.

**“Palliative Dental Treatment”** means dental emergency treatment to temporarily relieve pain, swelling or bleeding.

**“Pandemic”** means an Epidemic spread across several countries and affecting a large number of people. Pandemics are identified by *Center for Disease Control and Prevention (CDC)* or *World Health Organization (WHO)*.

**“Payments or Deposits”** means the cash, check, or credit card amounts actually paid for Your Trip. Certificates, vouchers, discounts, credits, frequent traveler or frequent flyer rewards, miles or points applied (in part or in full) towards the cost of Your Travel Arrangements are not Payments or Deposits as defined herein.

**“Physician(s)”** means a Physician: (a) other than You, a Traveling Companion, or a Family Member; (b) practicing within the scope of his or her license; and (c) recognized as a Physician in the place where the services are rendered.

**“Policy”, “Policies”, “Policy of Insurance”** means a document detailing the terms and conditions of a contract of Insurance.

**“Pre-Existing Condition”** means an illness, disease, or other condition during the 180-day period immediately prior to the date Your coverage is effective for which You, Your Traveling Companion, or Family Member: 1) received or received a recommendation for a test, examination, or Medical Treatment for a condition which first manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or 2) took or received a prescription for drugs or medicine. Item (2) of this definition does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 180-day period before coverage is effective under this Policy.

**“Prepaid”** means Payments or Deposits paid by You, or Your Traveling Companion(s), to a Travel Supplier for Travel Arrangements for Your Trip prior to Your, or Your Traveling Companion’s, actual or Scheduled Departure Date.

**“Principal Sum”** means the Maximum Benefit Amount shown in the Schedule of Benefits.

**“Quarantine(d)”** means the enforced isolation of You or Your Traveling Companion(s), for the purpose of preventing the spread of illness, disease, or pests.

**“Schedule of Benefits”** means a table or chart that specifies the amount of coverage provided for each benefit.

**“Scheduled Departure Date”** means the date on which You, and Your Traveling Companion(s), are originally scheduled to leave on Your Trip.

**“Scheduled Return Date”** means the date on which You, and Your Traveling Companion(s), are originally scheduled to return to the point of origin or the original, final Destination of Your Trip.

**“Secondary”** means We will reimburse up to the lesser of any remaining balance, or the amount in the Schedule of Benefits, after any other Insurance or Common Carrier reimbursements are considered.

**“Sickness”** means an illness or disease of the body which: 1) requires examination and treatment by a Physician, and 2) commences while Your, and Your Traveling Companion’s, coverage is in effect.

**“Terrorist Incident”** means an act of violence, that is deemed terrorism by the local government other than civil disorder or riot (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting alone or in association with other persons on behalf of or in connection with any organization of foreign government which is generally recognized as having the intent to overthrow or influence the control of any other foreign government.

**“Third Party”** means a person or entity other than You, Your Traveling Companion’s, or the Company.

**“Transportation Expense(s)”** means the cost of Medically Necessary conveyance, personnel, and services or supplies.

**“Travel Arrangement(s)”** means: (a) transportation; (b) accommodations; and (c) other specified services arranged by the Travel Supplier for Your Trip. Air arrangements covered by this definition also include any direct round Trip air flights booked by others, to and from Your Scheduled Trip Departure and return cities, provided the dates of travel for the air flights are within 7 total days of Your, and Your Traveling Companion’s, scheduled Trip dates.

**“Travel Assistance Services Provider”** means UnitedHealthcare Global Assistance.

**“Traveling Companion(s)”** means a person or persons who, during Your Trip, will accompany You at the final Destination. A group or tour organizer, sponsor or leader is not a Traveling Companion as defined, unless sharing accommodations in the same room, cabin, condominium unit, apartment unit or other lodging with You.

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

**“Trip”** means a scheduled Trip of 90 days or less for which coverage is requested and the premium is paid.

**“Unforeseen”** means not anticipated or predicted.

**“Usual and Customary Charge(s)”** means those comparable charges for similar treatment, services and supplies in the geographic area where treatment is performed.

**“Virtual Visit”** means a phone or video consultation with a Physician to discuss symptoms, recommend treatment options, diagnose, and prescribe medication when appropriate.

**“We”, “Us”, “Our”** means H&W Indemnity SPC for and on behalf of Global Solutions SP.

**“You”, “Your”, “Yours”, “Yourself”** means the Covered Person who purchased and is named on the Policy.



## SECTION IV. GENERAL EXCLUSIONS AND LIMITATIONS

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

1. an act of declared or undeclared war;
2. participating in maneuvers or training exercises of an armed service.
3. participating as a professional in a stunt, athletic or sporting event or competition;
4. piloting or learning to pilot or acting as a member of the crew of any aircraft;
5. being Intoxicated as defined herein, or under the influence of any controlled substance unless as administered or prescribed by a Physician;
6. the commission of or attempt to commit a felony or being engaged in an illegal occupation or act;
7. normal childbirth or pregnancy (except Complications of Pregnancy) or voluntarily induced abortion;
8. dental treatment (except as coverage is otherwise specifically provided herein);
9. amounts which exceed the Maximum Benefit Amount for each coverage as shown in the Schedule of Benefits;
10. a Pre-Existing Condition, as defined in the Policy. The Pre-Existing Condition limitation does not apply to the Emergency Medical Evacuation, Medical Repatriation or Return of Remains coverage;
11. preventive and Elective Treatment and Procedures;
12. traveling for the purpose or intent of securing Medical Treatment or advice;
13. failure of any tour operator, Common Carrier, or other Travel Supplier, person, or agency to provide the bargained-for Travel Arrangements for reasons other than Bankruptcy or Default or to refund money due You;
14. any Trip taken or continued against the advice of a Physician and any losses incurred during such Trip or continuation of such Trip
15. regularly scheduled treatment, rehabilitation, or therapy sessions;
16. suicide, attempted suicide, or any intentionally self-inflicted Injury while sane or insane. This exclusion does not apply to the Emergency Medical Evacuation or Repatriation of Remains coverage;
17. expenses incurred by any child born or adopted during Your Trip;
18. participation in a civil disorder or riot;
19. the actual or threatened use, or exposure, to any hazardous biological, chemical, nuclear radioactive matter or contamination;
20. trips paid for with the use of loyalty reward points, frequent travel miles, or other non-monetary redeemable points or rewards through similar programs, including credits issued for future travel by a Travel Supplier or tour operator;
21. Accident & medical expense when Your, and Your Traveling Companion's, Trip destination is to a country that has issued a country-specific entry ban, when this policy was effective after the ban was issued and Your, and Your Traveling Companion's, Trip departure timing occurred after the ban was issued. This includes bans related to named Epidemics or Pandemics;
22. damages resulting from tropical storms, hurricanes or typhoons that are named on or before the date You purchased Your Policy;
23. Your participation in Extreme Sports Activities, riding or driving in any races, or participation in speed or endurance competition or events, except as a spectator.
24. sports equipment if loss is due to use, or misuse, of the equipment.

## SECTION V. PAYMENT OF CLAIMS

**Governing Jurisdiction:** All claims arising under this insurance shall be governed by the Laws of Cayman Islands whose courts alone shall have jurisdiction in any dispute arising hereunder.

**Claim Procedures: Notice of Claim:** Notice of claim must be reported within 90 days after a loss occurs or as soon as is reasonably possible. You or someone on Your behalf may give the notice. The notice should be given to Us or Our designated representative and should include sufficient information to identify You.

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

**Claim Procedures: Proof of Loss:** Proof of loss must be provided within 90 days after the date of the loss or as soon as is reasonably possible. Proof must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

**Payment of Claims: When Paid:** We, or Our designated representative, will pay the claim after receipt of acceptable proof of loss.

**Payment of Claims: To Whom Paid:** Benefits for loss of life and any accrued benefits unpaid at Your, or Your Traveling Companion(s) death will be paid to Your, or Your Traveling Companion(s) designated beneficiary. If a beneficiary is not otherwise designated by You, or Your Traveling Companion(s) benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

- a) Your spouse or Domestic Partner;
- b) Your child or children jointly;
- c) Your parents jointly if both are living or the surviving parent if only one survives;
- d) Your brothers and sisters jointly; or
- e) Your estate.

All other benefits will be paid directly to You, or Your Traveling Companion(s) unless otherwise directed. If You, or Your Traveling Companion have assigned Your benefits, We will honor the assignment if a signed copy has been filed with Us. We are not responsible for the validity of any assignment.

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

If any benefit is payable to: (a) a Covered Person who is a minor or otherwise not able to give a valid release; or (b) Your, or Your Traveling Companion's estate, We may pay up to \$1,000 to Your, or Your Traveling Companion's beneficiary or any relative whom We find entitled to the payment. Any payment made in good faith shall fully discharge Us to any party to the extent of such payment.

**Subrogation:** If the Company has made a payment for a loss under this Policy, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right. You, or Your Traveling Companion(s) shall help the Company exercise the Company's rights in any reasonable way that the Company may request: nor do anything after the loss to prejudice the Company's rights: and in the event You recover damages from the Third Party responsible for the loss, You, or Your Traveling Companion(s) will hold the proceeds of the recovery for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss.

## SECTION VI. GENERAL PROVISIONS

**Eligibility: Who Is Eligible For Coverage:** A person who is booked to travel on a Trip and pays the required premium is covered under this policy. Eligibility for purchase of this policy will be determined at the time of claim. If it is determined that a person or Trip is not eligible for coverage, any claim for benefits will be denied and Your premium for this policy will be refunded. Coverage is only available for persons under age 86. Coverage is only available for persons who are non-U.S. residents traveling outside of the United States of America.

**Entire Contract: Changes:** This Policy, Schedule of Benefits, and any attachments are the entire contract of Insurance. No agent may change it in any way. Only an officer of the Company can approve a change. Any such change must be shown in this Policy or its attachments.

**Physician Examination and Autopsy:** The Company, at the expense of the Company, may have You, or Your Traveling Companion(s), examined when and as often as is reasonable while the claim is pending. The Company may have an autopsy done, at the expense of the Company, where it is not forbidden by law.

**Legal Actions:** All Policy terms will be interpreted under the laws of the Cayman Islands. No legal action may be brought to recover on the Policy within 60 days after written proof of loss has been furnished. No legal action for a claim may be brought against Us after three years from the time written proof of loss is required to be furnished.

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

**Excess Insurance:** Insurance provided by this Policy shall be in excess of all other valid and collectible insurance or indemnity, or as required by applicable law. If at the time of the occurrence of any loss payable under this Policy there is other valid and collectible insurance or indemnity in place, We shall be liable only for the excess of the amount of loss, over the amount of such other insurance or indemnity, and applicable deductible.

Recovery of losses from other parties does not result in a refund of premium paid.

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

**Reductions in the Amount of Insurance:** The applicable benefit amount will be reduced by the amount of benefits, if any, previously paid for any loss or damage under this Policy for Your Trip.

**Payment of Premium:** Coverage is not effective unless all premium has been paid to the Company/administrator prior to a date of loss or Covered Person occurrence.

**Termination of This Policy:** Termination of this Policy will not affect a claim for loss which occurs while the Policy is in force.

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

**Controlling Law:** Any part of this Policy that conflicts with applicable law, where this Policy is issued, is changed to meet the requirements of that law.

**OFAC Compliance:** Payment of loss under this policy shall only be made in full compliance with all United States of America economic or trade sanction laws or regulations, including, but not limited to sanctions, laws and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC").

**Complaints:** In the event that you remain dissatisfied and wish to make a complaint you can do so to the Complaints team at UnitedHealthcare Global, 10175 Little Patuxent Parkway, 5<sup>th</sup> Floor, Columbia, MD 21044, or call 1-410-453-6380.

**Data Protection:** Please note that sensitive health and other information that you provide may be used by us, our representatives, the insurers and industry governing bodies and regulators to process your insurance, handle claims and prevent fraud. This may involve transferring information to other countries (some of which may have limited, or no data protection laws). We have taken steps to ensure your information is held securely. Where sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use as set out above. Information we hold will not be shared with third parties for marketing purposes. You have the right to access your personal records.

**Note:** This insurance is not subject to and does not provide certain insurance benefits required by the United States' Patient Protection and Affordable Care Act ("PPACA"). PPACA requires certain US citizens or US residents to obtain PPACA compliant health insurance, or "minimum essential coverage." PPACA also requires certain employers to offer PPACA compliant insurance coverage to their employees. Tax penalties may be imposed on U.S. residents or citizens who do not maintain minimum essential coverage, and on certain employers who do not offer PPACA compliant insurance coverage to their employees. In some cases, certain individuals may be deemed to have minimum essential coverage under PPACA even if their insurance coverage does not provide all of the benefits required by PPACA. You should consult your attorney or tax professional to determine whether the policy meets any obligations you may have under PPACA.