GLOBAL ASSISTANCE AND INSURANCE PROGRAM



Drexel University

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: +1 603-952-2038 Call toll free from US or Canada: 1-855-258-0555

Text Only: +1 603-945-0103

Email: mail@oncallinternational.com

24/7 Live Chat: www.oncallinternational.com/chat/direct

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 Drexel University. The policy is underwritten by HDI Global Ltd. Complete information on the insurance is contained in the Certificate of Insurance on file with Drexel University. 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. Participant is responsible for the cost of providing the medicine or eyeglasses.
- 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. No third party expenses or On Call fees are applicable to this service.
- 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 authorized 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. On Call will make best efforts to coordinate with Client's foreign workers compensation carrier for medical related services for Client's faculty and staff traveling abroad.

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 location as determined by Client.
- 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 as determined by Client.
- c. **Repatriation 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 Expenses (arrangements for Visit by Family or Friend)** If the Participant is hospitalized 24 hours or more 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. **Emergency Return Home** If a Participant's parent, child, sibling, spouse or participant partner suffers a life-threatening illness or death OR if the Participant is a victim of Felonious Assault, On Call shall arrange for economy airfare for the Participant to go to the family member's location. If the benefit allows, On Call will also return the Participant to his/her program within 90 days of the departure date. All arrangements associated with Emergency Return Home are subject to verification of necessity.
- d. **Emergency Reunion following a Felonious Assault** If the Participant is the victim of a felonious assault, On Call shall arrange travel and suitable hotel accommodations for a person of the Participant's choice to join them.
- e. **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.
- f. **Bereavement Reunion** In the event a covered Participant dies while covered under the Program, On Call shall arrange for an assigned advocate to fly to the location of the deceased to identify and accompany the remains back to the Participant's home country.



g. **Chaperone Replacement** In the event a chaperone or faculty leader are unable to continue with the travel abroad program due to illness or injury, On Call shall arrange for a replacement faculty or chaperone to be flown to the program location to take over the program.

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. Any fees associated with the transfer of funds will be the responsibility of the Participant.
- 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. Fees and costs charged by the referred attorney shall be the responsibility of the Participant.
- 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. Any fees required for the acquisition or forwarding of these documents is the responsibility of the Participant.
- 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. **Dedicated Global Security Specialist** Clients will be assigned a dedicated Global Security Specialist (GSS) for proactive analysis, guidance, and assistance on any security-related question or concern. The dedicated GSS will personally engage with a client to understand their risk management program components and their associated risk profile for proactive preparation and planning.



- c. **Custom Pre Trip Intelligence and Risk Assessment** A Global Security Specialist will prepare a risk assessment tailored to a traveler's or group's risk profile and deliver as a written report or via a phone consultation.
- d. **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.
- e. **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) ADMINISTATION 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

HDI GLOBAL SPECIALTY POLICY WORDING BLANKET

The Policy will be administered on behalf of the Insurer by the Administrator: On Call International, LLC.

The coverage is made up of two parts:

PART A) Medical Evacuation and Repatriation, Emergency Travel Benefits, Political and Natural Disaster Evacuation. Pages 10-18.

Part B) Medical Expenses, Personal Accident, other travel benefits. Pages 19 – 39.

INSURING AGREEMENT

In return for the Participating Organization having paid the premium for the Coverage Period, We will provide You the Benefits set out in Your Policy whilst You are on a trip away from Your Home Country during the Coverage Period subject to the Definitions, Condition, Benefits limits and Exclusions contained in Your Policy.

This is Your Travel Insurance Policy, which with Your Certificate of Insurance should be read together and forms the contract of Insurance between You and Us.

Your premium has been based on the information shown to Us by the Participating Organization. If after reading Your Policy and Certificate You have any questions, please contact On Call International.

Who We are

HDI Global Specialty SE, UK Branch

Branch Office: 20 Gracechurch Street, London EC3V 0BG Registered Office: HDI-Platz 1, 30659 Hannover, Germany. Registered in Germany, Registration No. HRB 211924

HDI Global Specialty SE is authorised by the Bundesanstalt für Finanzdienstleistungsaufsicht (BaFin). Authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority. Details about the extent of Our authorisation and regulation by the Prudential Regulation Authority are available from Us on request. (FRN: 659331)

IMPORTANT

It is essential that You provide Us with a fair representation of the risks We are accepting when applying for cover. It is also important that You advise Your broker, intermediary or Us of any changes which occur during the period of insurance



which may alter information previously provided. If You are in doubt as to whether You need to disclose information to Us then this should be declared.

This means You may need to make enquiries with all Senior Management to ensure that You have declared all necessary information.

It is Your responsibility to prove any loss therefore We recommend that You keep receipts, photographs and relevant documents to help with any claim You make. This Policy is a legal contract. You must tell Us about any facts or changes which affect Your insurance and which have occurred either since the Policy started or since the last renewal date.

If You are not sure whether certain facts are relevant please ask Your adviser. If You do not tell Us about relevant changes, Your Policy may not be valid or the Policy may not cover You fully. You should keep a written record (including copies of letters) of any information You give Us or Your insurance adviser when You purchase or renew this Policy.

JURISDICTION AND CHOICE OF LAW

This insurance shall be governed by and construed in accordance with the laws of Pennsylvania and shall be subject to the jurisdiction of the courts of the United States of America.

All communications between You and Us shall be conducted in English except as otherwise provided in this Policy.

DATA PROTECTION

HDI Global Specialty SE is an insurance company whose UK address is 20 Gracechurch Street, London, EC3V 0BG, United Kingdom. It is a Data Controller and Data Processor as defined under the EU General Data Protection Regulation ('GDPR') and is registered with the Information Commissioner's Office ('ICO') under number Z5380754. Further details on the GDPR can be found at the ICO website (www.ico.org.uk).

Please read the Privacy Notice at the end of Your policy carefully as it contains important information about Our use of Your personal information i.e. how Your information will be collected and dealt with, and Your rights concerning that data

REASONABLE CARE

You must exercise reasonable care to prevent Illnessor Injury to yourself; or loss, theft or damage to Your documents and Money as if uninsured, and avoid willful exposure to danger, except in an attempt to save a human life.

OUR COMMITMENT TO YOU

Each of Our customers is important to Us, and We believe You have the right to a fair, swift and courteous service at all times. We will acknowledge receipt of Your complaint and We will deal with it promptly and provide a response as quickly as possible.

COMPLAINTS PROCEDURES

If You are disappointed with any aspect of the handling of Your insurance We would encourage You, in the first instance, to contact the complaints department of Your insurance adviser, On Call International. You can write or telephone, whichever suits You, and ask Your contact to review the problem.

If you remain dissatisfied with On Call Internationals response, Complaints can be notified to Us by phone, e-mail or in writing. Any enquiry or complaint You have may be addressed to Our complaints department by telephone, e-mail or in writing using the following contact details:

Telephone: 020 7015 4000

Email: complaints@hdi-specialty.com



Address: Complaints Department, HDI Global Specialty SE - UK, 20 Gracechurch Street, London EC3V 0BG, United Kingdom.

Please have details of the contract, including Your policy number, available to enable the enquiry to be dealt with speedily.

We take all complaints seriously and aim to resolve all problems promptly and fairly.

- 1. Upon receipt of Your complaint, We will, within no more than five working days, send You a letter to acknowledge Your complaint, and explain to You how we will investigate Your complaint. We will also enclose a copy of Our complaints procedure.
- 2. We will endeavour to send a final response to You within eight weeks of receipt of Your complaint. If We are unable to provide You with a final response within this time frame, We will write to You explaining the delay and advise You when You can expect a final response.
- 3. If more than eight weeks from the date of Your complaint have elapsed and You have not received a final response, or You are dissatisfied with the final response You have received from Us, You may choose to refer Your complaint to: Financial Ombudsman Service (FOS)

South Quay Plaza

183 Marsh Wall

London

E14 9SR

You can find out more information regarding the Ombudsman by visiting their website:

www.financial-ombudsman.org.uk

FINANCIAL OMBUDSMAN SERVICE

If You are dissatisfied with the final response from the complaints department, You may be entitled to refer the matter to the FOS.

Full contact details of the FOS will be provided at the same time as Your complaint is acknowledged by Us.

Note that the FOS will only consider Your complaint if You have given Your insurance adviser the opportunity to resolve it and You meet the definition of an eligible complainant. Eligible complaints are defined as:

- a) Individuals acting for purposes outside of their trade, business or profession.
- b) Micro-enterprises which are smaller businesses with less than 10 employees and an annual turnover or balance sheet of less than EUR 2 million.
- Charities with an annual income of less than GBP 6.5 million at the time the Complaint was made.
- d) Trustees of a trust with a net asset value of less than GBP 5 million at the time the Complaint was made.
- e) Small businesses which are enterprises that have an annual turnover of less than GBP 6.5 million and a balance sheet total of less than GBP 5 million or employ fewer than 50 persons.
- f) Professional clients and eligible counterparties, where the person is an individual acting for purposes outside of his trade, business, craft or profession. OR
- g) Individuals who have given a guarantee or security in respect of an obligation or liability of a person which was a micro-enterprise or small business at the time the guarantee or security was given

Whilst We are bound by the decision of the FOS, You are not. Following the complaint procedure does not affect Your right to take legal action.



FINANCIAL SERVICES COMPENSATION SCHEME

For risks located within the EEA We are covered by the UK Financial Services Compensation Scheme (FSCS). You may be entitled to compensation from the scheme if We cannot meet Our obligations. This depends on the type of business and the circumstances of the claim. Most insurance contracts are covered for 90% of the claim with no upper limit. You can learn more about this scheme at www.fscs.org.uk or by phoning 0800 678 1100 or 0207 741 4100 or writing to Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London, EC3A 7QU.

Useful Telephone Numbers and Websites

On Call International Global Response Center: +1 603-952-2038

Claims Administrator: tpaclaims@oncallinternational.com

Complaints, On Call International Customer Service: +1 855-878-9590

Assistance Services

Medical, Travel and Security Assistance

In the event of a Medical, Travel or Security Emergency please contact Emergency Assistance Company:

On Call International Global Response Center: +1 603-952-2038

mail@oncallinternational.com

www.oncallinternational.com/chat/direct

The following services require arrangement by On Call International for the benefit to apply and are not reimbursable via the claims process:

- Medical expenses for Inpatient hospitalizations (see Pre-authorization requirements for treatments, costs charges or expenses section for details and conditions)
- Medical Evacuation and/or Repatriation
- · Repatriation of Remains or Burial
- Emergency Security Evacuation and Repatriation
- Emergency Travel Expenses
- Return of Dependent Children
- Return of Traveling Companion
- Bereavement Reunion
- Return Home due to Felonious Assault
- Emergency Travel Expenses due to Felonious Assault
- Chaperone Replacement

Who to contact in the event of Claim

Who to contact in the event of a Non-Emergency Claim

All non-emergency claims should be notified to Our Claims Administrators as above for assistance, or to submit a self-paid expense claim for reimbursement consideration:

tpaclaims@oncallinternational.com

or

On Call International

11 Manor Parkway, Salem, NH 03079 Tel: 603 328 1300 | Fax: 603 328-1770

www.oncallinternational.com

The following do not require arrangement by On Call International for the benefit to apply and are reimbursable via the claims



process:

- Personal Accident Accidental death, Loss of Sight, Loss of Limb(s), Permanent Total Disablement
- Personal Liability Physical injury and property damage
- Emergency Bail Bond
- Catastrophe Coverage not required but On Call can help with arrangements for flight changes / arrangements or lodging.
- Search and Rescue
- Loss of Personal Belongings
- Loss of checked in Luggage
- Luggage Delay
- Lost Documents or Money
- Trip Interruption On Call can help with arrangements for trip interruptions due to medical reasons but in addition to medical documentation, arrangements will require a medical release and arrangements for Your evaluation for fitness to travel before transportation can be arranged.
- Travel Delay
- Pre-Trip Cancellation
- Continuing Medical Charges
- Quarantine Benefit not required but On Call can help with arrangements for flight changes / arrangements or lodging.

Claims Provisions

- 1. As soon as reasonably possible after the happening of any incident likely to give rise to a claim under this Policy (but in any event no later than **60 days** after the discovery date of loss) You must notify Our Claims Handlers of such incident. Should a claim be notified after this time, it may be declined.
- 2. You must at Your own reasonable expense furnish them such certificates, information and evidence as they may from time to time reasonably require in the form prescribed by Us. They shall be allowed at their own expense, upon reasonable notice to request a medical examination of You as may be deemed appropriate.
- 3. You shall as soon as reasonably possible after the occurrence of any Accidental Bodily Injury or after You become aware of any Illness obtain and follow the advice of a Medical Practitioner and We shall not be liable for any consequences of Your failure to so obtain and follow such advice.
- 5. We are entitled to take over any rights in defense or settlement of any claims and to take proceedings in Your name for Our benefit against any other party.
- 6. Your claim will be settled within 30 business days of receiving a claim form completed in accordance with these claims provisions and all requested proof of claim documentation.
- 7. You shall provide such reasonable cooperation to Our Emergency Assistance Company and Claims Handler as they may reasonably request including by permitting them access to medical documentation, reports and evidence in relation to Your claim. We may deny coverage for any claim where there has been an unreasonable refusal or material failure to so cooperate.

Proof of Claim

When Our Claims Handler receives notice of claim, they will provide You with forms for filing Proof of Claim. The following is considered to be Proof of Claim:

- A completed and signed Claimant's Statement and Authorization Form (claim form provided to You by the Claims Handler), together with all attachments reasonably requested (as set out in paragraph 2 above, under "Claims provisions") and
- 2. Scans or pictures of original itemized bills from Physicians, Hospitals and other medical providers; and
- 3. Scans or pictures of original receipts for any expenses which have already been paid by or on behalf of You.
- 4. For Quarantine claims, proof of a positive diagnosis administered by an official testing provider or medical provider is required. Home tests are not acceptable as proof of claim. Food benefit is per-diem and receipts are not required.
- 5. For claims related to death, death certificate is required as proof of claim.



You shall submit Proof of Claim to the Claims Handler as soon as reasonably possible after receiving the forms for filing Proof of Claim from them but in any event no later than **60 days** beginning on the date of receipt of such forms.

If any claim under this insurance shall be in any respect fraudulent or if any fraudulent means or devices are used by You or anyone acting on their behalf, this insurance shall be null and void and all claims hereunder shall be forfeited, in addition to any and all other remedies available to Us.

PART A) Medical Evacuation and Repatriation, Emergency Travel Benefits, Political and Natural Disaster Evacuation

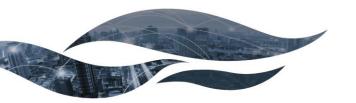
BENEFITS TABLE

Emergency Medical Evacuation and Repatriation	Covered / Not Covered	Limits Per Insured Person, Per Event	
Emergency Medical Evacuation and/or Repatriation	Covered	2,000,000	
Repatriation of Remains or Burial	Covered	100,000	
Emergency Travel Expenses (arrangement for Visit of Family Member or Friend,)	Covered	\$12,500 when hospitalized for 24 or more hours	
Bereavement Reunion	Covered	\$2,500	
Return Home due to Felonious Assault	Covered	\$2,500	
Emergency Reunion due to Felonious Assault	Covered	\$2,500	
Emergency Return Home due to family member death or illness	Covered	\$2,500	
Return of Traveling Companion	Covered	\$2,500	
Return of Dependent Children	Covered	\$2,500	
Chaperone Replacement	Covered	\$2,500	
Political and Natural Disaster Evacuation	Covered / Not Covered	Limits Per Insured Person, Per Event	
Evacuation Costs	Covered	\$1,000,000	
Hibernation Costs	Covered	\$5,000 per Insured Person, Per day up to a maximum of 30 days	
Expenses	Covered	\$200 per Insured Person, Per day up to a maximum of 30 days	

Limits are subject to an Aggregate Limit of USD 40,000,000 per event.

Part A Policy 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.

Benefits Table

The table of benefits set out in The Policy Schedule.

Country of Domicile

The Country in which the Insured Person resided in before taking up an Insured Journey and/or the Country to which the Insured Person shall return to when repatriated or country in which they hold a valid passport. When determining the destination for Repatriation, if there are multiple destinations that fit this definition, the Plan Administrator will consult with Participating Organization to consider the Insured Person's best interest in relation to academic, financial and personal support available in each destination.

Crisis Management Company

On Call International

Emergency Assistance Company

On Call International

Home

The Insured Persons primary residence in their Country of Domicile.

Host Country

The Country in which the Insured Person resides in whilst on an Insured Journey.

Insured Journey

Whilst the Insured Person is on a journey not exceeding 12 months in duration (unless otherwise agreed by Us) which You have authorised in connection with The Participating Organization (including any period of holiday which is purely ancillary to the Insured Journey) which begins during the Period of Insurance, and commences from the time the Insured Person leaves their Country of Domicile and continues during the entire period of the journey and terminating at the time of return to their Country of Domicile.

Insured Person

Any director, employee, including temporary and contract staff, academic staff, faculty, chaperone, students, or any category of persons declared by the Participating Organization as shown in The Policy Schedule.

Operative Time of Cover

The period of time for which We will cover the Insured Person for benefits described within the The Policy Schedule.

Period of Insurance

From the effective date until the expiry date shown in The Policy Schedule and any subsequent period for which We accept payment for renewal of this Policy.

Policy Period

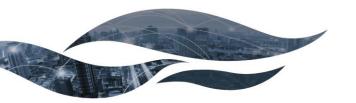
From the effective date to the expiry date shown in The Policy Schedule.

Participating Organization

Drexel University, including its subsidiaries, affiliates and related entities, who is the organization that applies for coverage on Your behalf from the Plan Administrator.

Plan Administrator

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



The Business

Activities directly connected with The Business described in The Policy Schedule.

The Policy Schedule

The document which specifies details of The Policyholder, The Insured Persons, The Operative Time of Cover, The Business, and specifies details of the benefits covered, sums insured and any Excesses, Endorsements and Conditions applying to the Policy.

We/Us/Our/The Company

HDI Global Specialty SE, UK Branch.

You/Your/The Policyholder

The Insured Person or persons, companies, partnerships, institutions of higher education or unincorporated associations named in The Policy Schedule as The Policyholder.

Part A) Policy Conditions

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

Aggregate Limit

If the aggregate amount of all benefits payable exceeds the stated Aggregate Limit the benefits payable to an Insured Person shall be proportionately reduced until the total of all Benefits does not exceed the Aggregate Limit.

Alteration of Risk

We will at Our option void the Policy from the inception of this insurance where there has been any alteration to The Business and/or the occupation or pursuits of any Insured Person after the effective date of this insurance which increases the risk of loss, liability, destruction, damage, accident, injury or illness or where Your interest ceases except by will or operation of law unless We have accepted the alteration.

Assignment

You may not assign the benefits under this Policy. We shall not be bound to accept or be affected by any notice of any trust charge, lien, purported assignment or other dealing with or relating to this Policy.

Cancellation

We may cancel this Policy by sending You 90 days written notice to Your last known address and We will return any unearned proportion of the premium paid.

You may cancel this Policy at any time by sending us 30 days written notice and any unearned premium shall be returned to you provided that We have not made any claims payment under this policy or have any claims for consideration or You are not aware of any claims that have not been reported to Us. Any claim payments made or under consideration shall be deducted from the amount of unearned premium due to be returned.

Force Majeure

We shall not be liable for failure to provide Services and/or delays caused by acts of God, strikes or other conditions beyond our reasonable control, including but not limited to flight conditions or situations where the performance of this Policy is prohibited or delayed by local laws, regulations or regulatory agencies. We shall notify You immediately of any Force Majeure event.

In the event of such Force Majeure lasting longer than 7 days You will have the right to cancel this Policy immediately and We shall return any premium paid by You less any amount for claims paid or due to be paid.

Fraud



If a claim made by You or anyone acting on Your behalf, or any person claiming to be indemnified is fraudulent or exaggerated, whether ultimately material or not or if a false declaration or statement is made or if a fraudulent device is used in support of a claim. We may at Our option void the Policy from the inception of this insurance or cancel the Policy from the date of the claim or alleged claim and repudiate the claim.

Identification

The Policy and The Policy Schedule will read as one contract. A particular word or phrase which is not defined will have its ordinary meaning.

Reasonable Precautions

You must take all reasonable precautions to avoid Accident, injury or illness to any person, or loss, destruction or damage to their property, and You must comply with all legal requirements and safety regulations and conduct The Business in a lawful manner. If in relation to any claim You have failed to fulfil any of these conditions, You will lose your right to indemnity or payment for that claim.

The Contracts (Rights of Third Parties) Act 1999

The Contracts (Rights of Third Parties) Act 1999 or any amendment thereto does not apply to this Policy. Only We and the Policyholder can enforce the terms of this Policy. No other party may benefit from this contract as of right. The Policy may be varied or cancelled without the consent of any third party.

Misdescription

We will void this Policy if there has been any misrepresentation, misdescription or failure to disclose any material fact by You or anyone acting for You.

Premium

It is agreed that the premium is based on the Participating Organization's prior year's travel travel data and is not adjustable.

Sanction Limitation and Exclusion Clause

We shall not provide cover or pay or be liable for any claims or provide any benefit under this Policy if by providing any cover, paying any claims or providing any benefit under this Policy would expose Us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

Part A) Policy 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:

- 1. Any expense related to the Insured Person engaging in the commission of, or the attempt to commit, an unlawful act.
- 2. Any expense incurred as a result of the Insured Person engaging in active service in the armed forces or police of any nation; active participation in war (whether declared or not), invasion, act of foreign enemy, hostilities, civil war, rebellion, riot, revolution or insurrection unless declared to Us and accepted by Us in writing.
- 3. Any losses incurred for which You are responsible under a Workmen's Compensation Act
- 4. Any expenses related to the treatment of drug or alcohol addiction.
- 5. An Insured Person once they have attained the age of 81 unless declared to Us and accepted by Us in writing.

Emergency Medical Evacuation and Repatriation

Definitions



The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section, unless an alternative definition is stated to apply. Please also refer to the Policy Definitions at the front of this Policy document.

Emergency Medical Evacuation

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.

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 person to visit You if You are or are to be hospitalized for 24 hours or more; and

- Reasonable expenses for lodging and meals for that person to remain whilst You are hospitalized, 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 person prior to Your return to Your Home Country, for a period not exceeding 15 days.

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.

Serious Medical Condition

A medical condition that in the opinion of the Emergency Medical Assistance Provider's physician requires immediate emergency medical treatment to avoid certain death or serious impairment to the Insured Person's health and such emergency medical treatment is not available or is not adequate in the Insured Person's Host Country to avoid death or serious impairment of health.

Qualified Medical Practitioner

A doctor or specialist who is registered or licensed to practice medicine under the laws of the country they practice in other than an Insured Person, Partner of an Insured Person, and a member of the immediate family of You or the Insured Person or an employee of Yours.

Extensions

The following Extension applies if stated as being Covered in The Policy Schedule

Repatriation of Remains

In the event of the death of the Insured Person whilst on an Insured Journey Our Emergency Medical Provider will arrange for and pay up to the maximum shown in the Benefits Table for the reasonable costs incurred of transportation of the Insured Person's body or ashes to the Insured Person's Country of Domicile.

We shall not be held liable for any delay in returning the Insured Person's Remains for any reasons that are not in our direct and immediate control.

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 Return Home due to family member death or illness (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 incurred by You to travel



home to Your Country of Domicile if an Insured Person's parent, child, sibling, spouse or partner suffers a life-threatening illness or death. If the benefit allows, We will also pay the reasonable cost of economy transportation to return the Insured Person to his/her program within 90 days of the departure date.

Return of Traveling Companion (if Covered as stated in the Benefits Table)

If an Insured Person's traveling companion loses previously-made travel arrangements due to a delay caused by the Insured Person's medical emergency or death, We will pay the reasonable cost of economy transportation up to the amount stated in the Benefits Table for one-way economy airfare to return the companion to his or her original departure point. A traveling companion means traveling on the same itinerary as the Insured Person.

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 person 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 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.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

- You must contact the Emergency Medical Assistance Provider if you require Emergency Medical Evacuation, Repatriation, Repatriation of Remains, or prior to incurring Emergency Travel expenses, otherwise We will not be able to reimburse the costs incurred.
- If We incur costs as a result of advice or assistance being provided or the settlement of any expenses being made in good faith by the Emergency Medical Assistance Provider to any person who is not insured under this Policy, You shall reimburse us in respect of such costs and expenses.
- 3. The Emergency Medical Assistance Provider reserves the right, at its sole discretion, to determine the location to which the Insured Person will be evacuated and the timing, means or method by which such Evacuation or repatriation will be carried out. In making such arrangements the Emergency Medical Assistance Provider may consider all relevant circumstances including, but not limited to the Insured Person's medical condition, the degree of urgency, the Insured Person's fitness to travel, airport availability, weather conditions and travel distance and whether transportation will be provided by private medically equipped aircraft, helicopter, regular scheduled flight, rail, water or land vehicle. Transportation shall be carried out under such medical supervision, as determined by the Emergency Medical Assistance Provider.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claims resulting from:

- 1. More than one Emergency Medical Evacuation and/or Repatriation for any single medical condition of an Insured Person during the Policy Period.
- Any cost or expense not expressly covered in advance and in writing by The Emergency Medical Assistance Provider and/or not arranged by them. This exception shall not apply to Emergency Medical Evacuation from remote or primitive areas when Our Emergency Medical Assistance Provider cannot be contacted in advance and delay might reasonably be





- expected to result in loss of life or harm to the Insured Person.
- 3. Any expense incurred for Insured Person(s) when travelling contrary to the advice of a Qualified Medical Practitioner, or for the purpose of obtaining medical treatment or for rest and recuperation following any prior accident or illness.
- 4. Any expense incurred for Emergency Medical Evacuation or Repatriation if the Insured Person is not suffering from a Serious Medical Condition, and/or in the opinion of Our Emergency Medical Assistance Provider's physician, the Insured Person can be adequately treated locally, or treatment can be reasonably delayed until the Insured Person returns to their Country of Domicile.
- 5. Any expense incurred for Emergency Medical Evacuation or Repatriation where the Insured Person, in the opinion of the Emergency Medical Assistance Provider's physician, can travel as an ordinary passenger without a medical escort.
- 6. Any expense incurred related to accident or injury occurring while the Insured Person is engaged in any hazardous activity, pastime or pursuit including but not limited to caving, mountaineering or rock climbing necessitating the use of guides or ropes, potholing, skydiving, parachuting, bungee-jumping, ballooning, hang gliding, deep sea diving utilizing hard helmet with air hose attachments, martial arts, rallying, racing of any kind other than on foot, and any organized sports undertaken on a professional basis.
- 7. Any expense related to the Insured Person engaging in any form of aerial flight except as a passenger on a scheduled airline flight, as a passenger on a licensed charter fixed wing aircraft over an established route; or as a passenger travelling on a business related activity in a fixed wing aircraft owned or leased to the Subscriber unless the form of aerial flight has been declared to and accepted by Us in writing prior to travel..
- 8. Any expense related to treatment performed or ordered by a non-registered practitioner not in accordance with the standard medical practice as defined in the country of treatment.
- Any expenses incurred as a direct or indirect result of elective surgery or cosmetic surgery.
- 10. Any Losses incurred by You or the Insured Person if You or they fail to follow the advice of Our Emergency Medical Assistance Provider.
- 11. Any valid claim costs that have been increased by Your or the Insured Person's failure to follow the advice of Our Emergency Medical Assistance Provider.

Cover

In the event of the Insured Person sustaining a Serious Medical Condition during the Operative Time of Cover We will pay up to the sum insured shown in The Policy Schedule for their Emergency Medical Evacuation or Repatriation or for Emergency Travel Expenses incurred by or on their behalf.

In the event of a Medical Emergency requiring Emergency Medical Evacuation or Repatriation please contact Our Emergency Medical Assistance Provider.

Telephone: 1 603-952-2038

Political and Natural Disaster Evacuation

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section, unless an alternative definition is stated to apply. Please also refer to the Policy Definitions at the front of this Policy document.

Appropriate Authorities

The Foreign, Commonwealth & Development Office (FCDO) of the United Kingdom, The United States Department of State, the Foreign Office of Canada or similar authority of the Policyholder Host Country.

Evacuation Costs

The costs incurred within 30 days of an Insured Event to evacuate the Insured Person to the nearest place of safety or to their Country of Domicile, an alternate work location or alternate study location, or both.



If the Insured person is in imminent peril, cover will apply to the evacuation of the Insured Person by any appropriate means consistent under the circumstances with their health and safety, otherwise cover hereunder will apply to the transportation only at economy fares unless unavailable or manifestly impractical.

Expenses

The cost of accommodation, transportation and food and any other reasonable and necessary expenses.

Hibernation Costs

The costs of security and relocation if an Insured Event has occurred and at the sole discretion of the Crisis Management Company the Insured Person may remain in their Host Country, in either their current location or relocate to a site chosen by the Crisis Management Company up to a period of 14 days from the time the Insured Event first occurs.

Insured Event

 The Insured's Appropriate Authority issues a travel advice for a particular country or region where the Insured Person is on an Insured Journey in, recommending that certain categories of person which includes the Insured Person should leave that country or region.

or -

- 2. The recognised Government in their Host Country:
 - a. Declares a state of emergency necessitating immediate evacuation or
 - b. Formally recommends or instructs that the Insured Person should leave that country or region for safety or
 - c. Seizes, confiscates or expropriates the Insured or Insured Person's property, plant or equipment or
 - d. Expels the Insured Person or declares the Insured Person "persona non grata".
 - e. Withdraws all scheduled international commercial flights for a period of excess of 24 hours as a result of political or military action intervention which has a direct impact on the Insured persons safety and prevents them leaving the country.
- 3. Natural Disaster within their Host Country which has a direct impact on the Insured Person and their safety.
- 4. The Political or military events in the country the Insured Person is staying in represents an imminent threat to their safety.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

- 1. Our Crisis Management Call Centre must be advised immediately of any situation that may give rise to a claim or as soon as reasonably possible thereafter. If the Crisis Management Call Centre is not contacted immediately Our liability to pay any subsequent claim under this section will cease.
- You must provide Us and Our Crisis Management Company with all assistance and information requested in a timely manner.
- 3. The Insured Person must follow the advice of Our Crisis Management Company at all times.
- 4. Where you or an Insured Person is entitled to any refund on unused tickets or returnable deposits or advanced payments We will be entitled to deduct these from the value of any claim.
- 5. You must not make or attempt to make arrangements without the agreement of Our Crisis Management Company.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not pay any claims resulting from:

- 1. Your failure to reasonably prove that there is any threat to the Insured Person's safety.
- 2. You taking part in any political activity or operations of any security or armed forces unless declared to and agreed by Us.
- 3. Or attributable to an alleged violation of the laws of the Host Country by You or the Insured Person.





- 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 the Insured Person's Host Country.
- 5. Accommodation, Evacuation Expenses or Hibernation Costs incurred more than 30 days after the Insured Event.
- 6. Or attributable in whole or in part to a debt insolvency, commercial failure, the repossession of any property by any title holder or lien holder, or any other financial cause.
- 7. Your failure to honour any contractual obligation bond or specific performance condition in a license.
- 8. You at inception of this policy having prior knowledge of or had received information of any specific matter, fact or circumstance which would lead to an Insured Event that has not been declared to and accepted by Us.
- 9. Any Losses incurred by You that have been increased by Your failure to follow the advice of Our Crisis Management Company.

Cover

We will indemnify You up to the sums insured shown in The Policy Schedule if during the Operative Time of Cover You incur Evacuation Costs, Hibernation Costs and Expenses as a result of an Insured Event in Your Host Country.

In the event you require a Political or Natural Disaster Evacuation please contact Our Crisis Management Company

Telephone: 1 603-952-2038



Part B) EMERGENCY MEDICAL EXPENSES

HDI GLOBAL SPECIALTY POLICY WORDING BLANKET

The Policy will be administered on behalf of the Insurer by the Administrator: On Call International, LLC.

BENEFITS	Covered / Not Covered	Sum Insured	
MERGENCY ASSISTANCE	Included	Included	
MEDICAL EXPENSES and HOSPITALISATION	Covered	\$100,000	
Deductible: All Cause		0	
Co-Insurance		100%	
mergency 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	
reatment by physiotherapists and chiropractors as prescribed by an authorized physician	Covered	Covered if in connection with covered injury/illness	
Acute Onset of Pre-existing condition Clause	Covered	Up to \$20,000	
MBULANCE transportation	Covered	Covered if in connection with covered injury/illness	
Mental Health Disorder	Covered	Up to \$20,000	
PERSONAL ACCIDENT Accidental death, loss of sight, loss of mb(s), permanent total disablement	Covered	\$10,000	
PERSONAL LIABILITY Physical injury and property damage	Covered	\$100,000	
MERGENCY BAIL BOND	Covered	\$1,500	
CATASTROPHE COVERAGE	Covered	100% of customary costs up to \$1,000	
EARCH AND RESCUE	Covered	100% of customary costs up to \$10,000	
OSS of PERSONAL BELONGINGS – including theft and loss or lamage by fire or natural disaster	Covered	Up to \$1000	
Maximum per Article	Covered	\$100	
OSS of checked in LUGGAGE	Covered	\$500	
UGGAGE DELAY	Covered	\$200	
OST DOCUMENTS or MONEY	Covered	\$1,000 Max \$100 per item	
RIP INTERRUPTION	Covered	\$2,500	
RAVEL DELAY	Covered	\$100 a day; Max 5 days	
Quarantine Cover	Covered	Up to \$5,000 combined single limit (CSL) annual aggregat per Insured Person/Travel Companion. Return of Travel Companion: Up to \$1,500 included under CSL Hotel Stay: Up to 14 days or \$2,500 included under CSL Food Costs: Up to \$50 per day for 14 days included in CSL	





 Change Fee/Airfare: Up to \$1,000 difference in air fare included under CSL

PRE-EXISTING MEDICAL CONDITIONS

This policy provides for unseen medical events only. Pre-existing Medical Conditions are covered only up to USD 20,000 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 APPLICABLE TO PART B OF THE POLICY

Benefit payments

All benefits will be paid directly to You unless Our Emergency Assistance Company has guaranteed Your expenses or charges and has made payment on Our behalf. In the event of Your death any benefits payable will be made to Your executors or administrators. In the event of You not having an executor or administrator the benefits will be paid out in accordance with the inheritance laws of Your Home Country.

Currency

The monetary limits and premiums stated in the Policy and any Certificate issued hereunder are in USD

Contribution

If at the time of an event giving rise to a claim there is any other insurance policy, reciprocal health arrangement or governmental health or workmen's compensation scheme in force in Your name which covers You for the same expense, loss or liability We will only pay our share of the claim determined by reference to the cover provided by each of the relevant policies.

Eligibility Criteria

To be eligible for cover under this Policy You must satisfy the following criteria (the Eligibility Criteria):

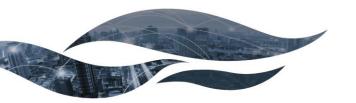
- At the time of purchasing or extending this Policy and during the Coverage Period You must be under the age of 66, 67+ will need to have a fit to fly from Physician prior to travel if you are a student or 81 if you are staff or faculty
- You must be travelling outside of Your Home Country (including Incidental Travel days) for the purpose of studying or working for the Participating Organization.
- You must be resident in your Home Country when applying for this Policy and, at the time of purchasing or extending this Policy and during the Coverage Period.

Extensions

You may extend Your Coverage Period, provided You continue to satisfy the Eligibility Criteria and remain in good health, by contacting the Plan Administrator. The maximum aggregate period of cover under Your Policy, as extended, may not exceed 12 months. We may refuse to extend Your Coverage Period., including if You have made or intend making any claims on Your previous Coverage Period. For all such extensions all conditions, restrictions and exclusions set out in this Policy will continue to apply.

Medical Advice

You cannot undertake a trip from Your Home Country either against the advice of Your Physician or after You have received a terminal prognosis or if you are travelling purely for the purpose of medical treatment. If You choose to do so all Our liability under this Policy shall cease.



Measures outside Our control

We and Our Emergency Assistance Company will use Our best efforts to arrange any Emergency Medical Evacuation or Repatriation of Remains within the least amount of time possible. The timeliness of Emergency Medical Evacuation or Repatriation of Remains can be affected by circumstances which are not within Our or their control, such as delays of or restrictions on flights caused by mechanical problems, government officials, telecommunications problems and weather and other acts of God. We and Our Emergency Assistance Company shall not be liable for any delays that are not within Our or their direct and immediate control.

Fraudulent claims.

If any claim under this insurance shall be in any respect fraudulent or if any fraudulent means or devices are used by You or anyone acting on their behalf, this insurance shall be null and void and all claims hereunder shall be forfeited, in addition to any and all other remedies available to Us

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 preauthorization 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/travallers 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.

Residency

You must be resident in your Home Country or within 14 days of arrival in Your Host Country when applying for this Policy

You cannot be a Legal Permanent Resident of the Host Country. Cover under this Policy will cease immediately once you become a Legal Permanent Resident.

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.

Sanction Limitation and Exclusion Clause

We shall not provide cover or pay or be liable for any claims or provide any benefit under this Policy if by providing any cover, paying any claims or providing any benefit under this Policy would expose Us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

Termination of Cover:

Cover under this Policy terminates on the earlier of:

- 1. 12:01am Eastern Standard Time on the last day of the Coverage Period for which premium has been paid; or
- 2. the moment You return to Your Home Country
- 3. the expiration of 12 months from the Effective Date unless declared to and accepted by Us in writing; or
- 4. the maximum amount of benefits payable under this Policy as set out in the Benefits Table has been paid; or
- 5. the date You cease to be an Eligible Person.

Grace Period

Following a Termination of Cover as a result of you ceasing to be an Eligible Person, you shall have the benefit of a temporary extension of cover under this Policy for a maximum period of 14 days grace (**Grace Period**). If, within the Grace Period, you acquire the benefit of alternative insurance cover, such temporary extension of cover will cease immediately.

GENERAL EXCLUSIONS APPLICABLE TO PART B OF THE POLICY



The following exclusions apply to all sections

We will not pay any expenses resulting indirectly or directly from:

- 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 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. Any claim incurred in any country, destination or region where the Appropriate Authorities advice at the time the trip was booked is 'against all travel to', if present in the policy, is amended to include:
 - This exclusion DOES NOT apply if the warning against travel was issued solely because of COVID-19/SARS-CoV-2 and no other safety factors are addressed within the advice, except for charges related to Catastrophe, Trip Cancellation and/or Trip Interruption.
- 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 or fitness purposes and not for wage, reward or profit), american football, contact sports, martial arts, rugby, hunting and racing other than racing on foot.
- I. 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.

GENERAL DEFINITIONS APPLICABLE TO THE POLICY AS A WHOLE

Certain words within your policy have special meanings which are defined as follows:



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.

Additional Costs: The benefits provided herein are reasonable and necessary costs in additional to costs already incurred by You or Your travelling companion

Additional Isolation Accommodation: Accommodation costs included within Hotel Stay benefit up to the maximum sublimit as shown in the schedule of benefits

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 Buggying, 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 Commonwealth & Development Office (FCDO) 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 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.

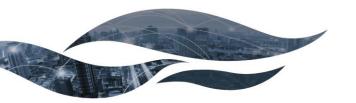
Eligibility Criteria: means the qualifications and requirements needed for You to purchase this Policy as set out in the General Conditions.

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 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.

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, Showjumping, 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: Drexel University 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.

Quarantine: Mandatory confinement intended to stop the spread of a contagious disease to which you or someone booked to travel with you has been exposed.

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 County 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: HDI Global Specialty SE, UK Branch

Unattended: Outside of Your **c**ustody, 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.

MAIN POLICY BENEFITS

Medical Expenses and Hospitalization

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 20,000 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 Room Deductible (Co-Pay Amounts)

In you are travelling in the USA, there is an Emergency Room Deductible of US\$ 250 co-pay for an emergency room for Illness if you are not admitted for treatment. This does not apply to any Accident or Injury treatment

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 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 Reunion

We will pay up to the amount stated in the Benefits Table for the following Emergency Reunion expenses

The cost of an economy round-trip air or ground transportation ticket for one of Your Close Relatives 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 Close Relative 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 Close Relative prior to Your return to Your Home Country, for a period not exceeding 15 days.

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

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 20,000 limit. You are not covered for any claims that you make that related to a Pre-existing Medical Condition over this limit.
- b. Pregnancy other than Complications of Pregnancy.
- c. 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.



- d. Surgeries, treatments, services or supplies which are Investigational, Experimental or for Research purposes.
- e. 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.
- f. Treatment or procedure that either promotes or prevents conception or procedure that either promotes, enhances or corrects impotency or sexual dysfunction.
- g. 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.
- h. 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.
- i. 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
- j. 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 diseased 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:
 - i. Your ownership, possession or occupation of land or buildings, immobile property or caravans other than temporary accommodation occupied by You.
 - ii. Any willful or malicious act committed by You..
 - iii. The carrying on by You of any trade, business or profession except as a Teacher.
 - iv. The supply of goods or services by You.
 - v. Your Insanity, You being under the influence of alcohol, or drugs (except as medically prescribed) or Your drug addiction.
- e. Any liability assumed by You under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.
- f. 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 has 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 Expenses

We will pay up to the amount stated in the Benefits Table if You require emergency evacuation to Your Home Country or the nearest place of safety 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.
- I. 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

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 additional Benefit can only be purchased 120 days prior to the Effective Date shown on Your Certificate of Insurance

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 Your 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

Quarantine Benefit

We will pay Additional Costs up to the amount as stated in the Benefits Table if You or someone booked to travel with You are required to Quarantine by order of a Physician or by order or other requirement of a government or public authority, based on their qualified belief that You or someone booked to travel with You have been exposed to a contagious disease (including an epidemic, endemic or a pandemic disease such as Covid-19). (This assessment by a Physician, government or public authority needs to be a written order issued to You, or a written order made publicly available that You must follow, in order to claim.)

We will also pay if You or someone booked to travel with You are refused boarding of the public transport on which You are booked to travel, on the order of government, public authority or carrier, due to You or someone booked to travel with You displaying symptoms of a contagious disease (including an epidemic or a pandemic disease such as Covid-19).



The following definitions are applicable to Quarantine Coverage

Quarantine: Mandatory confinement intended to stop the spread of a contagious disease to which You or someone booked to travel with You has been exposed.

Additional Costs: Any reasonable and necessary costs Incurred as a direct result of unexpected Quarantine in addition to costs already Incurred by You or Your Travel Companion.

Additional Isolation Accommodation: Accommodation costs in excess of the hotel stay benefit as shown in the Benefit Table

Travel Companion: means a person traveling on the same itinerary as You, or a person required by the Participating Organization to stay with the Insured Person as a chaperone.

The following exclusions are applicable to Quarantine Coverage:

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

- a. Any trip delay caused by Quarantine on the cruise ship due to a contagious disease.
- b. Travel arrangements and Additional Costs that were neither coordinated by nor approved by the Assistance Company in advance.
- c. The cost of any Additional Isolation Accommodation requirements imposed by Your country of destination upon arrival or Your country of origin upon return regardless of whether You have tested positive or negative for Covid 19.
- d. This benefit excludes any Quarantine that applies generally or broadly to some or all of a population, vessel, geographical area, or that applies based on where You are travelling to, from or through.

Privacy notice

We value your business and your trust in HDI Global Specialty SE. The privacy and confidentiality of your personal information is among our top priorities.

This notice explains how your personal information will be collected and dealt with, our practices and procedures for securing your personal information and your rights concerning that personal information. In this notice, 'we', 'us' or 'our' refers to HDI Global Specialty SE and its agents, co-insurers and reinsurers. 'You' or 'your' refers to the individual whose personal information we are processing.

1. Responsible data controller

HDI Global Specialty SE - UK Branch Legal & Compliance 20 Gracechurch Street London EC3V 0BG Tel. +44 (20) 7015 4000



HDI Global Specialty SE is a Data Controller as defined under the EU General Data Protection Regulation, UK General Data Protection Regulation and UK Data Protection Act 2018, as amended from time to time (together the "Data Protection Law").

You can reach our Data Protection Officer by post at the aforementioned address (please include the additional address line "Data Protection Officer") or by e-mail via our data privacy group mailbox:

E-mail: privacy-hgs@hdi-specialty.com

2. Personal information we may collect about you

- 2.1. *Individual details* such as name, address, proof of address, contact details (including emails and telephone numbers), gender, marital status, date and place of birth, nationality, employer, job title, employment history and family details (including their relationship to you).
- 2.2. *Identification numbers* issued by government bodies, agencies or similar such as national insurance, passport, tax identification or driving licence numbers.
- 2.3. Financial information such as bank account or payment card details, income or transaction histories.
- 2.4. Insurance policy information including information about quotes you receive and policies you take out.
- 2.5. Credit and anti-fraud information including credit history, credit score, sanctions and criminal offences, and information received from various anti-fraud databases relating to you.
- 2.6. Information about previous and current claims (including in connection with other related or unrelated insurance) which may include information about your health, criminal convictions, or special categories of Personal Data (as defined under Data Protection Law) and, in some cases, surveillance reports.
- 2.7. Technical information including your computer's IP address.
- 2.8. Special categories of Personal Data which have additional protection under Data Protection Law, namely health, criminal convictions, racial or ethnic origin, political opinions, religious or philosophical beliefs, trade union membership, genetic information, biometric, or information concerning sex life or sexual orientation.

We will only collect such non-public personal information about you to the extent that our business needs require.

3. Where we may collect your personal information from

We may collect your personal information from various sources:

- 3.1. You (including, from time to time, recordings of your telephone calls with us)
- 3.2. Your family members, employer or agent/representative (including your broker)
- 3.3. Our agents, other insurers, insurance brokers, or reinsurers
- 3.4. Credit reference agencies
- 3.5. Websites or software applications for use on computers or mobile devices and/or social media content, tools and applications
- 3.6. Anti-fraud databases, sanctions lists, court judgments and other databases
- 3.7. Government agencies
- 3.8. Any open electoral register; or
- 3.9. In the event of a claim, third parties including the other party or parties to the claim, witnesses, experts, loss adjusters, solicitors, claims handlers, translators, surveillance agents, engineers and others.

4. What personal information we disclose to you

We do not disclose any of our customers' or other persons' non-public personal information to anyone, except as permitted or required by law. Permitted disclosures include information to process transactions on your behalf, and



information about you or about participants, beneficiaries or claimants under your insurance policy in the normal course of business.

5. Identities of Data Controllers and Data Protection Contacts

The operation of the insurance market means that personal data may be shared between insurance brokers, insurers, reinsurers and other market participants. You can find out the identity of the controller or controllers of your personal data in the following ways:

If you took out the insurance yourself, get in touch with the data protection contact at your insurance broker or the entity you dealt with in taking out the insurance.

If your employer or another organisation took out the insurance for your benefit, you should get in touch with the data protection contact at your employer or the organisation that took out the insurance.

If you are not a policyholder or an insured under the insurance, you should get in touch with the organisation that collected your personal data.

6. The purposes, categories, legal grounds and recipients of our processing your personal information

6.1. Your personal information may be processed for the following purposes:

6.1.1. Quotation/inception:

- Setting you up as a client, including possible fraud, sanctions, credit and anti-money laundering checks
- Evaluating the risks and matching them to appropriate policy terms/premium
- Payment of premium where the insured is an individual

6.1.2. Policy administration

- Client care, including communicating with you and sending you updates
- Payments to and from individuals

6.1.3. Claims processing:

- Managing insurance and reinsurance claims
- Defending or prosecuting legal claims or regulatory proceedings
- Investigating or prosecuting fraud

6.1.4.Renewals

- Contacting you/the insured to renew the insurance
- Evaluating the risks and matching them to appropriate policy terms/premium
- Payment of premium where the insured is an individual



6.1.5. Other purposes including:

- Complying with our regulatory or legal obligations
- Risk modelling
- Effecting reinsurance contracts
- Transferring books of business, company sales, restructuring and reorganisation.
- 6.2. We may also disclose personal information to the following non-exhaustive list of entities: reinsurers, financial institutions, service providers, contractors, agents, tax authorities, law enforcement and other regulators and group companies in connection with the above purposes. You will find the current list of service providers and our companies who participate in data-processing operations hereon our website or by emailing privacy-hgs@hdi-specialty.com.
- 6.3. We process your personal information on one of the following legal grounds as required by Data Protection Law:
 - 6.3.1. in order to place and operate the contract(s) of insurance;
 - 6.3.2. where a legitimate interest to do so has been identified for which processing of your personal information is necessary and which balances your interest, rights and freedoms e.g. protecting you from fraud or personalising the insurance product to you; or
 - 6.3.3. where we have a legal obligation to do so e.g. to prevent money laundering.

7. Consent

To provide insurance and deal with insurance claims in certain circumstances we may need to process special categories of your Personal Data (see 1.8 above), such as medical or criminal records. Your consent to this processing may be necessary to achieve one or more of the purposes set out above.

Where this is the case, you may withdraw your consent to such processing at any time by notifying <u>privacy-hgs@hdispecialty.com</u>. If you do withdraw your consent, however, this may mean we cannot provide insurance or pay claims.

8. Profiling

When calculating insurance premiums, we may compare your personal information against other information such as industry averages or fraud patterns. Your personal information may also be used to create such other information to ensure, among other things, that premiums align to risk.

We may make decisions based on profiling and without staff intervention (known as automatic decision making).

9. Storage, retention and protection of your personal information

Information is held by us on servers and in printed form, as well as on our behalf in off-site storage facilities. We will keep your personal information only for so long as is necessary and for the purpose for which it was originally collected. In particular, so long as there is any possibility that either you or we may bring or face legal claims in connection with the insurance contract(s), or if there are legal or regulatory reasons to retain your personal information, we must do so.



We understand the importance of securing your personal information. We have physical, electronic and procedural safeguards in place to protect your nonpublic personal information in compliance with applicable state federal laws. We restrict employee access to customer information only to those who have business reason to know, in order to provide our products and services to you.

10. Transfer of personal information

Due to the global nature of our business, for the purposes set out above we transfer personal information internationally to parties located in other countries that have a different data protection regime than is found in the United States of America. Personal information collected by HDI Global Specialty SE is likely to be transferred to places outside of the United States of America (such as to secure data centres, affiliates, service providers, business partners and governmental or regulatory authorities) in order to carry out the purposes, or directly related purposes, for which the personal information was collected.

If you would like details of how your personal information would be protected if transferred outside the United States of America, please contact privacy-hgs@hdi-specialty.com.

11. Amendment

We may amend this Privacy Notice from time to time. The most recent version can always be consulted on our website: https://www.hdi.global/legal/privacy/.

12. Your rights

If you have any questions about our use of your personal information, please contact the relevant data protection contact as explained above. In certain circumstances you may have the right to require us to:

- 12.1. Provide you with further details about the use we make of your personal information
- 12.2. Provide you with a copy of the personal information we hold
- 12.3. Correct any inaccuracies in the personal information we hold
- 12.4. Delete any personal information we no longer have any lawful ground to use
- 12.5. Where the processing requires your consent, to withdraw that consent so we stop the processing in question
- 12.6. Transfer your personal information to another organisation
- 12.7. Object to any processing based on the legitimate interests ground at 4.3.2 above unless our reasons for that processing outweigh any prejudice to your data protection rights
- 12.8. Object to automated processing, including profiling
- 12.9. Restrict how we process or use your personal information in certain circumstances e.g. whilst a complaint is being investigated.

In certain circumstances we may need to restrict the above rights to safeguard the public interest (e.g. prevention or detection of crime) or our interests (e.g. legal or litigation privilege).

If you are not satisfied with our use of your personal information or our response to any request by you to exercise any of your rights, or if you think we have breached Data Protection Law or any other applicable data protection laws, you have the right to complain to the relevant national authority, details below.

Germany (lead supervisory authority)	



Die Landesbeauftragte für den Datenschutz Niedersachsen

Prinzenstraße 5 30159 Hannover

Phone: +49 (0511) 120 45 00 Fax: +49 (0511) 120 45 99

E-mail: poststelle@lfd.niedersachsen.de

Website: https://www.lfd.niedersachsen.de

UK

England	Scotland	Wales	Northern Ireland
Information Commissioner's Office	Information Commissioner's Office	Information Commissioner's Office	Information Commissioner's Office
Wycliffe House	45 Melville Street	2 nd Floor	3 rd Floor
Water Lane	Edinburgh	Churchill House	14 Cromac Place
Wilmslow	EH3 7HL	Churchill Way	Belfast
Cheshire		Cardiff CF10 2HH	BT7 2JB
SK9 5AF			
Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate)	Tel: 0131 244 9001	Tel: 029 2067 8400	Tel: 0303 123 1114 (local rate) 028 9027 8757 (national rate)
casework@ico.org.uk	scotland@ico.org.uk	wales@ico.org.uk	ni@ico.org.uk

13. Contact Us

If you have any questions about our use of your personal information you can contact us at:

Hannover Office: Data Protection Officer, HDI-Platz 1, 30659 Hannover, Tel. +49 511 5604-2909

UK Branch: Legal & Compliance, 20 Gracechurch Street, London, EC3V 0BG, Tel. +44 (20) 7015 4000