100CL0114D (100CL DOC) 15368-0114



**Description of Coverage** 

Plan Code 100CL



A Europ Assistance Group Company

This is a brief Description of Coverage, which outlines benefits and amounts of coverage that may be available to you. To view your state-filed form for your specific benefits, please call (800) 348-9505 to obtain your Individual Policy in the following states: IL, IN, KS, LA, OR, OH, VT, WA, and WY or your Group Certificate for all other states. Your Individual Policy or Group Certificate will govern the final interpretation of any provision or claim. State specific limitations may apply.

**Important:** Keep this document and carry a copy with you when you travel. If you need to cancel your Trip, contact the company you booked with immediately to cancel your reservation.

This plan is administered by CSA Travel Protection and Insurance Services.

For Certificate/Policy Inquiries, Requests or Customer Service Call: (800) 348-9505

Para Asistencia En Espanol, Favor De Llamar Al: (800) 318-0179

For Emergency Assistance 24 Hours a Day During Your Trip Call: (877) 243-4135

Collect Worldwide: (240) 330-1529

# **Schedule of Coverage and Services**

#### **Insurance Coverage**

(Underwritten by Stonebridge Casualty Insurance Company)

Coverage	Maximum Limit Per Person	Maximum Limit Per Plan
Trip Cancellation	Up to 100% of Trip Cost Insured	
Trip Interruption	Up to 150% of Trip Cost insured	
Missed Cruise Connection	\$1,000	\$10,000
<b>Travel Delay</b> (\$150 Per Person Daily Limit Applies)	\$1,000	\$10,000
Baggage and Personal Effects	\$1,500	\$15,000
Baggage Delay	\$500	\$5,000
Accidental Death & Dismemberment	\$50,000	\$100,000
Air Flight Accident	\$100,000	\$200,000
Medical or Dental Expense	\$250,000	\$250,000
Emergency Assistance (Emergency Medical Transportation)	\$1,000,000	\$1,000,000
Rental Car Damage	\$50,000	\$50,000

# Description of 24-Hour Emergency Assistance Services

(PROVIDED BY CSA'S DESIGNATED PROVIDER)

#### **Available Services**

Various 24-Hour Emergency Assistance Services are provided along with the CSA Travel Protection® plans. A description of all 24-Hour Emergency Assistance Services are contained in this document. The 24-Hour Emergency Assistance Services are only available to persons whose primary residence is in the United States. This plan is administered by CSA Travel Protection and Insurance Services.

1

#### **How to Call the 24-Hour Emergency Hotline**

If you need emergency help for an available service, you can call toll-free 24 hours a day to (877) 243-4135 from within the United States, or call collect to (240) 330-1529 from around the world.

When calling, you should have available your Policy/ Reference number and Plan Code, your location, a local telephone number, and details of the situation. After your coverage has been verified, the assistance provider will assist you. If you cannot call collect from your location, dial direct and give the assistance provider your telephone number and location and they will call you back.

To call collect from a foreign country you may first need to reach a live operator on the line. In some cases, that operator may not understand how to process collect calls to the United States. To be prepared, please visit www. consumer.att.com/global/english/away/directservice.html for information on how to reach an English-speaking operator. If you were unable to reach CSA collect and paid for your call, we will ask you for a number to call you back so you will pay no further charges.

In the event of a life-threatening emergency, please first call the local emergency authorities to receive immediate assistance and then contact the assistance provider.

There may be times when circumstances beyond the assistance provider's control hinder their endeavors to provide help services; however, they will make all reasonable efforts to provide services and help resolve your problem.

The assistance provider cannot be held responsible for failure to provide, or for delay in providing services when such failure or delay is caused by conditions beyond its control, including but not limited to flight conditions, labor disturbance and strike, rebellion, riot, civil commotion, war or uprising, nuclear accidents, natural disasters, acts of God or where rendering service is prohibited by local law or regulations.

The assistance provider's staff will do their best to refer you to the appropriate providers. However, the assistance provider and CSA cannot be held responsible for the quality or results of any services provided by these independent practitioners.

#### **Availability of Services**

You are eligible for informational and concierge services at any time after you purchase this plan.

The Emergency Assistance Services become available when you actually start your trip.

Emergency Assistance, Concierge and Informational Services end the earliest of: midnight on the day the program expires; when you reach your return destination; or when you complete your trip.

The Identity Theft Resolution Services become available on your scheduled departure date for your trip. Services end 180 days (six months) from the date of your scheduled departure date for your trip.

2

Identity Theft Resolution does not guarantee that its intervention on behalf of you will result in a particular outcome or that its efforts on behalf of you will lead to a result satisfactory to you.

Identity Theft Resolution does not include, and Identity Theft Resolution shall not assist you for thefts involving non-US bank accounts.

#### **Informational Services**

The assistance provider offers a wide range of informational services before you leave home and during your trip, including: Visa, Passport, Inoculation and Immunization Requirements, Cultural Information, Temperature, Weather Conditions, Embassy and Consulate Referrals, Foreign Exchange Rates, and Travel Advisories.

# **Emergency Assistance Services**

#### **Medical Referral**

If an emergency occurs during a trip that requires you to visit a doctor, you should call the Emergency Hotline to obtain the names of local qualified doctors who speak your language. If additional medical services are required, the assistance provider is prepared to consult with the attending physician and provide such assistance, as they believe to be in your best interest.

#### **Traveling Companion Assistance**

If a Traveling Companion loses previously-made travel arrangements due to your medical emergency, the assistance provider will arrange for your Traveling Companion's return home.

#### **Emergency Cash Transfer**

If your cash or traveler's checks are lost or stolen, or unanticipated emergency expenses are incurred, the assistance provider will help arrange for an emergency cash transfer in currency, traveler's checks, or other forms as deemed acceptable by the assistance provider. The assistance provider will advance up to \$500 after satisfactory guarantee of reimbursement from you.

#### Legal Referral

The assistance provider will locate attorneys available during regular working hours. Assistance will also be provided to advance bail bond, where permitted by law. You are responsible for contracted legal fees.

#### **Locating Lost or Stolen Items**

The assistance provider will assist in locating and replacing lost or stolen luggage, documents and personal possessions.

#### **Replacement of Medication and Eyeglasses**

The assistance provider will arrange to fill a prescription that has been lost, stolen or requires a refill, subject to local law, whenever possible. The assistance provider will also arrange for shipment of replacement eyeglasses. Costs for shipping of medication or eyeglasses, or a prescription refill, etc. are your responsibility. The refill may require a visit to a local physician. You should be prepared to furnish the assistance provider with a copy of your original prescription and/or the name and phone number of your regular attending physician.

#### **Embassy and Consular Services**

The assistance provider will provide referrals to travelers needing the assistance of U.S. embassies and consulates.

#### **Worldwide Medical Information**

The assistance provider can provide necessary inoculation and vaccination information, and detailed general health and medical descriptions of destinations around the world.

#### Interpretation/Translation

The assistance provider will assist with telephone interpretation in all major languages or will refer you to an interpretation or translation service for written documents.

#### **Emergency Message Relay**

Emergency messages can be relayed to and from friends, relatives, personal physicians and employers.

#### Pet Return

The assistance provider will arrange for the return of your pet to your home if your pet is traveling with you and you are unable to take care of your pet due to a medical emergency.

#### **Vehicle Return**

The assistance provider will make arrangements to have a designated person or provider return your vehicle to your home (or your rental vehicle to the closest rental agency) if you experience a medical emergency or mechanical problems, which prevent you from driving the vehicle.

# On Demand Medical Care

#### **Consult A Doctor**

Consult A Doctor offers 24/7 access to its proprietary nationwide cross-coverage network of U.S. licensed physicians for telephone and secure e-mail medical consultations. Physicians provide specific answers to medical questions and advice regarding non-emergency, routine medical conditions. Physicians discuss symptoms, recommend treatment options, diagnose many common conditions, and prescribe medication when appropriate.

#### No Out-of-Pocket Medical Expense

If you develop an acute illness while on your trip that requires treatment by a physician, you should first call the Emergency Hotline to obtain the name of a local qualified physician in the assistance provider's network. If an in-network physician is available, the assistance provider will schedule the medical visit and guarantee payment to the physician for a medical visit not to exceed \$1000. This service is only available provided there is coverage for the acute illness under the Accident and Medical Expense coverage and is subject to all restrictions, limitations and exclusions provided in the policy. This service is not applicable to expenses for emergency dental treatment.

# **Concierge Services**

**City profiles:** provide travelers access to information on over 10,000 destinations worldwide, including a complete report on local entertainment, social customs, and health advisories.

**Epicurean needs:** arranges the delivery of specialized foods and beverages to your home or office, including gourmet meats and fine wine.

**Event ticketing:** provides tickets to virtually any sporting, theater or concert event worldwide.

**Flowers and gift baskets:** include the purchase and shipment of flowers and gift baskets to friends, family members, and business associates.

**Golf outings and tee times:** provide referrals and tee times at golf courses around the world.

**Hotel accommodations:** offers research and recommendations on hotels worldwide and book reservations if requested by you.

**Meet-and-greet services:** include the pick-ups of friends; family members or business associates at airports or other common carrier destinations by limousine personnel.

**Personalized retail shopping assistance:** includes purchasing selected retail items at your request.

**Pre-trip assistance:** provides information on travel destinations, city profiles, weather, special events, ATM locations, currency exchange rates, immunization and passport requirements, and related services.

**Procurement of hard-to-find items:** ensures our associates will use every means possible to obtain an obscure or exotic item at your request.

**Restaurant reviews and reservations:** provides you with information on restaurants worldwide and the ability to book reservations from anywhere, anytime.

**Rental car reservations:** provide worldwide reservations through most major rental car agencies.

**Airline reservations:** provide full-service air travel accommodations to destinations worldwide.

**Pet Services Locator:** helps travelers find pet-related services such as veterinarians and pet sitters.

# Description of Identity Theft Resolution Services

(PROVIDED BY CSA'S DESIGNATED PROVIDER)

If you believe you are victim of Identity Theft, please contact our assistance provider at (877) 243-4135. A description of the service and terms of use are provided below. The assistance provider treats each "Identify Theft" as an emergency and, subject to the limitations set forth in this Program Description, performs, for you any or all of the following steps necessary to attempt to undo or prevent further damage upon receipt, by you, of a duly completed and executed "Authorization Form".

- Obtain all pertinent credit information and history from you on the phone to determine if a fraud or theft has occurred.
- Educate you on how Identity Theft occurs and inform you of protective measures to take to avoid further occurrences.
- · Provide you with a helpful ID Theft Resolution Kit.
- Provide you with a uniform ID Theft Affidavit
  ("Affidavit"), answer any question with regard to
  completing the Affidavit and submit the Affidavit to the
  proper authorities, credit bureaus, and creditors.
- Obtain list of creditors to be contacted and contact them with separate itemized fraudulent account statements for each fraudulent occurrence.
- Report or assist you in reporting the fraudulent activity to the local authorities and forward a report of the said fraudulent activity to your creditors.
- Notify all three major credit-reporting agencies to obtain a free credit report for you and place an alert on your records with the agencies, and obtain a list of additional creditors from you.
- If the Identity Theft Affidavit proves that you are a victim of Identity Theft, the assistance provider shall provide access via postal mail to credit monitoring to you for one year.
- Place a "security freeze" on your credit records, in states where such law was passed.
- Submit "Authorization Form" and Affidavit to your creditors requesting cancellation of your card(s) and an issuance of a new one(s).
- If other forms of identification were stolen or missing, such as an ATM card, Driver's License, Social Security Card, Passport and so forth, notify or assist you in notifying the appropriate bank or agency of the situation so that you may take appropriate action and reissue a new form of identification.
- Provide you with assistance in filing or submitting paperwork for special ID Theft Protective measures, specific to your state of residence.
- On a weekly basis, until file is closed, contact you with an updated status report.
- When needed, follow up with creditors to ensure that the matter has been properly handled.

# **Insurance Coverage**

(Underwritten by Stonebridge Casualty Insurance Company)

Coverage is provided to you. This plan is available to U.S. residents. It is also available to non-U.S. residents for travel to the U.S. (if the plan is purchased through a U.S. travel supplier). There is no coverage unless payment has been made for this plan. There is no coverage unless your loss was caused by unforeseeable covered events that may occur while coverage is in effect.

# Ten Day Free Look

If you are not satisfied for any reason, you may cancel your coverage within 10 days of your application date or receipt of this document, whichever is later. A letter indicating your desire to cancel should be sent to us or our authorized agent. If there has been no incurred covered expense and you haven't already left on your Trip, you will receive a full refund of your plan cost. After this 10-day free look period, the payment for this plan is non-refundable.

# **Effective Dates of Insurance**

# Trip Cancellation and Trip Interruption Effective Dates of Coverage

Trip Cancellation coverage will take effect at 12:01 A.M. Standard Time on the day after the date your premium is received by us or our authorized agent. Trip Interruption coverage will take effect on the Scheduled Departure Date of the Trip.

Coverage for Missed Cruise Connection, Travel Delay, Baggage and Personal Effects, Baggage Delay, Rental Car Damage, Medical or Dental Expense, Accidental Death and Dismemberment, Air Flight Accident, and Emergency Assistance will take effect on the later of:

- the date the premium has been received by us or our authorized agent; or
- 2. the date and time you start your Covered Trip; or
- 12:01 A.M. Standard Time on the Scheduled Departure Date of your Trip.

#### All coverages automatically end on the earlier of:

- 1. the date the Covered Trip is completed; or
- 2. the Scheduled Return Date of the Trip; or
- your arrival at the return destination on a roundtrip, or the destination on a one-way trip; or
- cancellation of the Covered Trip.

All coverages under the plan will be extended if your entire Covered Trip is covered by the plan and your return is delayed by unavoidable circumstances beyond your control.

If coverage is extended for the above reasons, coverage will end on the earlier of the date you reach your originally scheduled return destination or seven (7) days after the scheduled Return Date.

# **Coverages and Benefits**

This plan covers you for certain unforeseeable events that occur while your coverage is in effect. They include:

# **Optional Cancel For Any Reason Benefit**

If you purchased the Optional Cancel for Any Reason Benefit and cancel your Covered Trip for any reason not otherwise covered by this plan, we will reimburse you for the percentage of the prepaid, forfeited, non-refundable Payments or Deposits you paid for your Trip provided:

- your payment for this plan is received within 24 hours of the date your initial deposit for your Covered Trip is received; and
- you are not disabled from travel at the time you pay your premium; and
- you insure 100% of all prepaid Covered Trip costs that are subject to cancellation penalties or restrictions;
- 4. the Covered Trip cost per person is no more than \$10,000; and
- 5. you cancel your Covered Trip 48 hours or more before your scheduled Covered Trip departure date.

Cancel for Any Reason is subject to the following payment percentage relative to the applicable cancellation penalty:

#### **Cancellation Penalty Schedule**

If Cancellation Penalty Amount Is:	Percentage of Penalty Amount Payable Is:
Up to 25% of trip cost	100% of penalty amount
26% to 50% of trip cost	90% of penalty amount
51% to 75% of trip cost	80% of penalty amount
Over 76% of trip cost	70% of penalty amount

# **Pre-Departure Trip Cancellation Benefits**

If you are prevented from taking your Trip for one of the covered reasons below, we will reimburse you, up to the amount in the Schedule, for the amount of prepaid, forfeited, non-refundable payments or deposits that you paid for your Trip.

We will also pay, up to the amount in the schedule, for your additional cost as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion's Covered Trip is canceled due to a covered reason below and your Covered Trip is not canceled.

# **Post-Departure Trip Interruption Benefits**

If you are delayed beyond the Scheduled Departure Date or are unable to continue your Trip for one of the covered reasons below, we will reimburse you, up to the amount in the schedule, less any refund paid or payable, for unused land or water travel arrangements, plus one of the following additional transportation expenses:

- from the point you interrupted your Trip to the next scheduled destination where you can catch up to your Trip or to the final destination of your Trip;
- expenses incurred by you to reach the next scheduled destination where you can catch up to your Trip if you leave after the Scheduled Departure Date of your Trip.

However, the benefit payable under 1 and 2 above will not exceed the cost of a one-way economy air fare (or first class, if the original tickets were first class) by the most direct route less any refunds paid or payable for your unused original tickets.

We will also pay, up to the amount shown in the schedule, for your additional cost as a result of a change in the per-person occupancy rate for prepaid ravel arrangements if a Traveling Companion's Covered Trip is interrupted due to a covered reason below and your Covered Trip is continued.

#### **Reasons for Cancellation and Interruption:**

#### The following reasons apply to you, a Family Member, or a Traveling Companion and must occur while coverage is in effect:

- Trip Cancellation or delayed arrival at your destination due to Sickness, Injury or death of you, your Family Member or Traveling Companion that occurs before departure on your Trip. The Sickness or Injury must commence while coverage is in effect, require the examination by a Physician, in person, at the time of Trip Cancellation or delay and, in the written opinion of the treating Physician, be so disabling as to prevent you from taking your Trip or delay your arrival on your Trip;
- Trip Interruption due to Sickness, Injury or death of you, your Family Member or Traveling Companion. The Sickness or Injury must commence while you are on your Covered Trip, require the examination by a Physician, in person, at the time of Trip Interruption and, in the written opinion of the treating Physician, be so disabling as to prevent you from continuing your Trip.

# The following reasons apply to you or a Traveling Companion and must occur while coverage is in effect:

- Common Carrier delays resulting from inclement weather, or mechanical breakdown of the aircraft, ship or boat or motor coach on which you are scheduled to travel, or organized labor strikes that affect public transportation;
- arrangements canceled by an airline, cruise line, motor coach company, or tour operator, resulting from inclement weather, mechanical breakdown of the aircraft, ship or boat or motor coach on which the Insured is scheduled to travel, or organized labor strikes that affect public transportation;

 arrangements canceled by a tour operator, cruise line, airline, rental car company, hotel, condominium, railroad, motor coach company, or other supplier of travel services, resulting from Financial Insolvency (provided your plan payment is received prior to/or within 24 hours of final payment for your covered trip).

# The following reasons apply to you, a Family Member traveling with you, or a Traveling Companion and must occur while coverage is in effect:

- 6. mandatory evacuation or public official evacuation advisements where there is no mandatory evacuation issued by local government authorities at your destination due to adverse weather or natural disaster. In order to cancel or interrupt your Covered Trip, you must have 4 days or 50% of your total Covered Trip length or less remaining on your Covered Trip at the time the mandatory evacuation ends;
- being directly involved in a documented traffic accident while en route to departure;
- being called into active military service in the event of a natural disaster:
- being hijacked, quarantined, required to serve on a jury, or required by a court order to appear as a witness in a legal action, provided you, a Family Member traveling with you or a Traveling Companion is not 1) A party to the legal action, or 2) Appearing as a law enforcement officer:
- 10. your primary residence is made Uninhabitable by fire, flood, volcano, earthquake or natural disaster.
- your Accommodation at your destination made Uninhabitable by fire, flood, volcano, earthquake or other natural disaster:
- 12. a documented theft of passports or visas;
- 13. a transfer of employment of 250 miles or more:
- 14. a Terrorist Act, which occurs in your departure city or in a city that is a scheduled destination for your Trip, provided the Terrorist Act occurs within 7 days of the Scheduled Departure Date of your Trip;
- 15. your involuntary termination of employment or layoff that occurs more than 15 days after your effective date and was not under your control. You must have been continuously employed with the same employer for 1 year prior to the termination or layoff. This provision is not applicable to temporary employment, independent contractors or self-employed persons:
- 16. your or your Traveling Companion's or traveling Family Member's approved, written military leave involuntarily revoked as a result of being temporarily or permanently reassigned, being called to active military reserve or an extension of deployment beyond a defined tour of duty within 30 days of your departure date. All leave must be approved prior to the Policy effective date. Full or partial mobilization or mass reassignment of Armed Forces, invocation of the War Powers Act, base or unit mobilization is not covered;

- 17. the primary or secondary school where you or your traveling Family Member or Traveling Companion attend(s) must extend its operating session beyond its predefined school year, due to unforeseeable events commencing during the policy effective period, which cause the extension of the predefined school year and the travel dates for the Covered Trip fall within the period of the school year extension. Extensions due to extra-curricular or athletic events are not covered;
- 18. interruption of water, electric, sewage or gas service(s) at your destination or interruption of road service, due to adverse weather or natural disaster so as to prohibit you from reaching your destination, for more than 24 hours and only for up to 15 days from interruption of service(s) or to resumption of service(s), whichever comes first;
- 19. your host at your destination is hospitalized or dies.

# **Travel Delay Coverage and Benefits**

If your Trip is delayed for 6 hours or more, we will reimburse you, up to the amount shown in the Schedule, for reasonable additional expenses incurred by you for lodging arrangements, meals, telephone calls and local transportation while you are delayed. We will not pay benefits for expenses incurred after travel becomes possible.

#### Travel Delay must be caused by or result from:

- a. Common Carrier delay; or
- loss or theft of your passport(s), travel documents or money; or
- c. quarantine; or
- d. hijacking; or
- e. natural disaster or adverse weather; or
- f. a documented traffic accident while you are en route to departure; or
- g. unannounced strike: or
- h. a civil disorder: or
- your, a Family Member traveling with you or a Traveling Companion's Injury or Sickness; or
- j. a Family Member traveling with you or a Traveling Companion's death.

#### **Missed Cruise Connection Benefits**

The Insurer will pay up to the amount in the schedule should you miss your cruise or tour departure as the result of the cancellation or delay of 3 or more hours of your regularly scheduled airline flights due to inclement weather. For this benefit, Covered Expenses means additional transportation expenses incurred to join the departed cruise or tour, reasonable additional accommodation and meal expenses incurred en route to catch up to the cruise or tour, and non-refundable payments for the unused portion of your cruise or tour. This coverage is available if no other coverage is provided by a Common Carrier or another party at no cost to you or as covered elsewhere in this policy.

# **Baggage and Personal Effects Benefits**

We will reimburse you up to the amount shown in the Schedule, for direct loss, theft, damage or destruction of your Baggage, passports or visas during your Covered Trip. We will also pay for loss due to unauthorized use of your credit cards, if you have complied with all of the credit card conditions imposed by the credit card companies.

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

Payment of loss under the Baggage and Personal Effects Benefit will be calculated based upon an Actual Cash Value basis. For items without receipts, payment of loss will be calculated based upon 75% of the Actual Cash Value at the time of loss. At our option, we may elect to repair or replace your Baggage. We will notify you within 30 days after we receive your Proof of Loss.

We may take all or part of damaged Baggage as a condition for payment of loss. In the event of a loss to a pair or set of items, we will: 1) repair or replace any part to restore the pair or set to its value before the loss; or 2) pay the difference between the value of the property before and after the loss.

### **Continuation of Coverage**

If the covered Baggage, passports or visas are in the custody of a Common Carrier, and delivery is delayed, this coverage will continue until the property is delivered to you. This continuation of coverage does not include loss caused by or resulting from the delay.

#### **Items Not Covered**

We will not pay for damage to or loss of:

- 1. animals; or
- property used in trade, business or for the production of income, household furniture, musical instruments, brittle or fragile articles, or sporting equipment if the loss results from the use thereof; or
- boats, motors, motorcycles, motor vehicles, aircraft, and other conveyances or equipment, or parts for such conveyances; or
- artificial limbs or other prosthetic devices, artificial teeth, dental bridges, dentures, dental braces, retainers or other orthodontic devices, hearing aids, any type of eyeglasses, sunglasses or contact lenses; or
- documents or tickets, except for administrative fees required to reissue tickets; or
- money, stamps, stocks and bonds, postal or money orders, securities, accounts, bills, deeds, food stamps or credit cards, except as noted above; or
- 7. property shipped as freight or shipped prior to the Scheduled Departure Date; or
- 8. contraband.

#### **Losses Not Covered**

We will not pay for loss arising from:

- 1. defective materials or craftsmanship; or
- normal wear and tear, gradual deterioration, inherent vice;
- 3. rodents, animals, insects or vermin; or
- 4. mysterious disappearance; or

 electrical current, including electric arcing that damages or destroys electrical devices or appliances.

#### Your Duties in the Event of a Loss

In case of loss, theft or damage to Baggage and Personal Effects, you should: 1) immediately report the incident to the hotel manager, tour guide or representative, transportation official, local police or other local authorities and obtain their written report of your loss; and 2) take reasonable steps to protect your Baggage from further damage, and make necessary, reasonable and temporary repairs. We will reimburse you for these expenses. We will not pay for further damage if you fail to protect your Baggage.

# **Baggage Delay Benefit**

We will reimburse you, up to the amount shown in the Schedule for the cost of reasonable additional clothing and personal articles purchased by you, if your Baggage is delayed for 24 hours or more during your Covered Trip. We will also reimburse you up to \$25 for expenses incurred during your Covered Trip to expedite the return of your delayed baggage. This coverage terminates upon your arrival at the return destination of your Covered Trip.

#### Travel Accident (AD&D)

We will pay this benefit, up to the amount on the Schedule, if you are injured in an Accident, which occurs while you are on a Covered Trip, and covered under the plan, and you suffer one of the losses listed below within 180 days of the Accident. The principal sum is the benefit amount shown on the Schedule.

# Air Flight Accident (AD&D - Flight Only)

We will pay this benefit, up to the amount on the Schedule, if you are injured in an Accident, which occurs while you are on a Covered Trip, and covered under the plan, and you suffer one of the losses listed below within 180 days of the Accident. The principal sum is the benefit amount shown on the Schedule.

#### Air Flight Benefits

The benefits provided by the plan for Air Flight applies only if you sustain a covered loss in an Accident which occurs while a passenger in or on, boarding or alighting from an aircraft of a regularly scheduled airline or an air charter company that is licensed to carry passengers for hire.

Loss:	Percentage of Principal Sum Payable:
Life	100%
Both Hands; Both Fe	eet and Sight of Both Eyes 100%
One Hand and One	Foot
One Hand and Sight	of One Eye
One Foot and Sight	of One Eye
One Hand; One Foot	t or Sight of One Eye50%

If you suffer more than one loss from one Accident, we will pay only for the loss with the larger benefit. Loss of a hand or foot means complete severance at or above the wrist or ankle joint. Loss of sight of an eye means complete and irrecoverable loss of sight.

### **Exposure and Disappearance**

If by reason of an Accident covered by the plan, you are unavoidably exposed to the elements and as a result of such exposure suffer a loss for which benefits are otherwise payable; such loss shall be covered hereunder.

If you are involved in an Accident which results in the sinking or wrecking of a conveyance in which you were riding and your body is not located within one year of such Accident, it will be presumed that you suffered loss of life resulting from Injury caused by the Accident.

### **Medical or Dental Expense Benefits**

We will pay this benefit, up to the amount on the Schedule, for the following Covered Expenses incurred by you, subject to the following: 1) Covered Expenses will only be payable at the Usual and Customary level of payment; 2) benefits will be payable only for Covered Expenses resulting from a Sickness that first manifests itself or an Injury that occurs while on a Covered Trip; 3) benefits payable as a result of incurred Covered Expenses will only be paid after benefits have been paid under any Other Valid and Collectible Group Insurance in effect for you. We will pay that portion of Covered Expenses, which exceeds the amount of benefits payable for such expenses under your Other Valid and Collectible Group Insurance.

Please refer to the Definitions, for an explanation of Pre-Existing Conditions, which are excluded under the Medical or Dental Expense Benefits.

#### **Covered Expenses:**

- expenses for the following Physician-ordered medical services: services of legally qualified Physicians and graduate nurses, charges for Hospital confinement and services, local ambulance services, prescription drugs and medicines, and therapeutic services, incurred by you within one year from the date of your Sickness or Injury during a Covered Trip:
- expenses for emergency dental treatment incurred by you during a Covered Trip.

Your duties in the event of a Medical or Dental Expense:

- You must provide us with all bills and reports for medical and/or dental expenses claimed.
- You must provide any requested information, including but not limited to, an explanation of benefits from any other applicable insurance.
- 3. You must sign a patient authorization to release any information required by us, to investigate your claim.

# **Emergency Assistance Benefits**

We will pay this benefit, up to the amount on the Schedule, for the following Covered Expenses incurred by you, subject to the following: 1) Covered Expenses will only be payable at the Usual and Customary level of payment; 2) benefits will be payable only for Covered Expenses resulting from a Sickness that first manifests itself or an Injury that occurs while on a Covered Trip; 3) benefits payable as a result of incurred Covered Expenses will only be paid after benefits have been paid under any Other Valid and Collectible Group Insurance in effect for you. We will pay that portion of Covered Expenses, which exceeds the amount of benefits payable for such expenses under your Other Valid and Collectible Group Insurance.

Please refer to the Definitions, for an explanation of Pre-Existing Conditions, which are excluded under the Emergency Assistance Benefits.

#### **Covered Expenses:**

- expenses incurred by you for Physician-ordered emergency medical evacuation, including medically appropriate transportation and necessary medical care en route, to the nearest suitable Hospital, when you are critically ill or injured and no suitable local care is available, subject to the Program Medical Advisor's prior approval;
- expenses incurred for non-emergency medical evacuation, including medically appropriate transportation and medical care en route, to a Hospital or to your place of residence in the United States of America, when deemed medically necessary by the attending physician, subject to the Program Medical Advisor's prior approval:
- expenses for transportation not to exceed the cost of one round-trip economy-class air fare, to the place of hospitalization for one person chosen by you, provided that you are traveling alone and are hospitalized for more than 7 days;
- 4. expenses for transportation, not to exceed the cost of one-way economy-class air fare, to your place of residence in the United States of America, including escort expenses, if you are 18 years of age or younger and left unattended due to the death or hospitalization of an accompanying adult(s), subject to the Program Medical Advisor's prior approval;
- 5. expenses for one-way economy-class air fare (or first class, if your original tickets were first class) to your place of residence in the United States of America, from a medical facility to which you were previously evacuated, less any refunds paid or payable from your unused transportation tickets, if these expenses are not covered elsewhere in the plan;
- 6. repatriation expenses for preparation and air transportation of your remains to your place of residence in the United States of America, or up to an equivalent amount for a local burial in the country where death occurred, if you die while outside the United States of America.

#### **Rental Car Damage Benefit**

If you rent a car while on your Covered Trip and the car is damaged due to collision, theft, vandalism, windstorm, fire, hail, flood or any cause not in your control while in your possession, or the car is stolen while in your possession and not recovered, we will pay you the lesser of: a) the cost of repairs and rental charges imposed by the rental company while the car is being repaired; or b) the Actual Cash Value of the car, up to the amount shown on the Schedule.

Coverage is provided to you and your Traveling Companion or Family Member traveling with you, provided you and your Traveling Companion or Family Member traveling with you is a licensed driver, and are listed on the rental agreement. This coverage is primary to other forms of insurance or indemnity.

#### Coverage is not provided for loss due to:

- Any obligation of you or a Traveling Companion or a Family Member traveling with you assume under any agreement (except insurance collision deductible).
- Rentals of trucks, campers, trailers, off-road, or motor bikes, motorcycles, recreational vehicles or Exotic Vehicles.
- Any loss which occurs if you or a Traveling Companion or a Family Member traveling with you are in violation of the rental agreement.
- Failure to report the loss to the proper local authorities and the rental car company.
- Damage to any other vehicle, structure or person as a result of a covered loss.

#### Your Duties in the Event of a Loss:

#### You must:

- Take all reasonable, necessary steps to protect the vehicle and prevent further damage to it;
- Report the loss to the appropriate local authorities and the rental company as soon as possible;
- Obtain all information on any other party involved in an accident, such as name, address, insurance information and driver's license number
- 4. Provide us all documentation such as rental agreement, police report and damage estimate.

# **General Plan Exclusions**

# The following exclusion applies to Accidental Death and Dismemberment and Air Flight Accident coverages:

We will not pay for a loss caused by or resulting from Sickness of any kind.

# The following exclusion applies to all coverages except Baggage Delay, Baggage and Personal Effects, and Rental Car Damage:

We will not pay for loss or expense caused by or incurred resulting from a Pre-Existing Condition, including death that results therefrom. This Exclusion does not apply to benefits under Covered Expenses item 1, 2 or 6 of the Emergency Assistance Benefits coverage.

#### The following exclusions apply to all coverages:

We will not pay for any loss under the plan caused by, or resulting from:

- your, your Traveling Companion's, or Family Member's suicide, attempted suicide, or intentionally self-inflicted injury, booked to travel with you, while sane or insane (while sane in CO & MO);
- 2. mental, nervous, or psychological disorders;
- being under the influence of drugs or intoxicants, unless prescribed by a Physician (does not apply to WA or SD residents):
- normal pregnancy or resulting childbirth or elective abortion;
- 5. participation as a professional in athletics;
- participation in organized amateur and interscholastic athletic or sports competition or events;
- riding or driving in any motor competition (does not apply to WA residents);
- 8. declared or undeclared war, or any act of war;
- 9. civil disorder (does not apply to Travel Delay);
- service in the armed forces of any country (does not apply to #8 or #16 of Reasons for Cancellation and interruption);
- nuclear reaction, radiation or radioactive contamination (except for involuntary exposure for NC) (does not apply to WA or KS residents);
- operating or learning to operate any aircraft, as pilot or crew;
- mountain climbing, bungee cord jumping, skydiving, parachuting, hang gliding, parasailing or travel on any air supported device, other than on a regularly scheduled airline or air charter company (does not apply to WA residents);
- 14. any unlawful acts, committed by you, a Traveling Companion or Family Member traveling with you (whether insured or not);
- 15. any amount paid or payable under any Worker's Compensation, disability benefit or similar law;
- a loss or damage caused by detention, confiscation or destruction by customs;
- 17. Elective Treatment and Procedures;
- medical treatment during or arising from a Trip undertaken for the purpose or intent of securing medical treatment;
- 19. Financial Insolvency of the person, organization or firm from whom you directly purchased or paid for your Covered Trip, Financial Insolvency which occurred, or for which a petition for bankruptcy was filed by a travel supplier, before your effective date for the Trip Cancellation Benefits, or Financial Insolvency which occurs within 14 days (7 days for WA residents) following your effective date for the Trip Cancellation Benefits:
- business, contractual or educational obligations of you, a Family Member or a Traveling Companion (does not apply to #13, #15, or #17 of Reasons for Cancellation and interruption);

- failure of any tour operator, Common Carrier, or other travel supplier, person or agency to provide the bargained-for travel arrangements other than Financial Insolvency;
- a loss that results from an illness, disease, or other condition, event or circumstance which occurs at a time when the plan is not in effect for you.

# **Pre-Existing Condition Exclusion Waiver**

The Pre-Existing Condition exclusion will be waived provided you meet all of the following:

- the payment for this plan is received prior to/or within 24 hours of your final payment for your Covered Trip;
- you are not disabled from travel at the time you make your plan payment.

#### **Definitions**

In the Certificate, "you", "your" and "yours" refer to the Insured. "We", "us" and "our" refer to the company providing this coverage. In addition, certain words and phrases are defined as follows:

**ACCIDENT:** means a sudden, unexpected, unintended and external event, which causes Injury.

**ACCOMMODATION:** means any establishment used for the purpose of temporary, overnight lodging for which a fee is paid and reservations are required.

**ACTUAL CASH VALUE:** means purchase price less depreciation (for KS residents: current replacement cost for items of like kind and quality less depreciation).

**BAGGAGE:** means luggage, personal possessions and travel documents taken by you on the Covered Trip.

**COMMON CARRIER:** means any land, water or air conveyance operated under a license for the transportation of passengers for hire, not including taxicabs or rented, leased or privately owned motor vehicles.

**COVERED TRIP (or TRIP):** 1) A period of round-trip travel away from Home to a destination outside your city of residence; the purpose of the trip is business or pleasure and is not to obtain health care or treatment of any kind; the trip has defined departure and return dates specified when the Insured enrolls; the trip does not exceed 365 days; or 2) A period of one-way travel that starts in the U.S. (except U.S. citizens may begin their trip outside the U.S., if returning to the U.S.); the purpose of the trip is business or pleasure and is not to obtain health care or treatment of any kind; the trip has defined departure and arrival places specified when the Insured applies; and the trip does not exceed 31 days in length.

**DOMESTIC PARTNER:** means a person who is at least eighteen years of age and you can show: 1) evidence of financial interdependence, such as joint bank accounts or credit cards, jointly owned property, and mutual life insurance or pension beneficiary designations; 2) evidence of cohabitation for at least the previous 6 months; and 3)

18

an affidavit of domestic partnership if recognized by the jurisdiction within which they reside.

**ELECTIVE TREATMENT AND PROCEDURES:** means any medical treatment or surgical procedure that is not medically necessary including any service, treatment, or supplies that are deemed by the federal, or a state or local government authority, or by us to be research or experimental or that is not recognized as a generally accepted medical practice.

**EXOTIC VEHICLE:** includes Alfa Romeo, Aston Martin, Auburn, Avanti, Bentley, Bertone, BMC/Leyland, BMW M Series, Bradley, Bricklin, Cosworth, Citroen, Clenet, De Lorean, Excalibre, Ferrari, Fiat, Iso, Jaguar, Jensen Healy, Lamborghini, Lancia, Lotus, Maserati, Morgan, Pantera, Panther, Pininfarina, Rolls Royce, Rover, Stutz, Sterling, Triumph, TVR, Yugo, Corvette, Mercedes Benz, Porsche, and MG. You must contact CSA Travel Protection at (800) 348-9505 before renting to obtain confirmation that the vehicle is covered.

**FAMILY MEMBER:** includes your or your Traveling Companion's dependent, spouse, child, spouse's child, son/daughter-in-law, parent(s), sibling(s), grandparent(s), grandchild, step-brother/sister, step-parent(s), parent(s)-in-law, brother/sister-in-law, aunt, uncle, niece, nephew, guardian, Domestic Partner, foster child, or ward.

FINANCIAL INSOLVENCY: means the total cessation or complete suspension of operations due to insolvency, with or without the filing of a bankruptcy petition, whether voluntary or involuntary, by a tour operator, cruise line, airline, rental car company, hotel, condominium, railroad, motor coach company, or other supplier of travel services which is duly licensed in the state(s) of operation other than the entity or the person, organization, agency or firm from whom you directly purchased or paid for your Covered Trip provided the Financial Insolvency occurs more than 14 days (7 days for WA Residents) following your effective date for the Trip Cancellation Benefits. There is no coverage for the total cessation or complete suspension of operations for losses caused by fraud or negligent misrepresentation by the supplier of travel services.

**HOME:** means your primary or secondary residence.

**HOSPITAL:** means an institution which meets all of the following requirements:

- 1. it must be operated according to law;
- 2. it must give 24-hour medical care, diagnosis and treatment to the sick or injured on an inpatient basis;
- 3. it must provide diagnostic and surgical facilities supervised by Physicians;
- 4. registered nurses must be on 24-hour call or duty; and
- the care must be given either on the hospital's premise or in facilities available to the hospital on a prearranged basis.

A Hospital is not: a rest, convalescent, extended care, rehabilitation or other nursing facility; a facility which primarily treats mental illness, alcoholism, or drug addiction (or any ward, wing or other section of the hospital used for such purposes); or a facility which provides hospice care (or wing, ward or other section of the hospital used for such purposes).

**INJURY:** means bodily harm caused by an Accident which: 1) occurs while your coverage is in effect under the plan; and 2) requires examination and treatment by a Physician. The injury must be the direct cause of loss and must be independent of all other causes and must not be caused by, or result from, Sickness.

**INSURED:** means an eligible person who arranges a Covered Trip, and pays any required plan payment.

**INSURER:** means Stonebridge Casualty Insurance Company.

#### OTHER VALID AND COLLECTIBLE GROUP INSURANCE:

means any group policy or contract which provides for payment of medical expenses incurred because of Physician, nurse, dental or Hospital care or treatment; or the performance of surgery or administration of anesthesia. The policy or contract providing such benefits includes group or blanket insurance policies; service plan contracts; employee benefit plans; or any plan arranged through an employer, labor union, employee benefit association or trustee; or any group plan created or administered by the federal or a state or local government or its agencies. In the event any other group plan provides for benefits in the form of services in lieu of monetary payment, the usual and customary value of each service rendered will be considered a Covered Expense.

**PHYSICIAN:** means a person licensed as a medical doctor by the jurisdiction in which he/she is resident to practice the healing arts. He/she must be practicing within the scope of your license for the service or treatment given and may not be you, a Traveling Companion, or a Family Member.

**PRE-EXISTING CONDITION:** means an illness, disease, or other condition during the 180-day period immediately prior to your effective date for which you or your Traveling Companion or Family Member who is scheduled or booked to travel with you: 1) received, or received a recommendation for, a diagnostic test, examination or medical treatment; or 2) took or received prescription drugs or medicine.

Item 2 of this definition does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 180-day period before coverage is in effect under the Policy.

**SCHEDULED DEPARTURE DATE:** means the date on which you are originally scheduled to leave on your Covered Trip.

**SCHEDULED RETURN DATE:** means the date on which you are originally scheduled to return to the point where the Covered Trip started or to a different final destination.

**SCHEDULED TRIP DEPARTURE CITY:** means the city where the scheduled trip on which you are to participate originates.

**SICKNESS:** means an illness or disease of the body, which requires examination and treatment by a Physician.

**TERRORIST ACT** means an act of violence, other than civil disorder or riot, (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government.

20

**TRAVELING COMPANION:** means a person whose name(s) appear(s) with you on the same Covered Trip arrangement and who, during the Covered Trip, will accompany you.

**UNINHABITABLE:** means the dwelling is not suitable for human occupancy in accordance with local public safety guidelines.

**USUAL AND CUSTOMARY CHARGE:** means those charges for necessary treatment and services that are reasonable for the treatment of cases of comparable severity and nature. This will be derived from the mean charge based on the experience in a related area of the service delivered and the MDR (Medical Data Research) schedule of fees valued at the 100th percentile and the Anesthesia Relative Value Guide.

#### Where to Present a Claim

All claims should be presented to the Program Administrator:

**CSA Travel Protection** 

P.O. Box 939057 San Diego, CA 92193-9057 (800) 541-3522 (Toll-Free)

# Claims and General Provisions

The following provisions are a sample of the provisions in your Individual Policy or Group Certificate and are described on a general basis only. To view your state-filed form for your specific benefits, please call (800) 348-9505 to obtain your Individual Policy in the following states: IL, IN, KS, LA, OR, OH, VT, WA, and WY or your Group Certificate for all other states. Your Individual Policy or Group Certificate will govern the final interpretation of any provision or claim.

# **General Provisions**

**Concealment or Fraud** We do not provide coverage if you have intentionally concealed or misrepresented any material fact or circumstance relating to the coverage plan.

**Conformity to Law** Any provision of the plan that is in conflict with the laws of the state in which it is issued is amended to conform with the laws of that state.

**Duplication of Coverage** You may only purchase one certificate from us for each Covered Trip. If you do purchase more than one certificate for a specific Covered Trip, the Maximum Limit of Coverage payable will be as specified in the certificate with the highest level of benefits. We will refund plan payments received from you under any other certificate.

**Entire Contract; Changes** The plan may be changed at any time by written agreement between us. Only our President, Vice President or Secretary may change or waive the provisions of the plan. No agent or other person may change the plan or waive any of its terms. The change will be endorsed on the plan.

**Examination Under Oath** As often as we may reasonably require, you or any person making a claim under the plan must submit to examination under oath.

Maximum Limit of Coverage The maximum benefit amount for each claim is listed in the Schedule, subject to the individual benefit amount and the company's Maximum Limit of Liability. The total limit of our liability for any one covered event, in which two or more persons submit a claim, is subject to the individual benefit amount and the company's Maximum Limit of Liability. In the event of multiple claims by you for one event, the available funds will be distributed in order of notice of claim by each Insured subject to the above limitations.

Maximum Limit of Liability All limits are applied per Covered Trip. We will pay no more than \$1,000,000 per occurrence to or on account of any person insured under the policy. Our Maximum Limit of Liability for all claims resulting from the same occurrence will be \$10,000,000 collectively under the TAHC series of policies.

Our Right to Recover From Others We have the right to recover any payments we have made from anyone who may be responsible for the loss. You and anyone else we insure must sign any papers and do whatever is necessary to transfer this right to us. You and anyone else we insure will do nothing after the loss to affect our rights.

# **Claims Provisions**

**Notice of Claim** We must be given written notice of claim within 90 days after a covered loss occurs. If notice cannot be given within that time, it must be given as soon as reasonably possible. Notice may be given to us or to our authorized agent. Notice should include the claimant's name and enough information to identify him or her.

**Proof of Loss** Written Proof of Loss must be sent to us within 90 days after the date the loss occurs. We will not reduce or deny a claim if it was not reasonably possible to give us written Proof of Loss within the time allowed. In any event, you must give us written Proof of Loss within twelve (12) months after the date the loss occurs unless you are legally incapacitated.

**Physical Examination and Autopsy** At our expense, we have the right to have you examined as often as necessary while a claim is pending. At our expense, we may require an autopsy unless the law or your religion forbids it.

**Legal Actions** No legal action may be brought to recover on the plan within 60 days after written Proof of Loss has been given. No such action will be brought after three years from the time written Proof of Loss is required to be given. If a time limit of the plan is less than allowed by the laws of the state where you live, the limit is extended to meet the minimum time allowed by such law.

Payment of Claims Benefits for loss of life will be paid to your estate, or if no estate, to your beneficiary. All other benefits are paid directly to you, unless otherwise directed. Any accrued benefits unpaid at your death will be paid to your estate, or if no estate, to your beneficiary. If you have assigned your benefits, we will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment.

# Travel Insurance is Underwritten By

Stonebridge Casualty Insurance Company, a Transamerica company, Columbus, Ohio; NAIC # 10952 (all states except otherwise noted) under Policy/Certificate Form series TAHC5000. In CA, CT, HI, NE, NH, PA, TN and TX Policy/Certificate Form series TAHC5100 and TAHC5200. In IL, IN, KS, LA, OR, OH, VT, WA and WY Policy Form #'s TAHC5100IPS and TAHC5200IPS. Certain coverages are under series TAHC6000 and TAHC7000.

25701053