



SAFETRIP SCHOLASTIC

SafeTrip Scholastic provides you with international travel assistance services and travel medical insurance.

- Travel assistance coverage is provided by United Healthcare Global (UHCG).
- Travel Medical Insurance is provided by and underwritten by Catlin Insurance Company, Inc. XL Catlin is the global brand used by XL Group plc's insurance subsidiaries, including Catlin Insurance Company, Inc.

The emergency assistance services are detailed on the following pages. For full travel insurance details, please see the enclosed Certificate of Insurance.

Emergency Assistance Services provided by UnitedHealthcare Global

Medical Assistance Services
Travel Assistance Services
Destination Intelligence

HOW TO USE UNITEDHEALTHCARE GLOBAL SERVICES

24 hours a day, 7 days a week, 365 days a year

If you have a medical or travel problem, simply call UHCG for assistance. Our toll-free and collect-call telephone numbers are printed on your ID card. Either call the toll-free number of the country you are in, call *collect*, or email at:

Baltimore, Maryland +1-410-453-6330

Assistance@uhcglobal.com

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

This coverage is not subject to and does not provide benefits which comply with the U.S. "Affordable Care Act". Please consult your attorney or insurance producer to determine if you need coverage under the Affordable Care Act.

Payments arranged by UHCG:

Most Physicians and hospitals will provide you with the necessary medical treatment will either send their bill directly to UHCG Insurance Services, or in the case of small dollar amounts, may ask You to pay at time services are rendered. Ask the hospital or Physician to contact UHCG. UHCG will confirm Your protection plan coverage and arrange for prompt payments. You will be asked to pay for any deductible amount or items not covered by Your plan.

Payments made by You:

If You are required to pay for medical treatment, obtain a signed receipt and a signed statement by a Physician describing the problem and the treatment. Once any other insurer has processed Your claim, submit a copy of their final disposition along with a UHCG Insurance Services claim form and a copy of Your receipts to:

UnitedHealthcare Global Claim Administrator

P.O. Box 20874

Tampa, FL 33622

1-877-693-8530 / Fax: 1-800-560-6340

Email Address: Team1@cbpinsure.com

For claim forms or questions, call between 8:30 A.M. and 5:00 P.M. Monday through Friday Eastern Time.

WORLDWIDE EMERGENCY ASSISTANCE SERVICES

These non-insurance services are provided by UnitedHealthcare Global.

MEDICAL ASSISTANCE SERVICES

Worldwide Medical and Dental Referrals: Upon a your request, UHCG will provide referrals to pre-approved physicians, hospitals, dentists, and dental clinics in the area you are traveling in order to assist you in locating appropriate treatment and quality care.

Monitoring of Treatment: As and to the extent permissible, UHCG will continually monitor your medical condition. Physician Advisors will provide consultative and advisory services to UHCG in relation to your medical condition, including review and analysis of the quality of medical care received by you.

Facilitation of Hospital Payment: Upon securing payment or a guarantee to reimburse, UHCG will either wire or guarantee funds needed for admitting you into a hospital for medical treatment. You are responsible for the payment of the cost of medical care and treatment, including hospital expenses.

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

Medication and Vaccine Transfers: In the event a medication or vaccine is not available locally, or a prescription medication is lost or stolen, UHCG will coordinate the transfer of the medication or vaccine to you upon the prescribing physician's authorization, if it is legally permissible.

Updates to Family, Employer, and Home Physician: Upon your approval, UHCG will provide periodic case updates to appropriate individuals designated by you in order to keep them informed.

Hotel Arrangements: UHCG will assist you with the arrangement of hotel stays and room requirements before or after hospitalization or for ongoing care.

Replacement of Corrective Lenses and Medical Devices: UHCG will assist with the replacement of corrective lenses or medical devices if they are lost, stolen, or broken during travel.

TRAVEL ASSISTANCE SERVICES

Replacement of Lost or Stolen Travel Documents: UHCG will assist you in taking the necessary steps to replace passports, tickets, and other important travel documents.

Emergency Travel Arrangements: UHCG will make new reservations for airlines, hotels, and other travel services for you in the event of: (a) an Illness or Injury, (b) a Security Evacuation, and (c) during a Political Evacuation.

Transfer of Funds: UHCG will provide you with an emergency cash advance subject to UHCG first securing funds from you (via a credit card) or your family.

Legal Referrals: Should you require legal assistance, UHCG will direct you to a duly licensed attorney in or around the area where you are located.

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

Message Transmittals: You may send and receive emergency messages toll-free, 24-hours a day, through the UHCG Emergency Response Center.

WORLDWIDE DESTINATION INTELLIGENCE

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

**The Board of Regents of the University of Nebraska, et al
XL Catlin**



Evidence of Benefits

XL Catlin is the global brand used by XL Group plc’s insurance subsidiaries, including Catlin Insurance Company, Inc. Travel Medical Insurance is provided and underwritten by Catlin Insurance Company, Inc.

Eligibility:

Class 1: All registered, full-time Credit students and Non-Credit students traveling outside of the United States on school sponsored programs. Coverage is available for Dependents and Children.

Class 2: Registered faculty, staff, employees, eligible Dependents and Children traveling outside of the United States on school sponsored programs.

EFFECTIVE DATE OF INSURANCE

An Insured coverage will begin on the latest of the following dates:

1. the Policy Effective Date, provided that the policy premium has been paid;
2. the date he or she is eligible; or
3. the date of the scheduled Trip departure date; or
4. the date of his or her departure from the United States.

TERMINATION DATE OF INSURANCE

An Insured’s coverage will end on the earlier of the date:

1. the policy terminates;
2. the Insured is no longer eligible;
3. the period ends for which premium is paid;
4. the Insured fails to pay the required premium, if the Insured is so required;
5. the scheduled Trip return date;
6. the Insured returns to the United States.

A Dependent’s coverage will end on the earliest of the date:

1. he or she is no longer a Dependent;
2. the Insured’s coverage ends;
3. the date the Policy ends;
4. the period ends for which premium is paid;
5. the Insured returns to the United States;
6. the scheduled Trip return date.

SCHEDULE OF BENEFITS:

All Coverages and Benefits are in U.S. Dollar Amounts	
Out of Country Medical Maximums: Accident Medical; Sickness Medical	Per Injury or Sickness: \$500,000
Dental Treatment (Injury only)	\$500
Deductible:	\$0
Coinsurance	100% to Medical Maximum
Benefit Period	Period of Coverage
Repatriation of Remains	Up to \$75,000
Family Reunion	Up to \$5,000
Emergency Medical Evacuation	Up to \$500,000
Return of Minor Children	Up to \$10,000
Political Evacuation Natural Disaster	Up to \$200,000
Trip Delay	Up to \$500
Accidental Death & Dismemberment	Principal Sum: \$10,000
Aggregate Limit of Indemnity per Accident	\$500,000 Aggregate Limit
Assistance Services – UHC Global	24 hours – Worldwide

BENEFITS

ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS

XL Catlin will pay the Benefit Amount shown below, if Injury to the Covered Person results, within the Time Period for Loss from date of Accident shown in the Schedule of Benefits, in any one of the losses shown below. The Principal Sum is shown in the Schedule of Benefits.

<u>Covered Loss</u>	<u>Benefit Amount</u>
Life	100% of the Principal Sum
Loss of One Hand or Foot	100% of the Principal Sum
Loss of Use of One Hand or Foot	100% of the Principal Sum
Loss of Sight in One Eye	50% of the Principal Sum
Loss of Speech	50% of the Principal Sum
Loss of Hearing (in both ears)	50% of the Principal Sum
Thumb and Index Finger of the Same Hand	25% of the Principal Sum

Any permanent dismemberment not mentioned above shall be compensated at the complete discretion of the Company taking into consideration the nature of the injury in conjunction with the stated compensation percentages for more specific injuries shown in the Table of Benefits.

Definition: For this benefit
Loss of One Hand or Foot means complete Severance through or above the wrist or ankle joint.

Loss of Sight means the total, permanent Loss of Sight of one eye.

Loss of Speech means total and permanent loss of audible communication that is irrecoverable by natural, surgical or artificial means.

Loss of Hearing means total and permanent Loss of Hearing in both ears that is irrecoverable and cannot be corrected by any means.

Loss of a Thumb and Index Finger of the Same Hand or **Loss of Four Fingers of the Same Hand** means complete Severance through or above the metacarpophalangeal joints of the same hand (the joints between the fingers and the hand).

Severance means the complete separation and dismemberment of the part from the body.

Age means the age of the Covered Person on his or her most recent birthday.

EMERGENCY MEDICAL EVACUATION BENEFIT

XL Catlin will pay Maximum Benefit as shown in the Schedule of Benefits for expenses incurred for the medical evacuation of a Covered Person. Benefits are payable if the Covered Person:

1. is traveling outside of his or her Home Country;
2. suffers an Injury or Sickness during the course of the covered Trip; and
3. requires Emergency Medical Evacuation.

Benefits will not be payable unless:

1. the Doctor ordering the Emergency Medical Evacuation certifies the severity of the Covered Person's Injury or Sickness requires an Emergency Medical Evacuation;
2. all transportation arrangements made for the Emergency Medical Evacuation are by the most direct and economical conveyance and route possible;
3. the charges incurred are Medically Necessary and do not exceed the usual level of charges for similar: transportation; treatment; services; or supplies in the locality where the expense is incurred; and
4. do not include charges that would not have been made if there were no insurance.

Definition: For this benefit
Emergency Medical Evacuation means:
1. the Covered Person's immediate transportation from the place where he or she suffers an Injury or Sickness to the nearest: Hospital; or other medical facility where appropriate medical treatment can be obtained; or

2. the Covered Person's transportation to his or her Home Country to obtain further medical treatment in a Hospital; or other medical facility; or to recover after suffering an Injury or Sickness.

An Emergency Medical Evacuation also includes: Medically Necessary medical treatment; medical services; and medical supplies necessarily received in connection with such transportation.

After Hospitalization or treatment for a covered Injury or Sickness, if the Covered Person is unable to continue his Trip, Our designated assistance provider, in conjunction with the local attending Doctor and/or the Covered Person's habitual Doctor, will organize the Covered Person's return to his or her Home Country or country of permanent assignment. If the gravity of the situation so dictates, Our designated assistance provider will ensure that appropriate medical care is provided to the Covered Person during the return Trip. If Our designated assistance provider and the local attending medical practitioner consider the Covered Person stable enough to be medically repatriated, without endangering the Covered Person's health, and the Covered Person refuses repatriation, We will continue to pay medical expense benefits incurred after the date repatriation was recommended only up to the amount that would have been payable for the medical repatriation, subject to policy maximums and limitations.

Benefits will not be payable unless We authorize in writing or by an authorized electronic or telephonic means all expenses in advance.

FAMILY REUNION BENEFIT

XL Catlin will reimburse up to the Maximum Benefit shown in the Schedule of Benefit, if, while the Covered Person is traveling, he or she suffers an Injury or Sickness and must be confined in a Hospital for at least 3 consecutive days or if the Covered Person is medically evacuated to another location, We will reimburse the expenses for transportation and lodging for a Family Member to join the Covered Person during his or her stay in the Hospital. All transportation and lodging arrangements must be made by the most direct and economical route and conveyance possible and may not exceed the usual level of charges for similar transportation or lodging in the locality where the expense is incurred. Benefits will not be paid unless all expenses are approved in advance by Us, and services are rendered by the Company's assistance provider.

Definition: For this benefit
Family Member means a Covered Person's parent; sister; brother; husband; wife; or children.

OUT OF COUNTRY MEDICAL EXPENSE BENEFITS

XL Catlin will pay Maximum Benefit shown in the Schedule of Benefits, for Covered Expenses from a Covered Accident or Sickness. These benefits are subject to the: Deductibles; Coinsurance Maximum Rates; Benefit Periods; and other terms or limits shown in the Schedule of Benefits.

Out of Country Medical Expense Benefits are only payable:

1. for Usual and Customary Charges incurred after the Deductible has been met;
2. for those Medically Necessary Covered Medical Expenses that the Covered Person receives; and
3. when the first charges are incurred within 90 days after the date of the Covered Accident or Sickness.

No benefits will be paid for any expenses incurred that, in Our judgment, are in excess of Usual and Customary Charges.

Covered Medical Expenses

1. Hospital room and board expenses: the daily room rate when a Covered Person is Hospital confined; and general nursing care is provided and charged for by the Hospital. In computing the number of days payable under this benefit, the date of admission will be counted but not the date of discharge.
2. Ancillary hospital expenses: services and supplies including: operating room; laboratory tests; anesthesia; and medicines (excluding take home drugs) when Hospital confined. This does not include personal services of a non-medical nature.
3. Daily intensive care unit expenses: the daily room rate when a Covered Person is Hospital confined in a bed in the intensive care unit; and nursing services other than private duty nursing services.
4. Medical emergency care (room and supplies) expenses: incurred within 72 hours of an Accident and including: the attending Doctor's charges; X-rays; laboratory procedures; use of the emergency room; and supplies.
5. Newborn nursery care expenses.
6. Outpatient surgical room and supply expenses for use of the surgical facility.
7. Outpatient: diagnostic x-rays; laboratory procedures; and tests.
8. Doctor non-surgical treatment/examination expenses (excluding medicines) including: the Doctor's initial visit; each Medically Necessary follow-up visit; and consultation visits when referred by the attending Doctor.
9. Doctor's surgical expenses
11. Outpatient laboratory test expenses.
12. Physiotherapy expenses on an inpatient or outpatient basis. Expenses include treatment and office visits connected with such treatment when prescribed by a Doctor, including: diathermy; ultrasonic; whirlpool; or heat treatments; adjustments; manipulation; massage; or any form of physical therapy.

13. Dental expenses including dental x-rays for the repair or treatment of each injured tooth that is: whole; sound; and a natural tooth at the time of the Accident; and emergency alleviation of dental pain.
14. Air Ambulance expenses for transportation from the emergency site to the Hospital.
15. Prescription Drug Expenses including: dressings; drugs; and medicines prescribed by a Doctor and administered on an outpatient basis.
16. Medical services and supplies: expenses for blood and blood transfusions; oxygen and its administration.
17. Eyeglasses; contact lenses; and hearing aids; when damage occurs in a Covered Accident that requires medical treatment.
18. Expenses due to an aggravation or re-Injury of a Pre-Existing Condition.
26. Emergency medical treatment of pregnancy.
27. Therapeutic termination of pregnancy.

POLITICAL EVACUATION NATURAL DISASTER EXPENSE BENEFIT

XL Catlin will pay the Maximum Benefit shown in the Schedule of Benefits, if:

1. an Occurrence takes place during the Trip described in the Policy while coverage is in effect; and
2. while he or she is traveling outside of his or her Home Country or country of residence.

Benefits will be paid for:

1. the Covered Person's Transportation and Related Costs to the Nearest Place of Safety, necessary to ensure his or her safety and well-being as determined by the Designated Security Consultant. Political Evacuation Benefits are payable only once for any one Occurrence.
2. the Covered Person's Transportation and Related Costs within 14 days of the Political Evacuation to either of the following locations as chosen by the Covered Person:
 - a. back to the country in which the Covered Person is traveling during the Trip while covered by the Policy;
 - b. the Covered Person's Home Country; or
 - c. where the entity that sponsored the Covered Person's Trip is located.

Benefits will not be payable unless We (or Our authorized assistance provider) authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered or approved by Our assistance provider. Our assistance provider is not responsible for the availability of Transport services. Where a Political Evacuation becomes impractical due to hostile or dangerous conditions, a Designated Security Consultant will endeavor to maintain contact with the Covered Person until a Political Evacuation occurs.

Right of Recovery

For purposes of this benefit:

If, after a Political Evacuation is completed, it becomes evident that the Covered Person was an active participant in the events that led to the Occurrence, We have the right to recover all Transportation and Related costs from the Covered Person.

Change in Terms and Conditions For purposes of this benefit:

The terms and conditions of this Benefit may be changed at any time to reflect conditions that, in Our opinion, constitute a change in the Policyholder's Political Evacuation exposure. We will give at least 15 days advance written notice (or authorized electronic or telephonic means) to the Participating Organization of any change in the terms and condition of this coverage.

Definitions

For purposes of this benefit:

Appropriate Authority(ies) means the government authority(ies) in the Covered Person's Home Country or country of residence; or the government authority(ies) of the Host Country.

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

Evacuation Advisory means a formal recommendation issued by the Appropriate Authorities that the Covered Person or citizens of his or her Home Country or Country of Residence or citizens of the Host Country leave the Host Country.

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

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

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

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

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

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

Occurrence means any of the following situations involving a Covered Person;

1. expulsion from a Host Country; or being declared persona non-grata on the written authority of the recognized government if a Host Country;
2. political or military events involving a Host Country, if the Appropriate Authorities issue an Advisory stating that citizens of the Covered Person's Home Country or Country of Residence or citizens of the Host Country should leave the Host Country;
3. deliberate physical harm of the Covered Person confirmed by documentation or physical evidence; or a threat against the Covered Person's health and safety as confirmed by documentation and/or physical evidence;
4. Natural Disaster within seven days of an event;

Related Costs means: food; lodging; and, if necessary, physical protection for the Covered Person during the Transport to the Nearest Place of Safety.

Political Evacuation means the extrication of a Covered Person from the Host Country due to an Occurrence which could result grave physical harm or death to the Covered Person.

Transport or Transportation means the most efficient and available method of conveyance. Where practical, economy fare will be utilized. If possible, the Covered Person's common carrier tickets will be used.

Exclusions

For purposes of this benefit:

We will not pay Political Evacuation Expense Benefits for expenses and fees:

1. payable under any other provision of the Policy.
2. that are recoverable through the Covered Person's employer.
3. arising from or attributable to an actual fraudulent, dishonest or criminal act committed or attempted by the Covered Person, acting alone or in collusion with other persons.
4. arising from or attributable to an alleged:
 - a. violation of the laws of country in which the Covered Person is traveling while covered under the Policy; or
 - b. violation of the laws of the Covered Person's Home Country or country of residence.
5. due to the Covered Person's failure to maintain and possess duly authorized and issued required travel documents and visas.
6. for repatriation of remains expenses.
7. for common or endemic or epidemic diseases; or global pandemic disease as defined by the World Health Organization.
8. for medical services.
9. for monies payable in the form of a ransom, if a Missing Person case evolves into a kidnapping.
10. arising from or attributable, in whole or in part, to:
 - a. a debt; insolvency; commercial failure; the repossession of any property by any title holder or lien holder; or any other financial cause;
 - b. non-compliance by the Covered Person with regard to any obligation specified in a contract or license.
11. due to military or political issues if the Covered Person's Security Evacuation request is made more than 30 days after the Appropriate Authority(ies) Advisory was issued.

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

REPATRIATION OF REMAINS BENEFIT

XL Catlin will pay the Maximum Benefit as shown in the Schedule of Benefits for preparation and return of a Covered Person's body to his or her Home Country if he or she dies due to an Injury or Sickness while on a covered Trip. Covered expenses include:

1. expenses for embalming or cremation;
2. the least costly coffin or receptacle adequate for transporting the remains;
3. transporting the remains by the most direct and least costly conveyance and route possible.

Benefits will not be payable unless We authorize in writing or by an authorized electronic or telephonic means all expenses in advance.

RETURN OF MINOR CHILD(REN) BENEFIT

XL Catlin will reimburse up to the Maximum Benefit shown in the Schedule of Benefit if the Covered Person, age 18 or older, is the only person traveling with minor a Dependent(s) who is under the age of 18, and such Covered Person suffers an Injury or Sickness and must be confined in a Hospital for at least 24 consecutive hours or if the Covered Person is medically evacuated to another location. We will reimburse the cost of a one way economy airfare ticket and/or ground transportation ticket to return each minor Dependent child to his or her Home Country. All transportation arrangements must be made by the most direct and economical route and conveyance possible and may not exceed the usual level of charges for similar transportation in the locality where the expense is incurred. Benefits will not be paid unless all expenses are approved in advance by Us, and services are rendered by the Company's assistance provider.

TRIP DELAY BENEFIT

XL Catlin will reimburse up to the Maximum Benefit shown in the Schedule of Benefit, if the flight that the Covered Person is due to travel is delayed in excess of the Deductible, We reimburse for essential purchases, such as meals, refreshments or other related expenses directly resulting from the:

- 1) delay or cancellation of his/her booked and confirmed flight;
- 2) denial of boarding due to overbooking on his/her booked and confirmed flight;
- 3) late arrival of his/her connecting flight causing him/her to miss his/her onward connection;
- 4) or a late arrival (of more than 1 hour) of public transport causing him/her to miss the flight;

All claims must be submitted in writing to Us by the Covered Person, or his/her legal representative and all information, documents, and evidence required by Us shall be furnished at no expense to Us and shall be in such form and of such nature as We may prescribe. All claims must be reported to Us within 21 days of a delay occurring, and must contain:

- a) the policy number;
- b) detailed circumstances of the delay;
- c) a copy of declaration of delay made by the public transport company (other than an airline);
- d) all receipts, all invoices serving as proof of purchases made in connection with the flight delay, as well as proof of the delay and the flight number and place where the delay occurred.

Exclusions

For purposes of this benefit:

The Company shall not be liable to pay any benefit in respect of any Covered Person for:

- 1) arising or as the result of a chartered flight, unless such flight is registered in the international data system;
- 2) if comparable alternative transport has been made available within 6 hours after scheduled departure time or within 6 hours of an actual connecting flight arrival time.
- 3) if a Covered Person fails to check-in according to the itinerary supplied, unless it is due to a strike;
- 4) if the delay is due to a strike or industrial action existing or announced before the start of the Trip;
- 5) if the delay is due to withdrawal of aircraft from service by any civil aviation authority of which notice had been given before the start of the Trip;
- 6) Arising or as the result of a natural disaster or weather related event.

PLAN DEFINITIONS

Accident means a: sudden; unexpected; and unintended event.

Beneficiary, in the case of death of the Covered Person, means a person named by the Covered Person to receive benefits provided by this Policy.

Benefit means cash payable or services offered to the Covered Person or the Beneficiary as detailed in the Schedule of Benefits, limited by the terms and provisions of this Policy.

Certificate is the evidence of the Covered Person's coverage under this Policy. Coverage is subject to the Policy provisions. The Certificate is not the Policy.

Coverage means the specific types of losses covered by this Policy.

Covered Accident means an Accident that: occurs while coverage is in force for a Covered Person; and results in a Covered Loss or Injury covered by the Policy for which benefits are payable.

Covered Activity means any activity: that the Policyholder requires the Covered Person to attend; or that is under its supervision and control listed in the Schedule of Benefits and insured under the Policy.

Covered Air Accident means an air Accident that: occurs while coverage is in force for a Covered Person; and results in a Covered Loss or Injury covered by the Policy for which benefits are payable.

Covered Expenses; Expenses means expenses actually incurred by or on behalf of a Covered Person for: treatment; services; and supplies covered by the Policy. Coverage under the Policyholder's Policy must remain continuously in force from the date of the Accident or Sickness until the date: treatment; services; or supplies are received for them to be a Covered Expense. A Covered Expense is deemed to be incurred on the date such: treatment; service; or supply, that gave rise to the expense or the charge, was rendered or obtained.

Covered Injury means any bodily harm that results directly and independently of all other causes from a Covered Accident.

Covered Loss(es) means an: accidental death; dismemberment; or other Injury covered under the Policy.

Covered Person means any Insured and Dependent for whom the required premium is paid.

Deductible means the dollar amount of Covered Expenses that must be incurred as an out of-pocket expense by each Covered Person on a per Accident or Sickness basis before Out of Country Medical Expense Benefits and/or other Additional Benefits paid on an expense incurred basis are payable under the Policy.

Dependent means an Insured's lawful spouse under age 70 or Domestic Partner; or a Dependent Child. A Dependent may also include any person related to the Insured by blood or marriage and for whom the Insured is allowed a deduction under the Internal Revenue Code.

Dependent Child; Child means an Insured's unmarried child, from the moment of birth to age 25, who is chiefly dependent on the Insured for support. A child, for eligibility purposes, includes an Insured's natural child; adopted child, beginning with any waiting period pending finalization of the child's adoption; or a stepchild who resides with the Insured or depends chiefly on the Insured for financial support.

Insurance will continue for any Dependent child who reaches the age limit and continues to meet the following conditions: 1) the child is incapable of self-sustaining employment by reason of mental retardation or physical handicap; and 3) the child is chiefly dependent on the Insured for support and maintenance. Proof of the child's condition and dependence must be submitted to Us within 31 days after the child's 26th birthday. During the next two years, We may, from time to time, require proof of the continuation of such condition and dependence. After that, We may require proof no more than once a year.

Disability means the inability to do any work for which the Covered Person is or may be qualified by reason of education, experience or training.

Dismemberment means the loss by physical separation of a limb from the body.

Doctor means a licensed health care provider: acting within the scope of his or her license; and rendering care or treatment to a Covered Person that is appropriate for the conditions and locality. It will not include a: Covered Person; the Covered Person's Immediate Family Member; or a member of the Covered Person's household.

Domestic Partner means a person of the same or opposite sex of the Insured who:

1. shares the Insured's primary residence;
2. has resided with the Insured for at least 6 months prior to the date of enrollment and is expected to reside with the Insured indefinitely;
3. is financially interdependent with the Insured
4. has signed a Domestic Partner declaration with the Insured, if recognized by the laws of the state in which he or she resides with the Insured;
5. does not have current Domestic Partner declaration with any other person;
6. is older than 18 years of age;
7. is not currently married to another person; and

8. is not in a position as a blood relative that would prohibit marriage.

Hazard means the circumstances necessary for an event to be considered a Covered Loss under this Policy.

Health Care Plan means a: policy; other benefits; or service arrangement for medical or dental care or treatment under: 1) group or blanket coverage, whether on an insured or self-funded basis; 2) hospital or medical service organizations on a group basis; 3) Health Maintenance Organizations on a group basis; 4) group labor-management plans; 5) employee benefit organization plans; 6) association plans on a group or franchise basis; or 7) any other group employee welfare benefit plans as defined in the Employee Retirement Income Security Act of 1974, as amended.

Home Country means a country from which the Covered Person holds a passport. If the Covered Person holds passports from more than one country, his or her Home Country will be that country which the Covered Person has declared to Us in writing as his or her Home Country.

Hospital means an institution that: 1) operates as a Hospital pursuant to law for the: care; treatment; and providing of in-patient services for sick or injured persons; 2) provides 24-hour nursing service by Registered Nurses on duty or call; 3) has a staff of one or more licensed Doctors available at all times; 4) provides organized facilities for: diagnosis; treatment; and surgery, either: (i) on its premises; or (ii) in facilities available to it, on a pre-arranged basis; 5) is not primarily a: nursing care facility; rest home; convalescent home; or similar establishment; or any separate: ward; wing; or section of a Hospital used as such; and 6) is not a place solely for: drug addicts; alcoholics; or the aged; or any separate ward of the Hospital.

Hospital Confined means an overnight stay as a registered resident bed-patient in a Hospital.

Immediate Family Member means a person who is related to the Covered Person in any of following ways: spouse; parent (includes stepparent); child age 18 or older (includes legally adopted and step child); brother or sister (includes stepbrother or stepsister);

Injury means accidental bodily harm sustained by a Covered Person that results directly and independently from all other causes from a Covered Accident. All Injuries sustained by one person in any one Accident, including all related conditions and recurrent symptoms of these Injuries, are considered a single Injury.

Insurance means providing protection against some of the economic consequences of a Covered Loss.

Insured means a person in a Class of Eligible Persons for whom the required premium is paid making insurance in effect for that person. A Dependent covered under the Policy is not an Insured, but rather a Covered Person.

Maximum Benefit means the most we will pay for each Benefit states in the Schedule of Benefits.

Medical Emergency means a condition caused by an Injury or Sickness that manifests itself, while covered under this Policy, by symptoms of sufficient severity that a prudent lay person possessing an average knowledge of health and medicine would reasonably expect that failure to receive immediate medical attention would place the health of the person in serious jeopardy.

Medically Necessary means a treatment, service or supply that is: 1) required to treat an Injury or Sickness; 2) prescribed or ordered by a Doctor or furnished by a Hospital; 3) performed in the least costly setting required by the Covered Person's condition; and 4) consistent with the medical and surgical practices prevailing in the area for treatment of the condition at the time rendered. Purchasing or renting 1) air conditioners; 2) air purifiers; 3) motorized transportation equipment; 4) escalators or elevators in private homes; 5) eye glass frames or lenses; 6) hearing aids; 7) swimming pools or supplies for them; and 8) general exercise equipment are not considered Medically Necessary. A service or supply may not be Medically Necessary if a less intensive or more appropriate diagnostic or treatment alternative could have been used. We may, at Our discretion, consider the cost of the alternative to be the Covered Expense.

Other Income Benefits means any amounts that an Insured receives (or are assumed to receive) under:

1. any: Workers' Compensation; occupational disease; unemployment compensation law; or similar state or federal law; including all permanent as well as temporary disability benefits. This includes any: damages; compromises; or settlement paid in place of such benefits, whether or not liability is admitted. If paid as a lump sum, We will prorate these benefits over the period for which the sum is given. If no time is stated, the lump sum will be prorated over a five year period. If no specific allocation of a lump sum is made, then the total sum will be an Other Income Benefit.
2. any Social Security or retirement benefits the Covered Person receives or any third party receives (or is assumed to receive) on the Insured's behalf or for the Insured's dependents; or, if applicable, that the Insured Dependents receive (or are assumed to receive) because of the Covered Person's entitlement to such benefits.

3. any proceeds payable under any group insurance or similar plan. If there is other insurance that applies to the same claim for disability, and contains the same or similar provision for reduction because of other insurance, We will pay our pro rata share of the total claim. "Pro rata share" means the proportion of the total benefit that the amount payable under one policy, without other insurance, bears to the total benefits under all such policies.

Policy means a legal contract between the Policyholder and Us which describes the terms and conditions of insurance subject to its provisions, limitations and exclusions.

Policyholder means the company or organization that elects to provide this Policy to their employees, members or participants.

Pre-existing Condition means a: Sickness; disease; or other condition of the Covered Person, that in the 12-month period before the Covered Person's coverage became effective under the Policy:

1. first: manifested itself; worsened; or became acute; or
2. required taking prescribed drugs or medicines, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or
3. was treated by a Doctor; or treatment had been recommended by a Doctor.

Premium means the amount of money: determined by Us; based on the Hazards and Benefits chosen by the Policyholder; and agreed by the Policyholder as the consideration of which we agree to guarantee payment.

Schedule of Benefits is an outline of the: Hazards; Coverages; and Benefits provided by this Policy.

Sickness means a disease or condition of the Covered Person that causes a loss for which a Covered Person incurs medical expenses while covered under the Policy. All: related conditions; and recurrent symptoms of the same or similar condition; will be considered one Sickness.

Trip means travel by: air; land; or sea from the Covered Person's Home Country.

Usual and Customary Charge means the average amount charged by most providers for: treatment; service; or supplies in the geographic area where the: treatment; service; or supply is provided.

XL Catlin - XL Catlin is the global brand used by XL Group plc's insurance subsidiaries, including Catlin Insurance Company, Inc. XL Catlin will not pay benefits for any loss or Injury that is caused by, or results from:

1. war or any act of war, whether declared or not.
2. Sickness; disease; bodily or mental infirmity; bacterial or viral infection; or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food.
3. piloting or serving as a crewmember.
4. commission of, or attempt to commit: a felony; or to which a contributing cause was the Covered Person's being engaged in an illegal occupation.
5. active participation in a riot, or insurrection.
6. flight in; boarding; or alighting from an aircraft or any craft designed to fly above the Earth's surface, except as:
 - a) a fare-paying passenger on a regularly scheduled commercial or charter airline;
 - b) a passenger in a non-scheduled, private aircraft used for pleasure purposes with no commercial intent during the flight;
 - c) a passenger in a military aircraft flown by the Air Mobility Command or its foreign equivalent.
7. travel in or on any on-road or off-road motorized vehicle not requiring licensing as a motor vehicle.
8. an Accident if the Covered Person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, except while participating in driver's education Program.
9. Injury or Sickness covered by: Workers' Compensation; Employer's Liability Laws; or benefits or while engaging in activity for monetary gain from sources other than the Policyholder.
10. an Accident that occurs while on active duty service in the: military; naval; or air force of any country or international organization. Upon Our receipt of proof of service, We will refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days.
11. Injury or Sickness where the Covered Person's Trip to the host country is undertaken for treatment or advice for such Injury or Sickness, except as provided in the Policy.
12. participation in any sports activity listed below not specifically authorized, sponsored and supervised by the Policyholder; rock climbing; or ice climbing; or mountain climbing; or base jumping; or organized motorcycle racing; or bungee jumping; or parachuting; or skydiving; or parasailing; or hang-gliding; or scuba diving; or professional or semi-professional sports; or sail gliding; or parakiting; or organized racing including stunt show or speed test of any motorized or non-motorized vehicle.

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

In addition to the exclusions above, We will not pay Medical Expense Benefits for any loss, treatment or services resulting from or contributed to by:

1. treatment by persons employed or retained by a Policyholder, or by any Immediate Family Member or member of the Covered Person's household.
2. treatment of: sickness; disease; or infections; except pyogenic infections or bacterial infections that result from the accidental ingestion of contaminated substances.
3. abortion;
4. Injury or death to which a contributing cause is: the Covered Person's violation or attempt to violate any duly-enacted law; or the commission or attempt to commit a felony; or that occurs while the Covered Person is engaged in an illegal occupation.
5. Injury or death caused while: riding in or on; entering into or alighting from; or being struck by a 2 or 3-wheeled motor vehicle or a motor vehicle not designed primarily for use on public streets and highways.
6. cosmetic surgery, except for reconstructive surgery needed as the result of an Injury or Sickness.
7. Any: elective treatment; surgery; health treatment; or examination; including any: service; treatment; or supplies that: (a) are deemed by Us to be experimental; and (b) are not recognized and generally accepted medical practices in the United States.
8. treatment or service provided by a private duty nurse.
9. replacement of: artificial limbs; eyes; and larynx.
10. eye refractions or eye examinations for the purpose of prescribing corrective lenses or for the fitting thereof, unless caused by an Injury incurred while covered under the Policy.
11. covered medical expenses for which the Covered Person would not be responsible for in the absence of the Policy.
12. conditions that are not caused by a Covered Accident or Sickness.
13. participation in any activity or hazard not specifically covered by the Policy.
14. Any: treatment; service; or supply not specifically covered by the Policy.
15. Any: treatment; services; or supplies received by the Covered Person that are incurred or received while he or she is in his or her Home Country.
16. personal comfort or convenience items. These include but are not limited to: Hospital telephone charges; television rental; or guest meals.
17. routine nursery care.
18. routine physicals.
19. cosmetic or plastic surgery, except as a result of Injury.
20. elective surgery.
21. birth defects and congenital anomalies; or complications which arise from such conditions.
22. routine dental care and treatment.
23. rest cures or custodial care.
24. organ or tissue transplants and related services.
25. Injury sustained while participating in intercollegiate; professional; or semi-professional sports.
26. confinement or institutional care.
27. maternity and routine nursery care.
28. any expenses covered by any other employer or government sponsored plan for which, and to the extent that the Covered Person is eligible for reimbursement.
29. Services; supplies; or treatment including any period of Hospital confinement which were not: recommended; approved; and certified as necessary and reasonable by a Doctor; or expenses which are non-medical in nature.
30. sexually transmitted diseases or immune deficiency disorders and related conditions. This exclusion does not apply to the care or treatments of: Acquired Immune Deficiency Syndrome (AIDS); AIDS Related Complex (ARC); or Human Immunodeficiency Virus (HIV) infection, or any illness or disease arising from these medical conditions.
31. expenses incurred for services related to the diagnostic treatment of infertility or other problems related to the inability to conceive a child, unless such infertility is a result of a covered Injury or Sickness.
32. expenses incurred for birth control including surgical procedures and devices.
33. nasal or sinus surgery, except surgery made necessary as the result of a covered Injury a deviated nasal septum including sub mucous resection and surgical correction thereof.
34. treatment of acne.
35. expenses incurred for Trips taken for the purpose of seeking medical care.
36. expenses incurred while traveling against the advice of a medical professional.