

# GOOD SAM TRAVELASSIST FAMILY COVERAGE MEMBERSHIP PLAN DESCRIPTION



**WELCOME!** Good Sam has partnered with the U.S. affiliate of International Assistance Group, the largest network of medical assistance providers worldwide, to offer You emergency medical and travel assistance through Good Sam TravelAssist. This dynamic, global network includes over 50 response centers around the world and over 6,000 dedicated physicians, security specialists, assistance coordinators and support staff.

As a leading provider of medical, security and travel assistance for domestic and international travelers, the experienced, multi-lingual team specializes in delivering assistance during medical emergencies anywhere in the world and coordinating transportation home after accidents or illnesses. Our Global Response Center is ready to provide assistance to You and Your family when unexpected problems occur - 24 hours a day, 365 days a year.

Please review this plan description, as it explains You and Your Family's benefits and services in detail. Take a moment to familiarize Yourself with the membership details so You fully understand how it works.

We are committed to providing You with the superior level of service and care that You have come to expect. If You have any comments, complaints, or ideas on how we can better serve You, please email me at [MarcusVIP@goodsamfamily.com](mailto:MarcusVIP@goodsamfamily.com). I'm always glad to hear from You.

Sincerely,

Marcus Lemonis, Chief Executive Officer  
Good Sam TravelAssist

## WELCOME TO GOOD SAM TRAVELASSIST

TRAVELASSIST shall provide the following services (the "Services") to Members: A comprehensive program providing "**wherever YOU are benefits**" and "**while YOU are AWAY FROM HOME benefits**" including emergency medical assistance, worldwide emergency evacuation/repatriation and other travel assistance services. Please refer to your Schedule of Benefits for maximum benefit limits.

### PROGRAM DESCRIPTION

How To Access TRAVELASSIST Services 24 hours a day, 7 days a week, 365 days a year.

MEMBER'S TRAVELASSIST identification card is YOUR key to travel security. If YOU have a medical or travel problem simply call TRAVELASSIST for assistance. TRAVELASSIST'S toll-free and collect-call telephone numbers are printed on YOUR ID card. YOU may either call the toll-free number of the country YOU are in, or call the Assistance Center collect when YOU are in another country.

An English-speaking assistance coordinator will ask for YOUR name, YOUR company or group name, and a description of YOUR situation. TRAVELASSIST will immediately begin assisting YOU. A full listing of Services follows.

If the condition is an emergency, YOU should call 911 or go immediately to the nearest physician or hospital without delay and then contact TRAVELASSIST. TRAVELASSIST will then take the appropriate action to assist YOU and monitor YOUR care until the situation is resolved.

TRAVELASSIST provides YOU with Medical Assistance Services, Medical Evacuation and Repatriation Services, Travel Assistance Services, and Security Assistance Services as described below. These Services are subject to certain Conditions, Limitations, and Exclusions also described below.

### WHEREVER YOU ARE

Benefits apply from any location whether at home or away.

### MEDICAL ASSISTANCE SERVICES

#### Worldwide Medical and Dental Referrals

At YOUR request, TRAVELASSIST will provide referrals to medical professionals in a given geographic area including, to the extent possible, western-style medical facilities and English-speaking doctors, dentists, and other health care providers.

#### Deposits, Advances and Guarantees

Deposits, advances and guarantees will be provided to medical facilities, hotels, airlines, ground and air ambulances and other like providers in order to secure service for YOU. Any advances of funds on YOUR behalf shall be charged to the MEMBER's credit card at the time of service.

**Please note:** Medical expenses of any nature are not covered by this membership program. This includes hospital bills, doctor visits and/or prescriptions.

### TRAVEL ASSISTANCE SERVICES

#### Pre-Travel Information

Upon YOUR request, TRAVELASSIST will provide you with destination intelligence regarding weather, travel, health, inoculations, travel restrictions and special events.

### Lost Luggage Assistance

TRAVELASSIST Assistance Coordinators will assist YOU with the tracking of luggage lost in transit. If the luggage cannot be recovered, TRAVELASSIST will assist YOU with locating replacements.

### Emergency Pet Housing and/or Pet Return Assistance

TRAVELASSIST will assist in coordinating arrangements for temporary boarding or the return of a pet left unattended as a result of YOUR INJURY or ILLNESS. Any fees will be billed to YOUR credit card at the time of service.

### SECURITY ASSISTANCE SERVICES

#### Real-time Security Intelligence

In the event YOU feel threatened by political unrest, social instability, weather conditions, or health or environmental hazards, TRAVELASSIST will provide YOU with the latest authoritative information and guidance for over 180 countries and select cities. TRAVELASSIST'S global intelligence database is continuously updated and includes destination intelligence from over 5,000 worldwide sources.

#### Security Evacuation Assistance Services

In the event of a threatening situation, TRAVELASSIST will assist YOU in making evacuation arrangements, including assistance securing flight arrangements, visas, and logistical arrangements such as ground transportation and housing. In more complex situations, TRAVELASSIST will assist YOU in making arrangements with providers of specialized security services. Any fees will be billed to YOUR credit card at the time.

### WHILE YOU ARE TRAVELING AWAY FROM HOME

Benefits apply when TRAVELING AWAY FROM HOME Expenses incurred without the intervention of TRAVELASSIST are not covered.

### MEDICAL ASSISTANCE SERVICES

#### Monitoring of Treatment

In an emergency, TRAVELASSIST Assistance Coordinators will continually monitor YOUR condition while YOU are hospitalized and provide ongoing updates to YOUR family. Depending upon the medical and/or geographic situations, TRAVELASSIST may retain the advice and assistance of licensed consulting physicians/nurses and/or other medical professionals with relevant areas of expertise to assist in the monitoring of YOUR condition.

#### Transfer of Insurance Information to Medical Providers

To help prevent delays or denials of medical care, TRAVELASSIST Assistance Coordinators will assist YOU with hospital admission, such as relaying insurance benefit information. WE will also assist with discharge planning.

#### Medication, Vaccine and Blood Transfers

At YOUR request, and with authorization of the prescribing physician, TRAVELASSIST will dispatch prescription medicine, vaccines or blood products when unavailable locally and when legally permissible. Assistance services are included as part of YOUR membership. YOU are responsible for any expenses incurred in this regard including, but not limited to, the cost of the pharmaceuticals, shipping cost, taxes or other import/export duties. These expenses will be billed to YOUR credit card prior to shipping.

### Replacement of Corrective Lenses and Medical Devices

TRAVELASSIST will coordinate the replacement of corrective lenses or medical devices if they are lost, stolen, or broken during travel. Assistance services are included as part of YOUR membership. The expenses for replacement and shipping of replacements will be billed to YOUR credit card prior to shipping.

### Dispatch of Doctors/Specialists

If YOU are Hospitalized, TRAVELASSIST Assistance Coordinators may dispatch a Qualified Medical Practitioner or other health care professional to assist in determining the medical condition and YOUR suitability to travel. The Qualified Medical Practitioner's or other health care professional's travel expenses and fees are YOUR responsibility.

### Ground Ambulance Benefit\*

(While Traveling Away From Home Only): WE will reimburse YOU up to \$200 toward the cost of either an initial emergency transportation for YOU by ambulance to a hospital WHILE TRAVELING AWAY FROM HOME or to transport YOU by ambulance from one hospital to another (if not arranged under the Emergency Medical Evacuation) WHILE TRAVELING AWAY FROM HOME.

**Please note:** In order to be eligible for consideration of reimbursement YOU must submit the Explanation of Benefits from your primary insurance carrier showing medical due.

- YOU must submit the Explanation of Benefits letter within 180 days of incident date.
- This benefit is limited to 2 events per year for unrelated incidents.

### Medical Records Transfer

Upon YOUR consent, TRAVELASSIST will assist with the transfer of medical information and records to YOU or the Qualified Medical Practitioner. Assistance services are included as part of YOUR membership. Any fees for the transfer of medical information and records will be billed to YOUR credit card.

### Continuous Updates to Family, Employer and Physician

With YOUR approval, TRAVELASSIST will provide case updates to appropriate individuals YOU designate in order to keep them informed.

### Hotel Arrangements for Convalescence

TRAVELASSIST will assist YOU with the arrangement of hotel stays and room requirements before or after hospitalization. Assistance services are included as part of YOUR membership. Any fees for hotel arrangements will be billed to YOUR credit card.

**Please note:** Medical expenses of any nature are not covered by this membership program. This includes hospital bills, doctor visits and/or prescriptions.

### MEDICAL EVACUATION AND REPATRIATION SERVICES

TRAVELASSIST must arrange and WE must approve all arrangements for the services described and defined in this section to be covered at no cost to YOU. \*Expenses incurred without our intervention or assistance are not covered.

#### Emergency Medical Evacuation WHILE TRAVELING AWAY FROM HOME\*

If YOU are TRAVELING AWAY FROM HOME and YOU sustain an INJURY or suffer a sudden and unexpected ILLNESS and appropriate medical treatment is unavailable in YOUR current facility, TRAVELASSIST will coordinate and WE will pay for a medically supervised evacuation to a hospital that TRAVELASSIST determines to be capable of providing appropriate medical treatment. YOUR medical condition and situation must be such that, in the professional opinion of the Qualified Medical Practitioner and TRAVELASSIST PHYSICIANS, YOU require immediate emergency medical treatment, without which there would be significant risk of death or serious impairment. If YOU need to be evacuated by air ambulance, TRAVELASSIST will attempt to arrange for a TRAVELING COMPANION to accompany YOU on the air ambulance.

#### Transportation to Join a Hospitalized Member\*

If YOU are alone and TRAVELING AWAY FROM HOME and are, or will be, hospitalized for more than seven (7) days, TRAVELASSIST will coordinate and WE will pay for one economy round-trip airfare for a person of YOUR choice to join YOU while YOU are HOSPITALIZED. No benefits will be payable after YOU have been discharged from the hospital.

#### Return of Minor Children\*

If, while TRAVELING AWAY FROM HOME, YOUR UNMARRIED DEPENDENT child(ren) or grandchild(ren) under age 19 are present but left unattended as a result of YOUR INJURY or ILLNESS, TRAVELASSIST will coordinate and WE will pay for one-way economy airfare to send them back to either YOUR or their PERMANENT PRIMARY RESIDENCE. TRAVELASSIST will also arrange and WE will pay for the services and transportation expenses of a qualified escort, if required. Should YOUR unmarried child(ren) or grandchild(ren) already have airline tickets, TRAVELASSIST will handle the rebooking of their tickets, if it is less expensive.

#### Transportation After Stabilization\*

If YOU are TRAVELING AWAY FROM HOME and YOU are treated at a medical

facility for an INJURY or a sudden and unexpected ILLNESS that requires immediate emergency medical treatment and Hospitalization, without which there would be significant risk of death or serious impairment, TRAVELASSIST will arrange YOUR transfer to YOUR PERMANENT PRIMARY RESIDENCE or to a medical facility near YOUR PERMANENT PRIMARY RESIDENCE for continuing care provided the Qualified Medical Practitioner and TRAVELASSIST'S PHYSICIANS have determined that YOUR condition has reached maximum medical improvement; and

1. YOU have been evacuated under the EMERGENCY MEDICAL EVACUATION benefit as defined above; or
2. The Qualified Medical Practitioner and TRAVELASSIST PHYSICIANS have determined YOU are unable to operate YOUR RV/vehicle and no one in YOUR traveling party is capable of operating the RV/vehicle; or
3. The Qualified Medical Practitioner and TRAVELASSIST PHYSICIANS have determined YOUR physical medical condition prevents traveling as a passenger in the RV/vehicle; or
4. YOU are not traveling in a vehicle and the Qualified Medical Practitioner and TRAVELASSIST PHYSICIANS have determined YOUR physical medical condition prevents YOU from continuing on YOUR trip and YOU must return to YOUR PERMANENT PRIMARY RESIDENCE or to a medical facility near YOUR PERMANENT PRIMARY RESIDENCE to recover from YOUR condition.

Services that TRAVELASSIST will coordinate and WE will provide you with include the following options:

1. A one-way economy airfare ticket and medically necessary ground ambulance transportation to/from the airport to return YOU to YOUR PERMANENT PRIMARY RESIDENCE or to a medical facility near YOUR PERMANENT PRIMARY RESIDENCE. If TRAVELASSIST PHYSICIANS recommend and deem it medically necessary for YOU to travel by any other method not outlined in number one (1) above, WE will pay up to the value of a one-way economy airfare ticket toward the value of the alternate transportation method.
2. If YOU have been Medically Evacuated, TRAVELASSIST will coordinate and WE will pay for a one-way economy airfare ticket to return YOU to the original place of transport where YOUR Emergency Medical Evacuation began; or
3. If YOU are unable to operate YOUR RV/vehicle and no one in YOUR traveling party is capable of operating YOUR RV/vehicle and YOU have chosen to have a family member or friend return YOUR RV/Vehicle, YOU may choose to return to YOUR PERMANENT PRIMARY RESIDENCE in YOUR RV/vehicle. YOU will be covered under the RV/Vehicle Return Benefit. Please see RV/Vehicle Return Benefit for complete detail of what is covered.

#### Return of Deceased Remains\*

In the event of YOUR death while TRAVELING AWAY FROM HOME, TRAVELASSIST will assist in obtaining the necessary clearances for the return of YOUR remains. TRAVELASSIST will coordinate and WE will pay for the expenses of the preparation and transportation of YOUR deceased remains to YOUR PERMANENT PRIMARY RESIDENCE.

#### Return of Traveling Companion\*

If YOU are TRAVELING AWAY FROM HOME and require an EMERGENCY MEDICAL EVACUATION, TRANSPORTATION AFTER STABILIZATION or a RETURN OF DECEASED REMAINS, TRAVELASSIST will coordinate and WE will pay for a one-way economy class ticket for one TRAVELING COMPANION to return to either YOU or their PERMANENT PRIMARY RESIDENCE.

#### RV/Vehicle Return\*

TRAVELASSIST will coordinate the return of YOUR automobile, motorcycle, non-commercial truck or RV to YOUR PERMANENT PRIMARY RESIDENCE or place of rental within 90 days of the incident if:

1. WE approved transporting YOU to YOUR PERMANENT PRIMARY RESIDENCE under either the EMERGENCY MEDICAL EVACUATION, TRANSPORTATION AFTER STABILIZATION, or RETURN OF DECEASED REMAINS; OR
2. YOU have not been transported under the services listed above but YOUR documented INJURY or ILLNESS (which does NOT require Hospitalization) prevents YOU from driving the RV/Vehicle.

TRAVELASSIST will authorize this service only if no one in YOUR traveling party is capable of driving the RV/vehicle. The vehicle must be in good condition and capable of being safely driven on the highway in compliance with local laws. If the vehicle is an RV, TRAVELASSIST will also coordinate the return of an additional vehicle if it was hitched to YOUR RV. You are responsible for all costs required to maintain the safe operation of the RV/Vehicle and/or tow vehicle during the return. This includes any vendor fees associated with an RV/Vehicle breakdown if you request to have your RV/Vehicle returned by a hired professional. Any delays associated with RV/Vehicle breakdown and/or maintenance will be your responsibility. The return must be approved by US and coordinated by TRAVELASSIST and must be performed by one of TRAVELASSIST'S contracted service providers.

Alternatively, YOU may choose to have YOUR vehicle returned by a friend or family member. In such instance, and provided the vehicle is returned directly and expeditiously to YOUR PERMANENT PRIMARY RESIDENCE, TRAVELASSIST will coordinate and WE will provide reasonable transportation in the form of a one-way economy ticket and reasonable ground transportation for that person to either the location of the vehicle or to return home after the RV/Vehicle has been returned, and WE will reimburse YOU for gas and tolls during the return. In addition, WE will provide up to a \$100 per day benefit, in accordance with the per diem allowance as set forth in the Federal Trade Regulation by the US General Services Administration, for incidental expenses while driving (receipts must be submitted within 180 days from the date of service). Note that if YOU choose to have a friend or family member perform the RV/Vehicle Return, WE will not pay more than it would have cost to have TRAVELASSIST arrange the RV/Vehicle Return.

**Please note:** In the event YOU qualify for RV/Vehicle Return by virtue of number 2 above please see the following:

- The medical condition that prevents YOU from driving and/or returning in YOUR RV/Vehicle must be documented by a Qualified Medical Practitioner near the original location of the Injury or Illness. YOU must be evaluated by a Qualified Medical Practitioner prior to traveling to YOUR PERMANENT PRIMARY RESIDENCE.
- If YOU choose to have a friend or family member return YOUR RV/Vehicle, YOU can choose to ride to YOUR PERMANENT PRIMARY RESIDENCE in YOUR RV/Vehicle if YOU are medically cleared to do so.
- If YOU choose to have a professional return YOUR RV/Vehicle, YOU will not be able to travel as a passenger in YOUR RV/Vehicle for liability reasons. TRAVELASSIST will assist YOU coordinating with any transportation arrangements for YOU and a companion; however, any costs associated with YOUR transportation and YOUR TRAVELING COMPANION's transportation are YOUR responsibility.
- If YOU qualify for an RV/Vehicle Return under this scenario, YOU do not qualify for paid transportation under EMERGENCY MEDICAL EVACUATION or TRANSPORTATION AFTER STABILIZATION to YOUR PERMANENT PRIMARY RESIDENCE.

You must inform TRAVELASSIST within 30 days of the incident that you need assistance returning your RV/Vehicle. The actual RV/Vehicle return must take place within 90 days from the date of incident.

## TRAVEL ASSISTANCE SERVICES

### Emergency Travel Arrangements

In an emergency, TRAVELASSIST Assistance Coordinators will help YOU change airline, hotel or car rental reservations as necessary. All fees associated with the travel arrangements will be billed to YOUR credit card at the time of service.

### Emergency Cash Advance Assistance

In an emergency, TRAVELASSIST Assistance Coordinators will provide assistance to YOU by arranging for the forwarding of funds from MEMBER's account, credit cards or family members. All fees associated with the transfer of funds will be billed to YOUR credit card at the time of service.

### Replacement of Lost or Stolen Travel Documents Assistance

TRAVELASSIST Assistance Coordinators will provide assistance to YOU by arranging for the replacement of passports, visas, airline documents, birth certificates and other travel-related documents. All fees associated with the acquisition or forwarding of these documents will be billed to YOUR credit card at the time of service.

### Legal Referrals

If YOU are TRAVELING AWAY FROM HOME and are arrested, involved in an accident, or otherwise require the services of an attorney, TRAVELASSIST Assistance Coordinators will arrange for an initial telephone consultation with an attorney, without charge. TRAVELASSIST Assistance Coordinators will also assist with the securing of a bail bond, if needed. If further legal assistance is needed, YOU will be referred to an attorney in the appropriate geographic area. Fees and costs charged by the referred attorney will be YOUR responsibility.

### Translation Services

TRAVELASSIST Assistance Coordinators will, without charge, provide foreign language assistance over the telephone or up to one-page translations submitted via fax. If necessary, TRAVELASSIST will also provide referrals to translators and interpreters. All fees for such services are YOUR responsibility.

### Emergency Message Forwarding Assistance

In the event of an emergency and YOU are unable to reach an employer, family member or traveling companion, TRAVELASSIST will forward a message via telephone or email to the intended party.

## OTHER PLAN DETAILS

### TravelAssist Program Definitions

The following definitions apply:

**"Coverage"** means the period of time for which YOU are validly enrolled for TRAVELASSIST and for which WE have received the appropriate enrollment fee.  
**"Member"** means the primary person validly enrolled for TRAVELASSIST and for whom WE have received the appropriate enrollment fee and MEMBER's SPOUSE and DEPENDENTS.

**"Dependent"** means the MEMBER's unmarried children from birth and under age 19; or under age 23 if enrolled as a full-time student in an accredited college, university, vocational or technical school; and children whose support is required by a court decree. Children include natural children, stepchildren and legally adopted children. They must be primarily dependent on the MEMBER for support and maintenance and must live in a parent-child relationship with the MEMBER. If traveling alone on a trip DEPENDENTS are covered provided the trip does not exceed sixty (60) days.

**"Spouse"** means the MEMBER's spouse living in the same household (to include DOMESTIC PARTNER), unless they are legally separated.

**"Domestic Partner"** means a person with whom YOU reside and can show evidence of cohabitation (including the shared responsibility for basic living expenses) for at least the previous 6 months.

**"Hospitalization/Hospitalized"** means being admitted as an inpatient after YOUR initial visit in the emergency room.

**"Illness"** means a sudden and unexpected sickness that manifests itself during YOUR Coverage period and which requires HOSPITALIZATION.

**"Injury"** means an identifiable accidental injury caused by a sudden, unexpected, unusual, specific event that occurs during YOUR Coverage period and which requires HOSPITALIZATION.

**"Qualified Medical Practitioner"** means a doctor or specialist who is registered or licensed to practice medicine under the laws of the country they practice in other than You, Your Spouse or Domestic Partner or a member of Your immediate family, or Your employer.

**"Permanent Primary Residence"** means the locale of the address as shown on YOUR valid state driver's license or state-issued identification card.

**"TRAVELASSIST"** means On Call International, the TRAVELASSIST Service Provider.

**"TRAVELASSIST Physician"** means physicians retained by On Call International to provide US with consultative and advisory services, including the review and analysis of the quality of medical care YOU are receiving.

**"Travel Advisory or Travel Warning"** means U.S. State Department communication advising caution in traveling to specified destinations due to reasons such as armed violence, civil or political unrest, high incidence of crime (especially kidnapping and/or murder), natural disaster or outbreak of one or more contagious diseases.

**"Traveling Away From Home"** means on a vacation or business trip away from YOUR PERMANENT PRIMARY RESIDENCE (by car, plane, or other mode of travel), without minimum or maximum duration or mileage restriction, for a purpose other than your normal daily activities, commute, or routine.

**"Traveling Companion"** shall mean any individual traveling on the same itinerary, and accompanying MEMBER on MEMBER's trip for more than 50% of the time sharing the same accommodations.

**"WE", "US", "OUR"** means International Insurance Company of Hannover SE, UK Branch.

**"YOU", "YOUR"** shall mean MEMBER, SPOUSE and DEPENDENT(S).

### Conditions and Limitations

The Services described are available to YOU only during MEMBER'S Coverage period and medical assistance services are available only when YOU are TRAVELING AWAY FROM HOME.

\*Expenses for the "while you are away benefits" will be covered only if WE have given OUR prior approval and if those Services are coordinated by US. TRAVELASSIST has sole discretion in making the coverage determination for YOUR TRANSPORTATION AFTER STABILIZATION. OUR determination will be based on YOUR medical inability to return in YOUR vehicle or previously booked transportation. WE will not return YOU or your RV/Vehicle to YOUR PERMANENT PRIMARY RESIDENCE for the sole sake of YOUR convenience. In the event WE are arranging transportation by commercial air under the TRANSPORTATION AFTER STABILIZATION benefit, and YOU hold an original return airline ticket, WE may use that ticket and are responsible only for any applicable change fees. TRAVELASSIST has sole discretion in making the determination as to whether WE will cover the cost of EMERGENCY MEDICAL EVACUATIONS and RV/VEHICLE RETURNS. OUR decision will be based on medical considerations, including the recommendations of the Qualified Medical Practitioner, OUR TRAVELASSIST PHYSICIANS and OUR Medical Director with respect to YOUR condition and ability to travel. WE will determine the appropriate method, destination, and timing of any evacuation. The destination will be the nearest facility capable of providing appropriate care as determined



by US. WE will only direct-pay and not reimburse YOU for any transportation costs to the transportation providers, unless approved by TRAVELASSIST in advance for the following benefits; EMERGENCY MEDICAL EVACUATION, RETURN OF DECEASED REMAINS, TRANSPORTATION AFTER STABILIZATION, RETURN OF MINOR CHILDREN, RETURN OF TRAVELING COMPANION, AND TRANSPORTATION TO JOIN HOSPITALIZED MEMBER.

WE are not responsible for the availability, quality, results of, or failure to provide any medical, legal or other care or service caused by conditions beyond OUR control. This includes YOUR failure to obtain care or service or where the rendering of such care or service is prohibited by U.S. law, local laws, or regulatory agencies.

YOUR legal representative shall have the right to act for YOU and on YOUR behalf if YOU are incapacitated or deceased. All legal actions arising under this Agreement shall be barred unless written notice thereof is received by US within one (1) year from the date of the event giving rise to such legal action. MEMBER may be required to release US or any healthcare provider from liability during Emergency Evacuation and/or Repatriation.

Without limiting the foregoing, OUR actions and obligations under this Agreement are ministerial in nature, and all medical care is provided by medical professionals ultimately selected by YOU and in no event is this the responsibility of TRAVELASSIST. TRAVELASSIST is not liable for any malpractice performed by a local doctor, healthcare provider, or attorney. TRAVELASSIST retains the medical discretion to limit one Medically Necessary Evacuation and/or Medically Necessary Repatriation attributable to any single medical condition of YOU.

\*Insurance benefits are underwritten by International Insurance Company of Hannover SE, UK Branch. Branch Office: 10 Fenchurch Street, London EC3M 3BE Registered Office: Roderbruchstraße 26, 30655 Hannover, Germany. Registered in Germany, Registration No. HRB 211924. Authorised by the Bundesanstalt für Finanzdienstleistungsaufsicht and authorised and subject to limited regulation by the Financial Conduct Authority. Details about the extent of our authorisation and regulation by the Financial Conduct Authority are available from us on request.

This contract is delivered as surplus line insurance under the Non-Admitted Insurance Act. The insurer issuing this contract is not admitted in Colorado but is an approved non-admitted insurer. There is no protection under the provisions of the Colorado Insurance Guaranty Association Act.

#### Eligibility

The Primary MEMBER, SPOUSE, and DEPENDENT(s) shall be covered under the TRAVELASSIST Membership, as outlined in the Program Definitions. FAMILY MEMBERS traveling with YOU as TRAVELING COMPANIONS are covered as well. YOU are eligible during the enrollment period for which WE have received the appropriate enrollment fee.

#### Program Costs

Once enrolled in TRAVELASSIST, MEMBER cannot be singled out for fee increase nor can MEMBER'S benefits be changed, unless the program costs or benefits are changed for all MEMBERS of the group. If rates and benefits are changed for the group, individual participant rates will only change upon MEMBER'S renewal date and with proper notification. Program rates are earned as paid after the initial money back review period and MEMBER'S program costs are guaranteed for the remaining coverage period.

#### Expenses NOT Covered

WE will not be responsible for any costs or expenses arising from:

1. Hospital or medical expenses of any kind or nature.
2. Travel arrangements that were neither coordinated by nor approved by US in advance.
3. Anyone traveling against the advice of a Qualified Medical Practitioner, traveling with a chronic or life-threatening condition without medical clearance prior to departure, or traveling for the purpose of obtaining medical treatment.
4. Suicide, attempted suicide, or willful self-inflicted injury.
5. Taking part in military or police service operations.
6. YOUR arrival into a country for which a formal recommendation in the form of a Travel Advisory or Travel Warning from the U.S. State Department has been issued preceding YOUR arrival into that country.
7. The commission of, or attempt to commit, an unlawful act.
8. INJURY or ILLNESS caused by or contributed to by use of drugs or alcohol.
9. Pregnancies, except in the case of a major, vital complication during the first two trimesters of pregnancy which presents a clear and significant risk of death or imminent serious injury or harm to the mother or fetus.
10. Mountaineering or rock climbing necessitating the use of guides or ropes, spelunking, skydiving, parachuting, ballooning, hang gliding, deep sea diving utilizing hard helmet with air hose attachment, flying in an experimental aircraft, racing of any kind other than on foot, bungee jumping, operating a vehicle when not properly licensed, or participating in professional sports.
11. Psychiatric, psychological, or emotional disorders.
12. Unless specifically listed herein, incidental expenses, including but not limited to accommodations, local transportation, meals, telephone, and facsimile charges.
13. Subsequent evacuations for the same or related medical condition, regardless of location.
14. Services covered by other valid and collectible insurance, including Medicare.
15. Services not otherwise shown as covered.
16. MEMBERS who enroll in this plan while Hospitalized.

#### Reimbursement to US and Rights of Subrogation

YOU or a responsible party on YOUR behalf shall either pay the cost of medical care and treatment, including hospital expenses, directly or shall reimburse US upon demand for all such costs and expenses which may be imposed upon US by healthcare providers for the cost of medical care and treatment, including hospital expenses, or related assistance services either authorized by YOU or deemed to be advisable and necessary by US under urgent medical circumstances, to the extent that such expenses are not OUR responsibility. Such reimbursement shall be without regard to the specific terms, conditions, or limitations of any insurance policies or benefits available to YOU.

WE shall be fully and completely subrogated to YOUR rights against parties who may be liable for the payment of, or a contribution toward the payment of, the costs and expenses of assistance services provided by TRAVELASSIST or medical care and treatment, including hospital expenses, in the event that WE pay or contribute to the payment of them. YOU must assign to US any and all rights of recovery under any such insurance plans, including any occupational benefit plan, health insurance, Medicare, or other insurance plan or public assistance program, up to the sum of any payments by US.

#### Cancellation Policy

Membership is subject to cancellation by either party at any time for any reason, upon written notification. The cancellation of a Membership includes the primary MEMBER and all individuals eligible for benefits under the Membership. All benefits will cease when the Membership expires or either party cancels. Should either party cancel, MEMBER will receive a prorated refund for the unused portion of his/her Membership term, without any deductions.\

## CONTACTS

### HOW TO GET HELP IN AN EMERGENCY

In the event of a medical emergency, illness, or accident while traveling:

#### STEP 1

**CALL 9-1-1 or local authorities!**

#### STEP 2

**CALL GOOD SAM TRAVELASSIST**

Expenses for Your benefits will be covered only if those services are coordinated and arranged by Us, not on Your own.

### CALL 1-866-922-1929

Your call is toll-free anywhere in the U.S., Canada, Puerto Rico, and the U.S. Virgin Islands. For service outside of the United States or the locations above, please call collect: 1-603-328-1929.

### PROVIDE YOUR INFORMATION

Give the Service Representative Your membership number, Your name and the phone number You are calling from. Tell Us Your emergency and Our team will deliver You quality Emergency Medical or Travel Assistance no matter where You are in the world.