

iNext Basic Travel/Medical Insurance Information

We are pleased to provide you with the iNext **Basic** Supplemental Insurance plan, providing emergency travel/medical insurance underwritten by Nationwide Mutual Insurance Company with claims administration by Co-ordinated Benefit Plans. The policy is designed to supplement an individual's private insurance by providing additional coverage for the cost of accidents, sicknesses, and travel-related mishaps while he/she is abroad. The policy also offers Emergency Medical Transportation coverage with options for the addition of-Security Evacuation and Trip Cancellation/Interruption riders

Schedule of Benefits	Platinum with Security
Deductible	\$0
	Accident up to \$25,000
Medical Expense	Sickness up to \$15,000
Emergency Dental due to Accident	Up to \$750
Emergency Medical Evacuation and Repatriation	\$300,000
Transportation of Dependents	Included
Bedside Visit	Included
Repatriation of Remains	\$50,000
Accidental Death & Dismemberment	\$5,000
Trip Delay	\$200 - Per Trip
Baggage Delay	\$100
24-Hour Travel Assistance Services	Included

This is only a brief description of the coverage(s) available. The Policy will contain reductions, limitations, exclusions and termination provisions.

Insurance is underwritten by Nationwide Mutual Insurance Company and Affiliated Companies with a rating of A+ (Superior) by A.M. Best Company. Your Policy, along with the Confirmation of Coverage, will contain plan limitations, exclusions and termination provisions. All coverage(s) may not be available in all states.

Frequently Asked Questions

The following commonly asked questions and answers are meant to provide general guidance about coverage and claims procedures. This is not intended as a guarantee of coverage; please see the full policy for further details.

► WHAT TYPE OF POLICY IS THIS?

Coverage provided by iNext through Nationwide Mutual Insurance Company is secondary to any other that may be in effect. In other words, if an individual is covered by another insurance policy - whether personal, parental, or through his/her school - that policy is the individual's primary policy and will provide reimbursement first, before Nationwide.

We recommend that individuals covered by a personal/parental/school insurance plan should continue the coverage while abroad. Therefore it is likely that many individuals will also be covered by a primary policy through another insurance company. These individuals should contact their primary insurance company first, and then file a claim with Co-ordinated Benefits Plans for any amount not covered by the primary insurer.

► WHAT ARE THE POLICY EXCLUSIONS?

The policy does not include coverage for:

- Pre-existing conditions
- Routine physicals
- dental examinations
- preventative medicine
- other exclusions as defined in the policy

► ► WHAT ARE THE COVERAGE DATES?

Individuals are covered for 365 days from the start date of coverage – regardless of the length of the program - but only outside the United States (and/or home country).

▶ DOES COVERAGE EXTEND TO COUNTRIES OTHER THAN THE PROGRAM COUNTRY?

Yes. Insurance coverage is valid in any country outside the 50 United States and District of Columbia. The insurance is available to all individuals who are residents of the United States and over 13 years of age.

► IS PRE-APPROVAL REQUIRED BEFORE RECEIVING MEDICAL TREATMENT?

No. Individuals do not have to contact Generali Global Assistance before receiving any medical treatment aside from hospitalization or surgery. Treatment by any doctor or medical facility that is licensed to practice medicine should be covered if primary insurance does not cover. The individual should simply go to a doctor then submit a claim for reimbursement.

► IS APPROVAL REQUIRED FOR SCHEDULED SURGERY OR HOSPITALIZATION?

It is recommended that individuals call Generali Global Assistance to open a medical case before being admitted to a hospital or prior to a scheduled surgery unless it is an **emergency situation** and a call is not possible. Generali representatives are available 24/7 and may be able to arrange direct payment with the hospital or coordinate payment guarantees for serious and/or expensive cases. However, there is no assurance that direct payment will be possible. Each claim must be handled on a case by case basis.



Frequently Asked Questions, Continued

► WHAT IS TRANSPORTATION OF DEPENDENTS AND BEDSIDE VISIT?

In the event an insured is hospitalized for 7 days or more following an emergency evacuation, the policy will pay for dependent children travelling with the insured to return to their home, with an attendant if necessary.

In addition, if documented medical opinion states that hospitalization is anticipated to last for 7 days or more the policy will pay for one person of the insured's choosing for a single visit to and from the insured's bedside. It covers round-trip economy airfare and must be arranged through Generali Global Assistance. Ground costs such as hotel, food and local transportation are not covered.

IMPORTANT CONTACT INFORMATION

► HOW DO I FILE A CLAIM?

You can easily file an iNext claim. Forms are available on our website www.inext.com. Go to the "Filing a Claim tab at the top of the page and follow instructions and use forms associated with Co-ordinated Benefit Plans (<u>Not Seven Corners</u>)

Co-ordinated Benefits Plans, LLC P.O. Box 26222 Tampa, FL 33623 **Email**: Team1@cbpinsure.com **Phone**: 1-866-723-3063 or 727-412-7378 (It is strongly recommended that claims be filed via email)

You should have the following information available to file a claim:

Program Reference Number (listed on the back of the iNext Travel Card or print out) for Enhanced Comprehensive and plans.

What coverage type or benefit category the claim is under (e.g. Medical Expense, Baggage Loss, etc.)

The date the covered treatment or loss occurred

The amount that was paid (if applicable)

You should complete the claim form for accuracy, sign the form, and return it to Co-ordinated Benefit Plans along with any requested supporting documentation, such as original receipts, diagnosis, proof of travel (e.g., a copy of a flight itinerary), and primary insurance information.

It is important to remember to keep your receipts from doctor's visits, pharmacy prescriptions and diagnosis records. These will be required by Coordinated Benefit Plans when you file a claim. All diagnosis forms should be translated into English if possible. One reason claims processing can be prolonged is due to lack of documentation. The better prepared you are, the faster the claims processing can occur.

Completed claims forms must be completed and sent with the original itemized bills to the claim administrator within 90 days. Submit Claims or Inquires to:

► CONTACT INFORMATION

Co-ordinated Benefits Plans, LLC P.O. Box 26222, Tampa, FL 33623 Email: Team1@cbpinsure.com

Phone: If you have any questions about a claim, please feel free to contact Co-Ordinated Benefit Plans at:

1-866-723-3063 or 727-412-7378

▶ WHO DO I CALL FOR HELP IN THE EVENT OF AN EMERGENCY?

Generali Global Assistance is available 24/7 to assist. Contact them at:

+1.240-330-1548 (collect/outside U.S.); 1-866-506-5304 (toll free inside the U.S)

ops@us.generaliglobalassistance.com

Be certain to identify yourself at the outset of the call as an iNext insured

