

iNext International Health Insurance



GLOBAL EXPLORER

Part of the CIEE family

**Please read this important information as it relates to your coverage contained herein.**

## **Where do I go for Medical Care?**

**Non-Emergency/Non-Urgent Care:** When you have a non-emergency situation please contact a local doctor, walk-in clinic, or urgent care facility. GBG Assist can assist you in locating one of these facilities in your area. Utilizing hospital emergency room for non-emergency care will result in additional expenses and out of pocket cost as specified in your schedule of benefits: Examples of non-emergency: minor injuries and illnesses.

**Emergency Care:** Proceed to the nearest emergency room/urgent care facility. If you are not sure where to go you may contact GBG Assist and they may be able to direct you to the closest networked facility. Remember, it is your health so you must act prudently in an emergency and seek the care you need. Note: NON-EMERGENCY USE OF A HOSPITAL EMERGENCY ROOM for an illness that DOES NOT result in admission will have a **\$350.00 deductible** that must be paid by the Plan Participant.

**For Emergency Assistance contact GBG ASSIST  
U.S./Canada toll-free: 1.888.258.8597  
Worldwide collect: 1.905.532.2964**

Proper and timely notification of a claim will ensure that you receive the best possible service and will allow us to direct you to our Global Network of providers. Utilizing these providers may result in GBG providing payments directly to the provider as well as referrals to licensed medical providers you can trust.

Within North America please use our Preferred Provider Directory at [www.gbg.com](http://www.gbg.com) or you may be subject to paying for services and filing a claim afterwards. For Immediate NON-LIFE THREATENING Situations please use the Directory for a provider near you or utilize an URGENT CARE FACILITY.

### **REQUIRED NOTIFICATIONS**

**GBG Assist requires notification as soon as possible for all situations requiring emergency medical treatment in excess of USD \$1,500.**

**For services that may result in evacuation, repatriation or curtailment GBG Assist MUST be notified prior to the movement of the Plan Participant.**

**Unless ordered during a lifesaving event  
Prior Approval is required for all  
CAT scan, MRI and Surgical procedures.**

**Failure to notify GBG Assist as outlined above MAY result in copayment penalty of 50% of the claim.**

The Policy is designed to protect you from acute, unexpected, sudden and unforeseen illnesses and accidental injuries. It does not cover care for wellness medical conditions, extended treatment or pre-existing conditions AND is not a replacement for longer term medical, preventative, or maintenance needs.

**For NON-EMERGENCY/Non-Urgent care we recommend the use of a local doctor or walk-in clinic.**

***Please read your policy for an understanding of the Terms and Conditions.***

#### SCHEDULE OF BENEFITS

Territory	Worldwide Coverage outside of home country.	
Type	Student / Au-Pair / Seasonal workers Travel High School Students	
Duration	Maximum Issuance 364 days	
Benefit	Coverage	Amount
Maximum	Overall Policy Maximum – Cumulative of all benefits within the policy period.	Unlimited
Deductibles	1. Emergency Room - Illness – Non Admitted 2. Urgent Care Facility / Walk-in Clinic/Office Visit – per Injury/Illness	\$350 \$50
1	Emergency Assistance Services via GBG Assist	Included
2	Emergency Medical Evacuation Worldwide	\$100,000
	Emergency Reunion	\$500/\$15,000
	Repatriation for Medical Treatment	\$100,000
	Continuation (Return to host country)	\$2,500
3	Compassionate Return	\$2,500
	Medical Stabilization: Emergency medical coverage for acute sudden and unforeseen onset of a pre-existing condition.	\$25,000
4	Accident and Acute Medical Treatment (Non-Sports cover)	100%
	Emergency Dental – Acute onset of pain (cessation of pain only)	\$500
	Emergency Dental – Accident	100%
	Physical Therapy	\$50/visit \$1,000 max.
	Mental Health Coverage - Outpatient	\$50/visit \$500 max.
	Mental Health Coverage – Inpatient	URC, 60 days
	Ambulance Coverage Injury and Emergency illness	\$150,000 max.
5	Prescription Drugs –inpatient/outpatient	100%
	Emergency Medical Treatment – Leisure Sports only	100%
6	Usual, Reasonable and Customary charges for Injuries resulting from participation Leisure Sports Activities	\$1,000,000
7	Accidental Death and Dismemberment (AD&D)	\$50,000
8	Repatriation of Mortal Remains	\$50,000
9	Personal Liability	\$100,000
	Damage to Property	\$25,000
10	Curtailment/Study Interruption	\$2,500
11	Baggage Delay	\$100/\$500
12	Baggage Loss/Theft	\$300/\$1,500
13	Loss of Passport	\$250
14	Travel Delay	\$1,000
15	Missed Departure	\$1,000
16	Legal Expenses	\$10,000

**Please read this carefully for full terms, conditions, exclusions and important features of the policy.**

## General Terms of Cover

1. All claims must be submitted within 90 days from date of incident. Any submissions after 90 days will require an appeal process for filing.
2. All claims arising under this insurance shall be governed by the Laws of the Bailiwick of Guernsey, Channel Islands, whose courts alone shall have jurisdiction in any dispute arising hereunder.
3. If the Plan Participant or any person acting on his/her behalf shall make any claim or statement knowing the same to be false or fraudulent as regards amount or otherwise, then this Insurance shall become void and all claims hereunder shall be forfeited without refund of premium.
4. The Insurer may at their own expense take proceedings in the name of the Plan Participant to recover compensation or secure an indemnity from any third party in respect of any loss, damage or expense covered by this Insurance and any amounts, recovered or secured shall belong to the Insurer
5. The Plan Participant must exercise reasonable care to prevent accident, injury, loss or damage and at all times act as if uninsured.
6. Unless specified this insurance does not cover anything caused directly or indirectly through bankruptcy/ liquidation of any tour operator, travel agent, and transportation company or accommodation supplier.
7. Trip Maximum Issuance:
  - a. Single trip policy: Maximum duration not to exceed 364 days and may not be combined with any other policy to exceed this limit.
  - b. Any coverage request beyond the expiry date of the current policy will be written on the new policy and subject to the terms, conditions and rates in effect at the time.
8. Benefits and premiums in this policy may be denominated in US Dollars and benefits will be stated in the same currency in which the premium is paid.
9. Age Eligibility: Minimum Age: 5 / Maximum Age: 50
10. The Policyholder is the International Benefit Trust.

## Policy Terms & Conditions

Benefits are applicable when the Plan Participant is outside his or her country of permanent residence; coverage also is in effect when traveling from and to their home country as part of an international trip.

### 1. **Emergency Assistance: GBG Assist – 24 hours a day, 7 days per week.**

For medical emergencies and assistance with your medical care, contact GBG Assist: Worldwide Collect: +1.905.532.2964; U.S. / Canada Toll-free: +1.888.258.8597. GBG Assist **MUST BE NOTIFIED** as soon as possible for all situations requiring emergency medical treatment in excess of \$1,500. Failure to do so may result in substantial co-payments and or denial of a claim.

1.1. Clients will have the full benefits of 24 hours/7 day assistance from GBG Assist.

1.2. These services include preauthorization and hospital admission.

#### **The following services are included:**

Emergency and Assistant Services

Medical Case Management and Review

Medical Evacuation Handling and Coordination

Return of Dependent Children/Companion

Repatriation of Mortal Remains Coordination

Repatriation For Medical Treatment

### 2. **Emergency Medical Evacuation:**

The plan covers the reasonable and customary charges for emergency evacuation when medical treatment is not available locally and deemed necessary and pre-approved by GBG Assist (the insurer), their medical advisors and the attending Physician – to a suitable location that will render immediate and appropriate care which may or may not be the home country of origin. If the Plan Participant does not obtain pre-approval from GBG Assist, GBG reserves the right to deny coverage or apply substantial co-payments for the associated costs to a maximum of 50% the evacuation cost.

2.1. Accompaniment/Emergency Reunion: The insurance allows for the travel and accommodation expenses of one person (i.e., a Parent, Guardian or Close Relative, who is a resident of Plan Participant's home country), whom upon medical advice is advised to join (5 days minimum hospital stay), accompany, remain with or escort the Plan Participant. Transportation costs will be by commercial carriers and in economy class only. Maximum Benefit \$500 per day / \$15,000 total.

2.2. Continuation: Upon pre-approval of GBG Assist, coverage includes transportation by economy travel for the Plan Participant, if medically able, to return to the point of initial destination to continue with the trip.

2.3. Compassionate Repatriation: See Curtailment /Study Interruption – Emergency Flight Home Benefit. (Paragraph 9 )

2.4. Repatriation For Medical Treatment: GBG reserves the right to review and repatriate any case in which the Plan Participant is medically stable and upon advice of the Insurers and Attending Medical Doctors can be evacuated at GBG's discretion to the home country of residence and any form of treatment or surgery which in the same medical opinion can be delayed until the Plan Participant returns to their home country. Refusal to accept repatriation when medically stabilized can result in the insurer denying further medical coverage and benefits. Transportation by most economic means in economy class unless medically authorized for premium cabins based on condition.

### 3. **Medical Stabilization:**

Provides a medical benefit up to the stated limit for the purpose of stabilizing an emergency medical condition (including sudden and unexpected onset of pre-existing conditions) which may require treatment or

evacuation under the policy.

- 3.1. Pre-Existing condition situations are limited to EMERGENCY STABILIZATION ONLY. Medical coverage will cease upon the Plan Participant being in a stable and non-life threatening condition.
- 3.2. Continual care or hospitalization are subject to the pre-existing conditions exclusions and are applicable once stabilization has been medically certified by a licensed medical doctor.

#### 4. **Emergency Medical Treatment:**

Emergency Medical treatment for coverage of accident or acute illness occurring during the period of insurance.

- 4.1. GBG Assist requires notification as soon as possible for all situations requiring emergency medical treatment in excess of \$1,500. Proper notification will ensure that you receive the best possible service and may result in us providing payments to the provider as well as offering advice and referrals to licensed medical providers. If we are not notified, your claim will be subjected to additional co-payments of 50% and/or denial of a claim.
- 4.2. Prior approval is REQUIRED for all CAT scan, MRI and Surgical procedures (unless the procedures are required during a lifesaving urgent event).
- 4.3. Subject to reasonable and customary occurrence of unexpected and urgent medically necessary medical expenses:
  - 4.3.1. 100% of covered expenses for In-hospital Medical Services,
  - 4.3.2. 100% of covered expense for In-hospital Surgical Services.
  - 4.3.3. 100% for Out of Hospital Medical Services which are a direct consequence of an accident or an acute illness of a Plan Participant and are within the limits of insurance responsibility which have occurred during the term of the individual insurance.
  - 4.3.4. Room and board (\$500 per day maximum)
  - 4.3.5. Emergency dental treatment for the immediate relief of pain (\$500 maximum) and or force impact trauma accident only (policy limit).
  - 4.3.6. Ambulance charges – Emergency use only;
  - 4.3.7. Physiotherapist and chiropractic's when in connection with an injury occurring during the period of insurance and is prescribed by a licensed medical doctor. \$50 per visit / \$1,000 maximum and is only for the period immediately following injury. This coverage does not apply for maintenance and longer term care following an injury.
  - 4.3.8. Mental Health: Outpatient \$50 per day / \$500 maximum. Inpatient 60 days maximum to a reasonable and customary standard (maximum coverage \$150,000). Care for mental disorders or conditions requiring mental health treatment unless excluded as defined below.
  - 4.3.9. Prescription Drugs 100% which are a direct consequence of an accident or an acute illness of an Plan Participant.
- 4.4. Accompaniment/Emergency Reunion: The insurance allows for the travel and accommodation expenses of one person (i.e., a close relative who is a resident of Plan Participant's home country), whom upon medical advice is advised to join (5 days minimum hospital stay), accompany, remain with or escort the Plan Participant. Transportation costs will be by commercial carriers and in economy class only. Maximum Benefit \$500 per day / \$15,000 total.
- 4.5. Acute Illness is defined as a sudden, unexpected, and unforeseen illness occurring after you have started your trip abroad. In order for an illness to be covered, it must be unexpected, non-preexisting, and stable for the last 24 months prior to departure and if left untreated can cause a further deterioration in a Plan Participant's condition.
- 4.6. Excess Insurance Provision: The insurance provided under both Medical and Evacuation shall be in

excess of all other valid and collectable insurance or indemnity and shall apply only when such other benefits are exhausted. In the event no other insurance exist this coverage becomes primary with GBG reserving the right to review and potentially subrogate with any undeclared coverage whether known or unknown to the Plan Participant.

4.7. Repatriation For Medical Treatment: GBG reserves the right to review and repatriate any case in which the Plan Participant is medically stable and upon advice of the Insurers and Attending Medical Doctors can be evacuated at GBG's discretion to the home country of residence and any form of treatment or surgery which in the same medical opinion can be delayed until the Plan Participant returns to their home country. Refusal to accept repatriation when medically stabilized can result in the insurer denying further medical coverage and benefits

5. **Casual/Leisure Sports (Total Policy Cover):** The following is included in your coverage for non-school sponsored events: aerobics, baseball, basketball, calisthenics, cycling, dancing, diving above 15M, Frisbee, horseback riding (trail only - no jumping, competition or dressage), hiking/trekking below 3500M, jogging/running, roller (in-line) skating, rollerblading, sailing, sea kayaking/canoeing, skiing/snowboarding (marked groomed trails only – NO cover for injuries associated with jumps, stunts, aerials, half-pipes, moguls, racing or operating outside of any designated boundaries) , soccer, squash, surfing, tennis, swimming, volleyball, whitewater rafting up to and including Class 3 level. Any other sport not requiring a high degree of risk or training and will be evaluated at the insurer's discretion whose decisions are final.

5.5. **Exclusions:** The following applies to all policy categories and are NOT COVERED unless specifically outlined via a policy rider.

5.5.1.Engaging in professional, intercollegiate or competitive sporting event, participation in semi or professional sports of any kind.

5.5.2.Use of any type of firearms (any device that discharges a projectile of any type)

5.5.3.Any activity relating to flying either as a Pilot in Command, student pilot, sport flying or the business or trade of flying except while travelling as a passenger in a fully-licensed passenger carrying aircraft.

5.5.4.Skiing/snowboarding for hire/compensation of any type including work study, work and travel, student volunteer services.

5.5.5.**Hazardous Sports:** These sport are not included but are not limited to Bungee jumping; base jumping; parkour, trekking above 3,500 meters; mountaineering or rock-climbing with the use of ropes, mountain biking, rappelling; scuba diving in excess of 15 Meters (80 feet) and flying within 24 hours of diving activity, Extreme skiing/snowboarding (injuries associated with jumps, stunts, aerials, half-pipes, moguls, racing or operating outside of any designated boundaries). Whitewater rafting/canoeing (level 3+); or any sport that requires a higher degree of knowledge or training and has an increased risk of injury. Determination and coverage for a sport not listed in this category is at the insurer's discretion and whose decisions are final.

5.5.6.**Extreme Sports:** These sports are not covered and are not limited to: Participation in any type of motorsport, motorsport race or motorsport contest, base jumping, paragliding, parachuting and mountaineering that requires specialized climbing equipment or to altitudes above 3500M or 11,500 feet, diving to depths in excess of 15M (80ft) and flying within 24 hours of diving activity. Any sport(s) requiring an increased skill set and a higher level of training to safely participate in an activity that if not properly executed could result in substantial injury or death. Determination and assignment of sports into this category are evaluated at the insurer's discretion and whose decisions are final.

## 6. Accidental Death and Dismemberment:

Dependent upon the amounts stated in the Schedule of Benefits. The policy will pay according to the

following scale provided it is a result of the Plan Participant sustaining bodily injury caused by accidental, external, violent and visible means which shall solely and independently of any other cause occur within 12 calendar months from the date of the accident.

LOSS DESCRIPTION	PERCENTAGE OF PRINCIPLE SUM
Loss of Life	100
Loss of Speech and Loss of Hearing	100
Loss of Speech and one of Loss of Hand, Loss of Foot or Loss of Sight of One Eye	100
Loss of Hearing and one of Loss of Hand, Loss of Foot or Loss of Sight of One Eye	100
Loss of Hands (Both), Loss of Feet (Both), Loss of Sight or a combination of any two of Loss of Hand, Loss of Foot or Loss of Sight of One Eye	100
Quadriplegia	100
Paraplegia	75
Hemiplegia	50
Loss of Hand, Loss of Foot or Loss of Sight of One Eye (any one of each)	50
Uniplegia	25
Loss of Thumb and Index Finger of the same hand	25

6.5. Specific Exclusions & Conditions: All exclusions contained within this policy apply and specifically the following;

6.5.1. Any act in which the Plan Participant acted recklessly or with disregard of the law that contributed or has been found to contribute to the death or disablement of the Plan Participant.

6.5.2. Conditions arising from motorcycling as either a driver or passenger shall not be payable hereunder.

6.5.3. In the event of a claim a medical adviser or advisers appointed by the Insurer shall be allowed as often as the Insurer shall deem it necessary to examine the Plan Participant.

6.5.4. The insurer shall not be liable for any claim arising from medical or surgical treatment (unless rendered necessary by accidental bodily injury).

6.5.5. Payment of permanent disability benefit shall be made only on certification by a medical board that the Plan Participant is totally disabled from engaging in any gainful occupation for 12 months and at the end of that time is beyond the ability to make future improvement in order to return to work.

## 7. Repatriation of Mortal Remains

A benefit for either repatriation of mortal remains or local burial is included in this policy. This benefit excludes fees for return of personal effects, religious or secular memorial services, clergymen, flowers, music, announcements, guest expenses and similar person burial preferences.

7.5. All Repatriation benefits must be coordinated and pre-approved by GBG Assist.

## 8. Personal Third Party Liability:

Legal liability coverage inclusive of legal cost arising from an accident resulting in bodily injury to persons other than the Plan Participant, his/her family and employees.

8.1. Subject to the limits stated in the schedule of benefits this will indemnify each Plan Participant against legal liability for bodily injury to persons other than employees or other members of his/her immediate family.



- 8.2. Damage to property: excluding that owned by or in the custody or control of the Plan Participant during the Period of Insurance.
- 8.3. **Property Damage:** Damage to third party home or property is limited under these terms and only payable on an excess basis.
  - 8.3.1. Claims are required in writing and must be declared within 90 days of occurrence.
  - 8.3.2. All claims are subordinate to any other insurance policies and are limited to the maximum stated in the Schedule of benefits and or the maximum deductible applied by the primary carrier.
  - 8.3.3. No claims under this paragraph will be payable until the primary insurer has settled all claims.
- 8.4. In the absence of insurable interest by the aggrieved party this policy will revert as primary subject to:
  - 8.4.1. Legal assignment by a court order or binding arbitration assigning liability to the Plan Participant and
  - 8.4.2. Shall not exceed the maximum stated in the schedule and
  - 8.4.3. In the event of a partial judgment the maximum payable benefit will be reduced by the percentage assigned under 8.4.1.
- 8.5. **Conditions & Exclusions.** The Insurers shall not be liable for claims arising directly or indirectly from:
  - 8.5.1. The Plan Participant cannot have a binding effect if they admit liability for any loss damage or injury caused by their actions unless represented via court or legal action;
  - 8.5.2. Employers' liability, contractual liability or liability to a member of a family or a travelling companion;
  - 8.5.3. Animals belonging to or in the care, custody or control of a Plan Participant;
  - 8.5.4. Any willful, malicious, or unlawful act;
  - 8.5.5. Pursuit of trade, business or profession;
  - 8.5.6. Ownership or occupation of land or buildings;
  - 8.5.7. Ownership, possession or use of vehicles, aircraft, or motor-powered watercraft;
  - 8.5.8. The influence of intoxicating liquor, or the use of firearms;
  - 8.5.9. Damage caused by lack of conditioning, care or age;
  - 8.5.10. Legal costs resulting from any criminal proceedings;
  - 8.5.11. The coverage under this section is limited to one claim per year.

**9. Curtailment / Study Interruption:**

Limited to the maximum stated in the Schedule of Benefits regardless of the amount of trips taken during the period of insurance for each Plan Participant covering return trip expenses for an unexpected occurrence. This coverage will be by the lowest cost travel option available and in economy class due to any cause listed below commencing and occurring during the period of Insurance provided such expenses are not recoverable from any other source

- 9.1. Sickness or serious injury of
  - 9.1.1. The Plan Participant.
  - 9.1.2. The spouse, parent, parent-in-law, child, brother, sister, such person being resident in the Home Country, of the Plan Participant.
- 9.2. Eligibility:
  - 9.2.1. Injury or Sickness of a Plan Participant, or Family Member traveling with the Plan Participant must be so disabling as to reasonably cause a Trip to be cancelled or interrupted, or which results in medically imposed restrictions as certified by a Physician at the time of Loss preventing your continued participation in the Trip.
  - 9.2.2. If the Plan Participant must interrupt his/her Trip due to Injury or Sickness of a Family Member not traveling with the Plan Participant, it must be because their condition is life-threatening, as certified by a Physician or because they directly require the Plan Participant's care.
- 9.3. Financial Default of an airline, cruise line, or tour operator provided the Financial Default occurs more than 14 days following a Plan Participant's effective date. There is no coverage for the Financial Default of any person, organization, agency, or firm from whom the Plan Participant purchased travel arrangements supplied by others.
- 9.4. **Conditions and Exclusions:** The Insurer shall not be liable for claims where at the time of taking out this insurance and/or prior to booking each separate trip:

- 9.4.1. The Plan Participant is aware of any medical condition or set of circumstances, which could reasonably be expected to give rise to a claim;
- 9.4.2. Is suffering or has suffered from many previously diagnosed psychiatric disorder, anxiety or depression;
- 9.4.3. Is receiving, is on a waiting list for or has the knowledge of the need for inpatient treatment at a hospital or nursing home;
- 9.4.4. Is expected to give birth before or within eight weeks of the date of arrival home;
- 9.4.5. Is travelling against the advice of a Medical Practitioner or for the purpose of obtaining medical treatment abroad;
- 9.4.6. Has been given a terminal prognosis.

**10. Baggage Delay:**

Reimbursement in respect of the replacement of necessities in the event of baggage being temporarily lost in transit during the outward journey for longer than 12 hours, up to a maximum of \$100 per day for a maximum of 5 days \$500 maximum.

- 10.1. Proof of a missing bag report must be filed with the common carrier.
- 10.2. Any items purchased after the return of the baggage will not be covered.
- 10.3. Any claim must be accompanied by proper receipts with date and time affixed.
- 10.4. Benefit does not apply to the return or homeward journey.

**11. Baggage Loss/Theft:**

Secondary coverage to Common Carrier settlement with reimbursement to the maximum specified in the Schedule of Benefits. No claims will be accepted until AFTER the Plan Participant has filed and received settlement from the common carrier. The coverage is in respect of accidental loss or theft to luggage, clothing and personal effects owned by (not hired, loaned or entrusted to) the Plan Participant, subject to a maximum payment of:

**Maximum coverage if common carrier used weight as maximum compensation is 2 times (2x) that of the common carrier.**

- A. \$300 in respect of any one article, pair or set of articles.
- B. \$300 overall in respect of valuables/electronics (see definition below)

Note: Claims will be evaluated on an “indemnity basis” only – NOT “new for old”. This means the market value of the article less deduction for age, wear, tear and depreciation, or the cost of repair, whichever is lesser.

Definition: Valuables shall mean photographic equipment, tablet PCs, computers, iPods, CD players and personal music and stereo equipment, CDs, computers, computer games and associated equipment, hearing aids, telescope and binoculars, antiques, jewelry, watches, fur, and articles made of or containing gold, silver or other precious metals or animal skins or hides. Any item of value to be evaluated on a case by case basis.

Conditions & Exclusions: The Insurer shall not be liable for

- 11.1. The Plan Participant must observe ordinary proper care in the supervision of the insured property and in all cases of loss.
- 11.2. Damage to baggage of any kind and or its contents.
- 11.3. Any loss or theft, or suspected theft not reported to the Police within 24 hours of discovery and a written report obtained;
- 11.4. Any damage or loss or theft of property in transit (or in possession of the Plan Participant), which has not been reported to the carrier and written report obtained. In the case of an airline a Property Irregularity Report will be required;
- 11.5. Loss of theft of any property left unattended in a public place;
- 11.6. Any theft from an unattended motor vehicle unless the property is in a locked/covered luggage area, and there is evidence of forced entry which has been verified by a Police

- Report;
- 11.7. Any loss from motor vehicles left unattended at any time between the hours of 10:00 p.m. and 8:00 a.m.;
  - 11.8. Loss, damage or theft of valuables and money packed in suitcases or other receptacles while travelling.
  - 11.9. Property not covered by this Insurance:
    - 11.9.1. Unset precious stones, contact or corneal lenses, spectacles or accessories;
    - 11.9.2. Stamps, documents, deeds, manuscripts or securities of any kind;
    - 11.9.3. Items of a perishable nature;
    - 11.9.4. Business goods, samples, tools of trade or motor accessories;
    - 11.9.5. Household goods and home contents.
  - 11.10. The Insurers shall not be liable for:
    - 11.10.1. Loss or damage caused by decay, wear and tear, moth, vermin, or atmospheric conditions'
    - 11.10.2. Deterioration or mechanical derangement of any kind;
    - 11.10.3. Damage to suitcases;
    - 11.10.4. Loss due to confiscation or detention by Customs or other authority;
    - 11.10.5. Damage to sports equipment whilst in use or losses of jewelry whilst swimming (other than wedding rings);
    - 11.10.6. Breakage of or damage to fragile articles and any consequence thereof.
  - 11.11. In the event of a claim in respect of a pair or set of articles the Insurers shall only be liable in respect of the value of that part of the pair or set which is lost, stolen or damaged.
  - 11.12. Claims will not be considered unless proof of ownership and evidence of value is provided.
  - 11.13. Any amount paid for temporary loss of baggage will be deducted from the final claim settlement if baggage proves to be permanently lost.
  - 11.14. Proof of a missing bag report must be filed with the common carrier.
  - 11.15. Excess: The first \$50 of each and every claim per Plan Participant is excluded (other than in respect of temporary loss).
  - 11.16. Any amount paid by a common carrier in settlement toward the loss will be deducted from the final claim.

## 12. Loss of Passport:

To pay up to \$250 in respect of reasonable additional travel and accommodation expenses necessarily incurred abroad in obtaining the replacement of his/her lost or stolen passport.

## 13. Travel Delay:

Coverage to the Plan Participant if the departure of the coach, aircraft or sea vessel in which he/she had arranged to travel on the first outward or first return leg of the journey is delayed for at least 12 hours from the time specified in the travel itinerary due to strike, industrial action, bankruptcy, or mechanical breakdown of the coach, aircraft or sea vessel. Compensation shall be documented and provided for all necessary and reasonable expenses subject to accommodations, food and local transportation minus any compensation paid by the common carrier.

- 13.1. An amount up to a daily maximum of \$200 for the first complete 12 hour period of delay in departure commencing from the original booked departure time as specified in the travel itinerary and \$200 after each subsequent 24 hour period of delay up to a maximum of \$1,000 each Plan Participant. All claims MUST BE ACCOMPANIED by original receipts and will only reimburse for meals, lodging, and incidental expenses (not to exceed \$25 per day).
- 13.2. Conditions & Exclusions: The Insurer shall not be liable for claims:
  - 13.2.1. Arising from strike or industrial action existing or publicly declared at the time of effecting this Insurance;
  - 13.2.2. Arising from technical reasons such as aircraft commitment or availability;
  - 13.2.3. Where the Plan Participant has not checked in according to the itinerary supplied and has failed to obtain written confirmation from the carrier (or their handling agents) of the period of or reason for the delay;

- 13.2.4. Arising directly or indirectly from withdrawal from service (temporary or otherwise) of a coach, an aircraft or sea vessel on the recommendation of a Port Authority or the Civil Aviation Authority or of any similar body.
- 13.2.5. **Definition:** Strike or industrial action shall mean any form of industrial action taken by employees, carried on with the intention of preventing, restricting or otherwise interfering with the production of goods or the provision of services.

**14. Missed Departure:**

To pay up to specified limit to each Plan Participant in respect of reasonable additional accommodation (room only) and travel expenses necessarily incurred to reach the overseas destination as a consequence of; strike, riot, mechanical breakdown or inclement weather, causing interruption of scheduled public transport services (on the outward journey only); or accidental or mechanical failure involving the car in which the Plan Participant is travelling (provided it has been properly serviced) causing him/her to arrive at the international point of departure from the point of origin to commence the booked journey.

**15. Legal Expenses:**

Legal costs and expenses incurred by the Plan Participant up to a specified maximum in pursuit of compensation and/or damages against a third party arising from or out of the death or personal injury of the Plan Participant occurring during the Period of Insurance.

**15.1. Exclusions:** The Insurer shall not be liable for:

- 15.1.1. Costs incurred in pursuance of any claim against a Travel Agent, Tour Operator, Carrier, Accommodation provider, the Insurer or Insurers Agent or any other person insured under the same certificate.
- 15.1.2. Legal expenses incurred prior to the granting of support by the Insurer.
- 15.1.3. Any claims reported more than 90 days after the commencement of the incident, giving rise to such claim.
- 15.1.4. Any claim where the law, practices, and/or financial regulations of the country in which the proposed action will take place indicate that the costs of such action are likely to be unreasonably greater than the anticipated value of the compensation award.
- 15.1.5. Costs incurred in pursuance of a claim against any person with whom the Plan Participant had arranged to travel.
- 15.1.6. Any claim wherein the Insurer's opinion there is insufficient prospect of success in obtaining a reasonable benefit.
- 15.1.7. The Insurer shall not be liable for any claim where legal costs and expenses are based directly or indirectly on the amount of an award.
- 15.1.8. The insurance will not extend to covering the Plan Participant in the pursuit of any appeal except at the insurers sole discretion.
- 15.1.9. Where there is a possibility of a claim being brought in more than one country the Insurers shall not be liable for the cost if an action is brought in more than one country.
- 15.2. Conditions
- 15.2.1. The Insurers shall have complete control over the legal proceedings and the appointment and control of a lawyer.
- 15.2.2. The Plan Participant must follow the legal representative's advice and provide any and all information and assistance as required. Failure to do so will entitle the Insurer to withdraw cover.
- 15.2.3. The Plan Participant must have access to any and all of the legal representatives' file of papers.
- 15.2.4. Failure by the Plan Participant to comply with all or any of these conditions will entitle the Insurer to render the legal expenses aspect of this certificate void and thereby withdraw cover.

## GENERAL EXCLUSIONS

Unless specified in the Benefits Schedule, in any written endorsement, or agreed by Company in writing, no claim can be made for compensation or payment for damage or expenses caused by or as a result of the following:

1. Pre-Existing Conditions. Medical Expenses for a Pre-existing, Chronic, or Recurrent Medical Conditions that were being treated immediately prior to or whose onset was diagnosed or predicted or could have been avoided prior to travel and any claim arising in the course of travel undertaken against medical advice or where medical advice has been disregarded and inclusive of:
  - a. Any illness, resulting in hospitalization within the previous 2 years prior to the Plan Participant beginning travel, or
  - b. Has been under a doctor's care for a condition that may result in deterioration of the Plan Participant or a diagnosis being changed as a result of testing for a known situation, or
  - c. Any changes in prescription drugs, therapies or diet that are a result of a previously known condition that can effect unexpectedly degrade or alter the Plan Participant, or
  - d. A person with a terminal condition who either with or without medical approval chooses to travel and becomes ill as a direct consequence of that illness or the onset of a complication due to that illness.
2. Any form of treatment or surgery which in the opinion of the Doctor(s) in attendance and GBG Assist can be delayed until your return to your home country.
3. Treatment for an unknown medical condition that does not result in a diagnosis. A review of such claims will be at the discretion of the insurer whose decisions are final.
4. Preventative treatments of any kind included but not limited to examinations, reviews, and consultancies.
5. Treatment of Acne/Pimples unless it is related to an allergic reaction.
6. Treatment for Sexually Transmitted Diseases including AIDS and HIV infections.
7. Treatment for sterility of any kind including initial diagnosis and fertility complications.
8. All costs for medical examinations, or diagnostic examinations that are part of routine physical examination or health checks, including vaccination, expenses for glasses, contact lenses, hearing-aids, prosthesis, artificial limbs, etc.
9. In respect of Accidental Damage to Natural Teeth, no benefit is payable for injury caused by eating or drinking (even if it contains a foreign body), normal wear and tear, tooth brushing or any other oral hygiene procedure or any means other than extra-oral impact, any form of restorative or remedial work, the use of precious metals, orthodontic treatment of any kind or dental treatment performed in a hospital unless dental surgery is the only treatment available to alleviate pain.
10. Suicide or attempted suicide, intentional self-injury, the effect of intoxicating liquors or drugs;
11. Treatment as a result of sunburns or artificial tanning devices in which the Plan Participant did not take prudent measures to protect the skin from damage.
12. Evacuation costs where the Plan Participant is not being admitted to a Hospital for Treatment or where costs have not been approved by Company prior to travel commencing;
13. Any costs arising after expiry of the current effective Policy Period unless the Plan Participant was being treated during the Policy Period as a result of an accident.
14. Any expenses incurred after you have returned to your home country.
15. Medical Expenses in excess of a limit stated in the Benefits Schedule.
16. The amount of the Policy Excess, Deductible or Co-Payment, as stated on the Certificate of Insurance.
17. Any cost resulting in an illness, Injury or death from the misuse of drugs or being under the influence or effect of alcohol (other than a legally prescribed medication by a licensed medical professional) regardless of blood and toxicity levels.
18. Needless self-exposure to peril except in an attempt to save human life.
19. Intentional or fraudulent acts on the part of the Plan Participant or their consequences.
20. Trips specifically made for the purpose of obtaining medical treatment.
21. Cosmetic surgery or remedial surgery, removal of fat or other surplus body tissue and any consequences of such Treatment, whether or not for psychological purposes, unless required as a direct result of an accident which occurs during the Period of Insurance.
22. Treatment for alcoholism, narcotics, drug and substance abuse/dependency or any addictive condition of any kind and any injury or illness arising from the Plan Participant being under the influence of alcohol, drugs or any other intoxicating substance.

23. Pregnancy, childbirth whether normal or complicated, including the transfer of a pregnant woman to hospital to give routine childbirth or air travel when the Plan Participant is more than 20 weeks pregnant and was NOT a result of an accident or onset of complications relating from an accident.
24. Use of any type of firearm(s) (Defined as any device that discharges a projectile of any type).
25. Any expenses relating to *search and rescue* operations to find a Plan Participant in mountains, at sea, in the desert, in the jungle and similar remote locations including air/sea rescue charges for evacuation to shore from a vessel or from the sea.
26. Charges or fees incurred for the completion and or translation of Medical Claim Forms.
27. Expeditions, and mountaineering and or trekking above 3,500M or 11,500 ft. is considered extreme sport and not covered, included and not limited to expeditions to Mt Everest, K2, Kilimanjaro, Antarctica, The Arctic, North Pole and Greenland.
28. Travel to Cuba, North Korea or any location that is known to be in armed military conflict.
29. Accidents and Injuries as a result of Motorcycles, Mopeds, Scooters, ATV's any two or three wheeled motorized vehicle and or sport watercraft such as wave runners, jet skis or other powered devices whether the vehicle is in motion or not.
30. Any expenses including medical for accidents related to the use of a motor vehicle caused by the Plan Participant unless they are carrying a legally issued driver's license and insurance from the country in which they are participating as a student or au pair.
31. War Insurrection and Terrorism: The Insurer shall not be liable for:
  - A. Ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or the radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;
  - B. Notwithstanding any provision to the contrary within this insurance, or any endorsement thereto, it is agreed that this insurance excludes any loss or expense of whatsoever nature directly or indirectly arising out of, contributed to, caused by, resulting from, or in connection with any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the loss or expense;
  - C. War, hostilities or warlike operations (whether war be declared or not);
  - D. Invasion, Act of an enemy foreign to the nationality of the Plan Participant or the country in, or over, which the act occurs, Civil war, Riot, Rebellion, Insurrection, Revolution, Overthrow of the legally constituted government, Civil commotion assuming the proportions of, or amounting to, an uprising, Military or usurped power, Explosions of war weapons, Utilization of Nuclear, Chemical or Biological weapons of mass destruction howsoever these may be distributed or combined, Murder or Assault subsequently proved beyond reasonable doubt to have been the act of agents of a state Foreign to the nationality of the Plan Participant, Terrorist activity.

## Definitions

Please note certain words used in this document have specific meanings.

1. **"Accident"** means a sudden, unexpected and unintended event where the Plan Participant has sustained bodily injury caused by accidental, external, violent and visible means which shall solely and independently of any other cause.
2. **"Acute / Medical Conditions"** means a sudden and unexpected illness occurring after you have started your trip abroad. In order for an illness to be covered it must be unexpected and non-preexisting and stable for the last 12 months prior to departure and if left untreated could cause deterioration in a Plan Participants condition.
3. **"Automobile"** means a self-propelled, private passenger motor vehicle with four or more wheels that is a type both designed and required to be licensed for use on the highway of any state or country. Automobile includes, but is not limited to, a sedan, station wagon, sport utility vehicle, or a motor vehicle of the pickup, van, camper, or motor-home type. Automobile does not include a mobile home or any motor vehicle that is used in mass or public transit.
4. **"Covered Accident"** means an Accident that occurs while coverage is in force for a Plan Participant and results in a loss or Injury covered by the Policy for which benefits are payable.
5. **"Covered Expenses"** means expenses actually incurred by or on behalf of a Plan Participant for treatment, services and supplies covered by the Policy. Coverage under the 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.

6. **“Covered Loss” or “Covered Losses”** means an accidental death, dismemberment or other Injury covered under the Policy.
7. **“Covered Trip”** means a period of round-trip travel away from the Plan Participant’s Home Country; the trip has defined departure and return dates specified when the Plan Participant enrolls.
8. **“Deductible”** means the dollar amount of Covered Expenses that must be incurred as an out-of-pocket expense by each Plan Participant on a per Policy Term basis before Medical Expense Benefits and/or other Additional Benefits paid on an expense incurred basis are payable under the Policy.
9. **“Diagnosis”** – The result of examination or test by a medical doctor or licensed physician providing a specific international CPT or ICD9 code.
10. **“Doctor”** means a licensed health care provider acting within the scope of his or her license and rendering care or treatment to a Plan Participant that is appropriate for the conditions and locality. It will not include a Plan Participant or a member of the Plan Participant’s Immediate Family or household.
11. **“Emergency Care”**: see Medical Emergency.
12. **“Event”**: Any one incident in which the Plan Participant requires care for acute, sudden and unforeseen Medical and Accidental Emergencies and the direct consequence of the event. Maximum coverage is limited to amounts specified in the Schedule of Benefits. Multiple events independent of each other are covered to the event maximum with no limits on the number of events.
13. **“Home Country”** means a country from which the Plan Participant holds a passport. If the Plan Participant holds passports from more than one country, his or her Home Country will be that country which the Plan Participant has declared to Us in writing as his or her Home Country.
14. **“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.
15. **“Hospital Stay/Confined”** means an overnight stay as a registered resident bed-patient in a Hospital.
16. **“Injury”** means accidental bodily harm sustained by a Plan Participant 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/event.
17. **“Insurer”** means GBG Insurance Ltd, and its reinsurers and affiliates.
18. **“Medical Emergency”** means a condition caused by an Injury or Sickness that manifests itself by symptoms of sufficient severity that a prudent layperson 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.
19. **“Medically Necessary”** means a treatment, service or supply that is: 1. required to treat an Injury or Sickness; prescribed or ordered by a Doctor or furnished by a Hospital; 2. performed in the least costly setting required by the Plan Participant’s condition (usual, reasonable and customary); and 3. Consistent with the medical and surgical practices prevailing in the area for treatment of the condition at the time rendered.
20. **“Missing Bag Report”** means a formal report of loss as filed with the common carrier commonly known as a PIR (Passenger Irregularity Report) or PAWOB (Passenger arriving without baggage). This must include the 6 digit “CLAIM NUMBER” or the “World Tracer Record Number” as provided by the carrier.
21. **“Missing Person”** means a Plan Participant who disappeared for an unknown reason and whose disappearance was reported to the Appropriate Authorities.
22. **“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 Plan Participant’s Trip occurs and the area is deemed to be uninhabitable or dangerous.
23. **“Non-Emergency/Non-Emergent Care”** – A condition in which a prudent person recognizes that a change in their health has taken place via on-set of illness or accident but is not considered an Emergency Medical event but feels a medical intervention would be the proper course of action.
24. **“Necessities”** means personal hygiene items and clothing.

25. **"Plan Participant"** means a person eligible for coverage as identified in the application form, a Non-United States Citizen traveling outside their Home Country and has his/her true, fixed and permanent home and principal establishment outside of the United States and holds a current and valid passport, and for whom proper Premium payment has been made when due, and who is therefore a Plan Participant under the Policy
26. **"Policy Period"** means the dates as shown on your certificate for which premium has been paid;
27. **"Pre Departure Period of Insurance"** means the time period from the day after purchase until the scheduled departure date.
28. **"Pre-Existing Condition"** means Medical Expenses for a Pre-existing, Chronic, or Recurrent Medical Conditions that were being treated immediately prior to or whose onset was diagnosed or predicted or could have been avoided prior to travel and any claim arising in the course of travel undertaken against medical advice or where medical advice has been disregarded. See exclusion 1 for details.
29. **"Related Costs"** means food, lodging and, if necessary, physical protection for the Plan Participant during the Transport to the Nearest Place of Safety.
30. **"Sickness"** means an illness, disease or condition of the Plan Participant that causes a loss for which a Plan Participant 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.
31. **"Strike or industrial action"** means any form of industrial action taken by employees, which is carried on with the intention of preventing, restricting or otherwise interfering with the production of goods or the provision of
32. **"Traveling Companion"** means a person or persons with whom you have coordinated travel arrangements, shares the same accommodations as You and intend to travel with during the Trip.
33. **"Trip"** means travel by air, land, or sea from the Plan Participant's Home Country.
34. **"Unexpected Recurrence of a Pre-Existing Condition"** means a sudden and unexpected recurrence of a Pre-existing Condition while outside the Plan Participant's Home Country and does not include coverage for known, scheduled, required, or expected medical care, drugs or treatments existent or necessary prior to the Effective Date of coverage.
35. **"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.
36. **"Valuables/Electronics"** means cellular phones, satellite phones, photographic equipment, tablet PC's, computers, iPods, CD players and personal music and stereo equipment, CD's, computers, computer games and associated equipment, hearing aids, telescopes and binoculars, antiques, jewelry, watches, furs, and articles made of or containing gold, silver or other precious metals or animal skins or hides. Any item of value to be evaluated on a case by case basis.
37. **"We", "Insurer", "Our", "Us"** means GBG Insurance Limited and or its affiliated insurers.

## Subscription Agreement

I hereby apply to be a Plan Participant of the International Benefit Trust established in the Cayman Islands (the "trust") and to participate in the insurance coverage extended by GBG Insurance Limited (the "insurers") to Plan Participants under the trust (the "coverage"). I understand that the coverage is not a general health insurance product, but is intended for use in the event of a sudden and unexpected event while traveling outside my Home Country. I understand that the coverage extended to me will terminate upon my return to my Home Country unless I qualify for a benefit period or Home Country coverage. I understand that I may obtain full details of the coverage by requesting a copy of the master policy from the plan manager. I understand that the liability of the insurers as underwriters of the coverage is as provided in the master policy.

By acceptance of coverage and/or submission of any claim for benefits, the Plan Participant ratifies the authority of the signer to so act and bind the Plan Participant.

The Plan Participant undertakes to make all premium payments as they fall due in respect of the coverage extended to them. The trustee shall not be responsible for the administration of such payments.

If the Plan Participant fails to make any premium payment due in respect of the coverage extended to them, subject to the discretion of the insurance company, such coverage will lapse.

The Plan Participant hereby confirms the accuracy of all information validity of all representations and warranties provided to the trustee in connection with its participation in the plan and/or the subscription for the insurance



coverage, howsoever provided, including the terms of this subscription agreement,(together "representations & warranties"). The Plan Participant acknowledges that certain of such information will be relied upon by the insurers as providers of the coverage and that any inaccuracy therein may result in the invalidity of such coverage as it relates to the Plan Participant, the loss of coverage and all monies paid in relation thereto. The Plan Participant hereby undertakes to inform the trustee of any change to any of matter that forms the subject of any of the representation & warranties. The Plan Participant hereby undertakes to indemnify and hold harmless the trustee against any loss or damage (including attorney's fees) occasioned by any inaccuracy in any representation & warranty or failure to advise the trustee of any change in any matter that forms the subject of any of the representation & warranties. The Plan Participant agrees that the trustee shall be entitled to rely on and to act in accordance with any written instruction purported to be provided by the Plan Participant and the Plan Participant hereby undertakes to indemnify and hold harmless the trustee against any loss or damage (including attorney's fees) occasioned by the trustee acting in accordance with any such instruction.

Payments under the terms of the coverage shall be paid by the insurers to the Plan Participant or directly to a provider if assignment of benefits has been authorized. The trustee shall not be responsible for the administration of such payments.

I confirm that I have satisfied myself that the coverage is appropriate for me and that I meet the eligibility criteria.

**This policy is underwritten by:**



**GBG Insurance Limited**

27422 Portola Parkway, Suite 110 • Foothill Ranch, CA 92610 USA

Phone: 949-470-2100 • Fax: 949-470-2110

Email: [info@gbg.com](mailto:info@gbg.com) • [www.gbg.com](http://www.gbg.com)