



Group Travel Insurance Scholastic Program  
**UnitedHealthcare Global Welcome Guide**  
University of Oklahoma

# 24/7 Access to Assistance

If you need assistance, contact the Emergency Response Center (ERC), which is available 24/7. A multilingual case manager will ask for the following information, which will help us to immediately begin assisting you:

- Your school and campus
- The number shown on the front of your ID card
- A description of the situation
- A phone number to reach you

## Phone/Email:

### Emergency Response Center (ERC)

Available 24/7

(p) 1.800.527.0218 or 1.410.453.6330

(e) [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)  
(The mailbox is monitored 24/7)



# UnitedHealthcare Global – ID Card

When traveling, you can now feel confident that you are in safe hands if an emergency arises. As part of your group travel protection plan, UnitedHealthcare Global provides you with medical and travel-related assistance services. Listed on your ID card is the telephone number for the worldwide UnitedHealthcare Global Emergency Response Center. When you call, we will ask for the information shown on your ID card, and a description of your situation. You should carry your UnitedHealthcare Global ID card with you at all times.

## Insurance Benefits (Coverage underwritten by different companies that are not related to the UnitedHealthcare family of companies.)

### Travel Medical Insurance Benefits

- Medical coverage up to maximum amount selected at purchase
- Emergency medical evacuation and repatriation
- Transportation to join a hospitalized member
- Return of minor children
- Return of mortal remains

## Assistance Services (These non-insurance services are provided by UnitedHealthcare Global)

### Medical Assistance Services

- Worldwide medical and dental referrals
- Monitoring of treatment
- Facilitation of hospital payments
- Relay of insurance and medical information
- Medication and vaccine transfers
- Updates to family & home physician
- Hotel arrangements
- Replacement corrective lenses & medical devices

### Travel Assistance Services

- Language translation facilitation and referral
- Emergency travel arrangements
- Transfer of funds
- Support for replacement of lost or stolen travel documents
- Legal referrals
- Message transmittals

### Worldwide Destination Intelligence

- Destination Profiles | Contact the Emergency Response Center to request a Destination Profile of health and security risks for pre-trip planning.

## How to use UnitedHealthcare Global's services

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

If you have a medical or travel issue, contact us for assistance. Simply call the Emergency Response Center (ERC) at +1.410.453.6330 or email us at: [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)

If the condition is an emergency, you should go immediately to the nearest physician or hospital without delay and then contact UnitedHealthcare Global's 24-hour Emergency Response Center. We'll then take the appropriate action to assist you and monitor your care until the situation is resolved.

Please cut your ID card along the dotted line and fold in the center.



**Client:** University of Oklahoma  
**UHCG ID#:** 902604264  
**Valid:** 12/15/2021 12/14/2022

**Notice to Physicians/Hospitals: Call immediately for benefits verification and procedures – completed claim form required.**

Call 24 hours a day (multilingual). If you don't have access to a phone, email for assistance: [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)

Underwritten by U.S. Fire Insurance Company / Claims administered by Co-ordinated Benefit Plans, LLC. Please refer to your policy document for coverage and terms.

**UnitedHealthcare Global Emergency Response Center**  
24 hours a day, 7 days a week, 365 days a year

United States +1.410.453.6330  
**Assistance@uhcglobal.com**  
**1.800.527.0218** (toll free within U.S. & Canada)

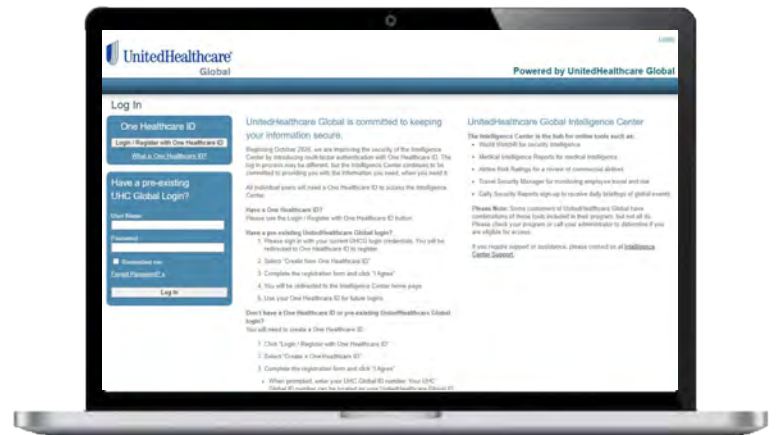
If the condition is an emergency, you should immediately call local emergency services or go to the nearest physician or hospital without delay. Then contact the 24-hour Emergency Response Center. If you have a travel problem, simply call or email for assistance. Carrier charges may be incurred. The Emergency Response Center can obtain a call back number to minimize telecom charges to you.

A multilingual case manager will ask for your name, your organization's name, the number shown on the front of your ID card, and a description of the situation. We will immediately begin assisting you.

# How to: Create an Intelligence Center Account

Log on to the UnitedHealthcare Global Intelligence Center to access medical, security and travel tools providing information on your country of destination. Depending on your program, you may have access to Medical Intelligence Reports, World Watch, Travel Security Manager, Airline Risk Ratings, Daily Security Alerts, or Pre-Travel Planning.\* Create a One Healthcare ID to get started.

- 1 Navigate to [members.uhcglobal.com](https://members.uhcglobal.com)
- 2 Click “Login / Register with One Healthcare ID”
- 3 On the One Healthcare ID login screen, click “Create One Healthcare ID.”
- 4 Complete the One Healthcare ID registration page, click “I Agree.”



First Name, Last Name, Year of Birth, UHC Global ID Number, Email Address, and Password.

- 5 Enter the UHC Global ID number.  
The UHC Global ID number is located on the front of your UnitedHealthcare Global ID Card.



## What is One Healthcare ID?

One Healthcare ID delivers a secure, centralized identity management solution that enables a single sign-on to all integrated applications.

\*Some customers of UnitedHealthcare Global have combinations of these tools included in their program, but not all do.

Please check your program or call your administrator to determine if you are eligible for access.

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# Frequently Asked Questions (FAQs)

## How long am I covered?

**A:** The plan covers you for the period of international travel required by your academic institution and for which you are participating. Travel necessary for the program, including a certain number of days before and after your official dates of study, may be included. Check the specifics of your policy.

## What if I lose my ID card?

**A:** Please contact your program administrator to request a copy of your ID card. If you have an emergency, please proceed to the nearest facility for treatment and call the UnitedHealthcare Global Emergency Response Center at +1.410.453.6330. A copy of your ID card is on file internally and can be accessed by the Emergency Response Center. Please identify yourself as a faculty/staff member or student from and the name of the college/university to which you are associated.

## What is covered by the plan?

**A:** Reasonable expenses, as the result of an accident or sickness, for medically necessary physician office visits, inpatient hospital services, physician and hospital outpatient services, emergency hospital services, and medical evacuation and repatriation. Additional benefits may be available for AD&D and non-medical evacuations due to security or natural disaster occurrences. Check the details of your policy for specific coverage maximums as well as any applicable limitations or exclusions. Please note that evacuation services must be approved and coordinated by UnitedHealthcare Global.

## How do I find a covered provider/make an appointment?

**A:** Contact UnitedHealthcare Global's Emergency Response Center to schedule an appointment for you and arrange for direct payment to one of their doctors. The UnitedHealthcare Global Emergency Response Center is available 24/7 by phone at +1.410.453.6330 or e-mail at [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com) to assist you with everything from routine requests to medical emergencies.

If you make your own appointment, contact the Emergency Response Center at least 24 hours prior to your appointment so UnitedHealthcare Global can provide the doctor's office with a "guarantee of payment" (if possible). In many countries providers require this at the time of the visit. If this is not arranged prior to the visit, the doctor may require payment up front from you.

## What if I need a follow-up appointment?

**A:** If the physician recommends a follow-up consultation, please provide this information to the UnitedHealthcare Global Emergency Response Center in order to coordinate this appointment and arrange payment. To request these services, contact the Emergency Response Center by phone at +1-410.453.6330 or e-mail at [assistance@uhcglobal.com](mailto:assistance@uhcglobal.com).

## **Program Description**



## GROUP TRAVEL INSURANCE

For U.S. Residents Traveling Outside the United States

Your Group Travel Insurance program provides you with international travel assistance services and travel medical insurance.

- Travel assistance services are provided by United Healthcare Global (UHCG).

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

### Emergency Assistance Services provided by UnitedHealthcare Global

Travel Assistance Services  
Destination Intelligence

### Travel Insurance Features

Trip Interruption	\$1,000
Trip Delay	\$1,500
Accidental Death & Dismemberment	\$10,000
Accident & Sickness Medical Expense	\$250,000
Dental	\$500
Political or Security and Natural Disaster Evacuation	\$100,000
Medical Evacuation	\$500,000
Repatriation of Remains	Included
Transportation of Children/Child	Included
Transportation to Join the Insured	Included

### HOW TO USE UNITEDHEALTHCARE GLOBAL SERVICES

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

If you have a medical or travel problem, simply call us for assistance. Our telephone numbers are printed on your ID card. Either call the toll-free or direct number or email at:

1-800-527-0218 (toll free within the United States and Canada)  
Columbia, Maryland +1-410-453-6330

[Assistance@uhcglobal.com](mailto:Assistance@uhcglobal.com)

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

### Payments arranged by UHCG:

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

### Payments made by You:

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

**UnitedHealthcare Global Claim Administrator**

P.O. Box 20874

Tampa, FL 33622

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

Email Address: [Travelteam@cbpinsure.com](mailto:Travelteam@cbpinsure.com)

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

## WORLDWIDE EMERGENCY ASSISTANCE SERVICES

These non-insurance services are provided by UnitedHealthcare Global.

### MEDICAL ASSISTANCE SERVICES

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

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

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

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

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

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

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

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

### TRAVEL ASSISTANCE SERVICES

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

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

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

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

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

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

### WORLDWIDE DESTINATION INTELLIGENCE

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



**TRAVEL PROTECTION INSURANCE POLICY**

**University of Oklahoma**

This Policy describes the group travel insurance benefits underwritten by United States Fire Insurance Company, herein referred to as the "Company" or as "We", "Us" and "Our".

**PLEASE READ THIS DOCUMENT CAREFULLY FOR FULL DETAILS**

This Policy is a legal contract issued in consideration of the signed Master Application of the Policyholder, a copy of which is attached.

**Signed for United States Fire Insurance Company By:**



Marc J. Adee  
Chairman and CEO



James Kraus  
Secretary

## TABLE OF CONTENTS

	<b>SCHEDULE OF BENEFITS</b>
<b>SECTION I</b>	<b>COVERAGE PROVISIONS</b>
<b>SECTION II</b>	<b>WHEN COVERAGE BEGINS AND ENDS</b>
<b>SECTION III</b>	<b>EXTENSION OF COVERAGE</b>
<b>SECTION IV</b>	<b>TRAVEL ARRANGEMENT PROTECTION</b>
<b>SECTION V</b>	<b>TRAVEL INSURANCE BENEFITS</b>
<b>SECTION VI</b>	<b>ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS</b>
<b>SECTION VII</b>	<b>GENERAL DEFINITIONS</b>
<b>SECTION VIII</b>	<b>EXCLUSIONS AND LIMITATIONS</b>
<b>SECTION IX</b>	<b>CLAIMS PROCEDURES</b>
<b>SECTION X</b>	<b>HOW TO FILE A CLAIM</b>
<b>SECTION XI</b>	<b>GENERAL PROVISIONS</b>

## SCHEDULE OF BENEFITS

<b>Travel Arrangement Protection Benefit(s)</b>	<b>Maximum Benefit Amount</b>
Trip Interruption	up to \$1,000 per person
Trip Delay - 12 hours	up to \$150 per day per person to a maximum of \$1,500
Political or Security Evacuation and Natural Disaster Evacuation	up to \$100,000 per person per occurrence per Policy term
Medical Evacuation and Repatriation of Remains Emergency Medical Evacuation Repatriation of Remains Transportation of Children/Child Transportation to Join The Insured	up to \$500,000 included included Included included
<b>Travel Insurance Benefit(s)</b>	<b>Maximum Benefit Amount</b>
Accident & Sickness Medical Expense Dental Expense sublimit	up to \$250,000 up to \$500
<b>Accidental Death and Dismemberment Benefit(s)</b>	<b>Maximum Benefit Amount</b>
Accidental Death and Dismemberment Exposure Disappearance	\$10,000 Included Included

## SECTION I COVERAGE PROVISIONS

### Who Is Eligible For Coverage

A person who is booked to travel on a Trip. Coverage is only available for persons who are a citizen or resident of the United States of America.

## SECTION II WHEN COVERAGE BEGINS AND ENDS

### When Coverage Begins:

#### This is the Insured's Effective Date and time for Trip Interruption:

Coverage begins when the Insured departs on his/her first scheduled Travel Arrangement (or if the Insured must use an alternate Travel Arrangement after his/her Scheduled Departure Date to reach the Insured's Scheduled Destination, on the Scheduled Departure Date) for the Insured's Trip.

**This is the Insured's Effective Date and time for Trip Delay:** Coverage begins when the Insured departs on his/her first scheduled Travel Arrangement (or if the Insured must use an alternate travel arrangement after the Scheduled Departure Date to reach the Scheduled Destination, on the Scheduled Departure Date) for the Insured's Trip. Coverage is in force while en route to and from the Covered Trip.

**This is the Insured's Effective Date and time for All Other Coverages:** Coverage begins on the date and time the Insured departs on the first Travel Arrangement (or alternate travel arrangement if the Insured must use an alternate Travel Arrangement to reach the Scheduled Destination) for his/her Trip.

### When Coverage Ends:

**All Coverages:** The Insured's coverage automatically ends on the earlier/est of:

1. the date the Insured completes his/her Trip;
2. the Scheduled Return Date;
3. The Insured arrival at his/her Return Destination on a round Trip, or the Insured's Scheduled Destination on a one-way Trip;
4. cancellation of the Insured's Trip covered by this Policy.

## SECTION III EXTENSION OF COVERAGE

### Automatic Extension of Coverage

All coverages will be extended if the Insured's entire Trip is covered by this Policy and the Insured's return is delayed due to unavoidable circumstances beyond the Insured's control. This extension of coverage will end on the earlier of the date the Insured reaches his/her originally scheduled Return Destination or 10 days after the originally Scheduled Return Date.

## SECTION IV TRAVEL ARRANGEMENT PROTECTION

### TRIP INTERRUPTION

If the Insured must start their Trip late or are unable to complete their Trip, We will reimburse the Insured up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the unused, forfeited, prepaid non-refundable Payments or Deposits paid to the Travel Supplier for the Travel Arrangements the Insured purchased for their Trip plus the Additional Transportation Cost paid to either:

- a) join the Insured's Trip if the Insured must depart after the Scheduled Departure Date or travel via alternate travel arrangements; or
- b) rejoin the Insured's Trip, from the point where the Insured interrupted their Trip to the next Scheduled Destination; or
- c) transport the Insured to their originally scheduled Return Destination of their Trip,

Trip Interruption must occur while coverage is in effect for the Insured due to any of the following covered Unforeseen reasons, as defined:

1. the Insured's or a Family Member's death, which occurs while the Insured is on their Trip;
2. the Insured's or a Family Member's Sickness or Injury that:
  - a) occurs while the Insured is on their Trip,
  - b) is examined and treated by a Physician prior to the time of interruption; and
  - c) as certified by a Physician, results in medical restrictions so disabling as to prevent the Insured's continued participation on their Trip.
3. the Insured must interrupt their Trip due to Other Covered Events as defined, provided such circumstances occur while coverage is in effect:

**Other Covered Events** means:

1. the Insured's Primary Residence is made Uninhabitable and remains Uninhabitable during their Trip by a Natural Disaster, vandalism or burglary.

Coverage for a hurricane applies only if insurance was purchased prior to the tropical storm first being upgraded to a hurricane. Claims are not payable if a hurricane is foreseeable prior the Insured's Effective Date for Trip Interruption. A hurricane is foreseeable on the date it becomes a named storm. We will only pay the benefits for losses occurring within 30 days after the event renders the Insured's Scheduled Destination Uninhabitable or inaccessible.

In no event shall the amount reimbursed for Trip Interruption exceed the lesser of the amount the Insured prepaid for their Trip or the Maximum Benefit Amount shown in the Schedule of Benefits.

These benefit(s) will not duplicate any other benefits payable under the policy or any coverage(s) attached to the policy.

**TRIP DELAY**

We will reimburse the Insured, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the Reasonable Expenses, the Insured incurs, if the Insured is delayed for 12 consecutive hours or more while en route to or from, or during the course of their Trip until travel becomes possible, for one of the covered Unforeseen reasons:

1. the Insured is not directly involved in and are delayed due to a traffic accident, while en route to their Scheduled Destination or Return Destination. The traffic accident must be substantiated by a police report;
2. Common Carrier delay (the delay must be documented by the Common Carrier);
3. a theft or loss of passports or travel documents or visas specifically required for the Insured's Trip substantiated by a police report or the copy of the request for a new passport, or travel documents or visas;
4. the Insured is hijacked or Quarantined;
5. An unannounced Strike resulting in a complete cessation of services which prevents the Insured from reaching their Scheduled Destination or Return Destination;
6. Inclement Weather that causes a delay which prevents the Insured from reaching their Scheduled Trip Departure City.

These benefit(s) will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

**POLITICAL OR SECURITY EVACUATION**

We will pay, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for all reasonable Political or Security Evacuation expenses and Related Costs incurred for the Insured's transportation, if the Insured must interrupt their Trip for a covered Political or Security Event and while traveling outside the Insured's Home Country.

The Political or Security Evacuation must occur within 14 days of the Political or Security Event, and the arrangements will be by the most appropriate and by most efficient, practical and economical means available and consistent with the Insured's health and safety.

Following the Political or Security Evacuation and when safety allows, We will pay for one-way economy transportation and Related Costs to return the Insured to one of the following locations as chosen by the Insured



- a. back to the Insured's Home Country;
- b. to the Nearest Place of Safety necessary to ensure the Insured's safety and well-being as determined by Us or Our designated Travel Assistance Services Provider.

## **POLITICAL OR SECURITY EVACUATION COVERAGE DEFINITIONS**

**Political or Security Evacuation** means the Insured's extraction from or within the Host Country due an Occurrence that results in the Insured being placed in imminent physical danger.

**Political or Security Event** means:

1. civil, military or political unrest for which a formal written recommendation from the appropriate local government authorities, or the U.S. State Department, for the Insured to leave a country is issued; or
2. the Insured being expelled or declared a persona non-grata by a country the Insured is visiting on their Trip.

## **POLITICAL OR SECURITY EVACUATION COVERAGE CONDITIONS AND LIMITATIONS**

1. The benefits and services described herein are provided to the Insured only if authorized, arranged and coordinated by Us or Our designated Travel Assistance Services Provider;
2. We or Our designated Travel Assistance Services Provider has sole discretion regarding the means, methods and timing of a Political or Security Evacuation. However, the decision to travel is the Insured's sole responsibility;
3. the Insured will be responsible for all transportation and living costs while located at the safe haven;
4. We will not pay any costs or expenses arising from:
  - a. Political or Security Evacuation from the Insured's Home Country;
  - b. Political or Security Evacuation when the Political or Security Event precedes the Insured's arrival in the Host Country;
  - c. Political or Security Evacuation when the evacuation notice has been issued or posted by the recognized government of the Insured's Home Country or the Host Country for a period of more than seven 7 days and the Insured has failed to notify Us or Our designated Travel Assistance Services Provider regarding the Insured's need to be evacuated;
  - d. the actual or threatened use or release of any nuclear, chemical or biological weapon or device, or exposure to nuclear reaction or radiation, regardless of contributory cause;
  - e. We will not pay for more than one (1) Political or Security Evacuation from a country or territory per Trip;
  - f. We will not pay for any loss or expense arising from or attributable to: a) fraudulent or criminal acts committed or attempted by the Insured; b) alleged violation of the laws of the country the Insured is visiting, unless We determine such allegations to be fraudulent; or c) failure to maintain required documents or visas;
  - g. We will not pay for any loss or expense arising from or attributable to: a) debt, insolvency, business or commercial failure; b) the repossession of any property; or c) the Insured's non-compliance with a contract, license or permit;
  - h. We will not pay for any loss or expense arising from or due to liability assumed by the Insured under any contract.

**Right of Recovery:** If, after a Political or Security Evacuation is completed, it becomes clear that the Insured was an active participant in the events that led to a Political or Security Event, We have the right to recover all transportation and Related Costs from the Insured.

These benefit(s) will not duplicate any other benefits payable under the policy or any coverage(s) attached to the Policy.

## NATURAL DISASTER EVACUATION

We will pay, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for all reasonable Natural Disaster Evacuation expenses and Related Costs incurred for the Insured's transportation, if the Insured must interrupt their Trip for a covered Natural Disaster Event and while traveling outside the Insured's Home Country.

The Natural Disaster Evacuation must occur within 14 days of the Natural Disaster Event, and the arrangements will be by the most appropriate and by most efficient, practical and economical means available and consistent with the Insured's health and safety.

Following the Natural Disaster Evacuation and when safety allows, We will pay for one-way economy transportation and Related Costs to return the Insured to one of the following locations as chosen by the Insured:

- a. back to the Insured's Home Country; or
- b. to the Nearest Place of Safety necessary to ensure the Insured's safety and well-being as determined by Us or Our designated Travel Assistance Services Provider.

### NATURAL DISASTER EVACUATION COVERAGE DEFINITIONS

**Natural Disaster Evacuation** means the Insured's extraction from or within the Host Country due to a Natural Disaster Evacuation that results in the Insured being placed in imminent physical danger.

**Natural Disaster Event** results in such severe and widespread damage that the area of damage is officially declared a disaster area by the appropriate local government authorities of the Host Country, and the area is deemed to be Uninhabitable or dangerous.

### NATURAL DISASTER EVACUATION COVERAGE CONDITIONS AND LIMITATIONS

1. The benefits and services described herein are provided to the Insured only if authorized, arranged and coordinated by Us or Our designated Travel Assistance Services Provider;
2. We or Our designated Travel Assistance Services Provider has sole discretion regarding the means, methods and timing of a Natural Disaster Evacuation. However, the decision to travel is the Insured's sole responsibility;
3. The Insured will be responsible for all transportation and living costs while located at the safe haven;
4. We will not pay any costs or expenses arising from:
  - a. Natural Disaster Evacuation from the Insured's Home Country;
  - b. Natural Disaster Evacuation when the Natural Disaster Event precedes the Insured's arrival in the Host Country;
  - c. Natural Disaster Evacuation when the evacuation notice has been issued or posted by the recognized government of the Insured's Home Country or the Host Country for a period of more than seven (7) days and the Insured has failed to notify Us or Our designated Travel Assistance Services Provider regarding the Insured's needs to be evacuated;
  - d. the actual or threatened use or release of any nuclear, chemical or biological weapon or device, or exposure to nuclear reaction or radiation, regardless of contributory cause;
  - e. We will not pay for more than one (1) Natural Disaster Evacuation from a country or territory per Trip;
  - f. We will not pay for any loss or expense arising from or attributable to: a) fraudulent or criminal acts committed or attempted by the Insured; b) alleged violation of the laws of the country the Insured is visiting, unless We determine such allegations to be fraudulent; or c) failure to maintain required documents or visas;
  - g. We will not pay for any loss or expense arising from or attributable to: a) debt, insolvency, business or commercial failure; b) the repossession of any property; or c) the Insured's non-compliance with a contract, license or permit.

**Right of Recovery:** If, after a Natural Disaster Evacuation is completed, it becomes clear that the Insured was an active participant in the events that led to a Natural Disaster Evacuation, We have the right to recover all transportation and Related Costs from the Insured.

These benefit(s) will not duplicate any other benefits payable under the policy or any coverage(s) attached to the Policy.

## MEDICAL EVACUATION AND REPATRIATION OF REMAINS

Benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, when the Insured suffers a Sickness, Injury, or Loss of life, during the Insured's Trip, for the following:

### Emergency Medical Evacuation

We will pay for the Usual and Customary transportation expenses for an Emergency Medical Evacuation, to the nearest suitable Hospital or medical facility where Medically Necessary treatment is available to treat an Unforeseen Sickness or Injury provided:

1. the local attending Physician and Our designated Travel Assistance Services Provider determine that the Insured's condition is acute, severe or life threatening; and
2. that adequate Medically Necessary treatment is not available in the Insured's immediate area.

### Repatriation of Remains

Benefits will be paid for covered Repatriation Expenses incurred, up to the Maximum Benefit Amount shown in the Schedule of Benefits, to return the Insured's body to the Insured's city of Primary Residence or the Insured's origination point or to the place of burial in the United States of America if the Insured dies during their Trip.

Repatriation Expenses means:

- a) embalming or local cremation; and
- b) associated temporary storage costs for up to 10 days, or until local authorities of the country/state in which the death occurred, will permit further transportation of the body, whichever is later; and the most economical coffin or receptacle adequate to transport the remains;
- c) the cost of transportation of the remains, by the most direct and economical conveyance and route possible, to:
  - 1) the nearest location where the body can be embalmed or cremated, if not locally available; and/or 2) the receiving funeral home or morgue, at the Return Destination, or a different place of burial within United States; and
- d) the cost for the creation and transmission of necessary documentation required to transport the body, such as a death certificate, autopsy or police report.

All Repatriation Expenses must be authorized and arranged in advance by Us or Our designated Travel Assistance Services Provider. Once the Insured's remains are claimed by the receiving funeral home or morgue, or in the event of local cremation, coverage under this benefit ends.

Transportation expenses for the Emergency Medical Evacuation must be authorized and arranged in advance in advance by Us or Our designated Travel Assistance Services Provider.

**Transportation of Children/Child:** If the Insured dies or is Hospitalized for more than 3 consecutive days following an Emergency Medical Evacuation or Injury and Sickness that occurred during their Trip, We will pay up to the cost of a single one-way economy transportation ticket, or same class as the original transportation ticket, less the value of any applied credit from any unused return travel tickets for each person, to return the Insured's Children/Child who were accompanying the Insured on the Insured's Trip (and any accompanying minor persons under the Insured's care) who are left unattended by the Insured's death or Hospitalization to their Primary Residence or to the Insured's residence in the United States, including the cost of an attendant, if considered necessary by Us or Our designated Travel Assistance Services Provider.

**Transportation to Join the Insured:** If the Insured is or will be Hospitalized for more than 3 consecutive days following an Emergency Medical Evacuation or Injury and Sickness that occurred during the Insured's Trip, We will pay, up to the cost of a single round-trip economy transportation ticket, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for Reasonable Additional Expenses for one person chosen by the Insured to visit the Insured's bedside, provided the Insured is traveling alone and Emergency Medical Evacuation is not imminent.

These benefit(s) will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

## SECTION V TRAVEL INSURANCE BENEFITS

### ACCIDENT & SICKNESS MEDICAL EXPENSE BENEFIT

Benefits will be paid for Medical Expenses incurred by the Insured, up to the Maximum Benefit Amount shown in the Schedule of Benefits, subject to the following:

- a. benefits will be payable only for Medical Expenses resulting from a Sickness that first manifests itself or an Injury that occurs while on the Insured's Trip (of a duration of 180 days or less for Sickness) and requires treatment in person by a Physician;
- b. only Medical Expenses incurred by the Insured during their Trip will be reimbursed. Medical Expenses incurred after the Insured returns from their Trip are not covered.

**Medical Expenses** means expenses incurred only for the following:

1. medical services (including charges for anesthetics, x-ray examinations or treatments, and laboratory tests) and supplies, prescription drugs, and therapeutic services ordered or prescribed by a Physician as Medically Necessary for treatment;
2. Hospital or ambulatory medical-surgical center services, including expenses for a cruise ship cabin or hotel room, not already included in the cost of the Insured's Trip, if recommended by the Insured's attending Physician and approved by Us or Our designated Travel Assistance Services Provider as a substitute for a hospital room for recovery from the Insured's Injury or Sickness;
3. emergency dental treatment incurred during the Insured's Trip due to an Accidental Injury to natural teeth. Dental Expenses incurred after the Insured's Trip is completed are not covered;
4. local transportation expense to and/or from a Hospital.

We will not pay benefits in excess of the Usual and Customary level of charges. We will not cover any expenses provided by another party at no cost to the Insured or already included within the cost of the Insured's Trip.

These benefit(s) will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

## SECTION VI ACCIDENTAL DEATH AND DISMEMBERMENT BENEFITS

### 24 HOUR

We will pay the percentage of the Principal Sum indicated in the Table of Losses of the Maximum Benefit Amount shown in the Schedule of Benefits when the Insured, as a result of an Injury caused by an Accident occurring during their Trip, sustained a Loss shown in the Table of Losses below.

**Table of Loss**

<b>Loss of</b>	<b>% of Principal Sum</b>
Life	100%
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
Either Hand or Foot and Sight of One Eye	100%
Either Hand or Foot	50%
Sight of One Eye	50%
Speech	50%
Hearing in Both Ears	50%
Thumb and Index Finger of Same Hand	25%

The Loss must occur within 181 days of the date of the Accident, which caused Injury. The Accident must occur while the Insured is on their Trip and is covered under this Policy.

If more than one Loss is sustained by the Insured as a result of the same Accident, only one amount, the largest applicable to the Losses incurred, will be paid. We will not pay more than 100% of the Maximum Benefit Amount shown in the Scheduled of Benefits for all Losses due to the same Accident.

**Loss** with regard to:

- a) hand(s), or foot/feet, means actual severance at or above a wrist joint proximal to the elbow or actual severance at or above the ankle proximal to the knee, respectively; and
- b) eye or eyes means total and irrecoverable Loss of entire sight thereof; and
- c) speech means entire and irrecoverable Loss of speech; and
- d) hearing means entire and irrecoverable Loss of hearing in both ears; and
- e) thumb and index finger means complete severance through or above the joint that meets the palm.

These benefit(s) will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

### **EXPOSURE**

We will pay for covered losses, as shown in the Table of Loss, which result from the Insured being unavoidably exposed to the elements due to an Accident during their Trip. The Loss must occur within 365 days after the event which caused the exposure.

These benefit(s) will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

### **DISAPPEARANCE**

We will pay for loss of life, as shown in the Table of Loss, if the Insured's body cannot be located within 365 days after a disappearance due to an Accident during their Trip.

These benefit(s) will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

## **SECTION VII GENERAL DEFINITIONS**

**Accident** means a sudden, unexpected unusual specific event that occurs at an identifiable time and place, and shall also include exposure resulting from a mishap to a conveyance in which the Insured is traveling.

**Additional Transportation Cost** means the actual cost incurred for one-way economy transportation (or for the original class of fare, if the original tickets were for a higher class of fare) by Common Carrier by the most direct route, less any refunds paid or payable, for the Insured's unused original tickets.

**Adventure or Extreme Activities** means heli-skiing, heli-snowboarding, Mountain Climbing over 9,000 feet (2,700 meters), motor sport or motor racing, scuba diving if the depth exceeds 131 feet (40 meters) and any activity materially similar to the above.

**Children/Child** means a person under the age of 18 and primarily dependent on the Insured for support and maintenance.

The age limit does not apply to a child who is incapable of self-sustaining employment by reason of mental or physical incapacity.

**Civil Disorder or Riot** means a public disturbance by a person or persons acting in revolt, coup, rebellion or resistance against an established government or civil authority or involvement in acts of violence that causes immediate danger, damage, or injury to others or their property.

**Common Carrier** means an air, land, sea conveyance operated under a license for the transportation of passengers for hire.

**Domestic Partner** means an opposite or a same-sex partner who is at least eighteen (18) years of age and has met all of the following requirements for at least 6 months:

- a) resides with the Insured;



## Contact us:

When you need help, our multilingual Emergency Response Center (ERC) is here to support you.



**PHONE:**

**+1.800.527.0218 or 410.453.6330**



**EMAIL:**

**[assistance@uhcglobal.com](mailto:assistance@uhcglobal.com)**

(The email inbox is also available and monitored 24/7)