



BUSINESS TRAVEL

ACCIDENT INSURANCE PLAN



Insurance underwritten by:
National Union Fire Insurance Company of Pittsburgh, Pa.
with its principal place of business in New York, NY ("the Company")

This brochure is valid in all states EXCEPT: Florida (under 51 lives),
Colorado (under 10 lives), New Hampshire, and New Mexico (under 10 lives).

Business Travel Accident Insurance and Assistance Services

Why Business Travel Accident Insurance?

Employees traveling for business are vulnerable to disruption in their lives and need insurance coverage and assistance services they can count on. Whether an employee's challenge is a lost passport, a medical need, or an emergency evacuation due to political unrest, they can find a solution with business travel accident insurance and travel services. Our business travel accident plan provides employees with a full range of insurance coverage and traveler assistance whether they are traveling across the street or across the world — all accessible through a single, easy-to-use point of contact.

Plan Highlights

- Helps employers meet "Duty of Care" obligations; demonstrates and reinforces their commitment to the safety and well-being of employees.
- Proactive and differentiated services like security alert information to help prevent Insureds from traveling to dangerous travel destinations.
- Access to largest wholly owned travel service and out-of-country medical provider network.
- Seamless integration of insurance and service offerings helps minimize out-of-pocket expenses for employees and liability for employers.

Eligibility

Class	Description of Class	Principal Sum
I	All active employees of the insured employer ("the Policyholder") While on the Business of the Policyholder.	5x Annual Salary to a maximum of \$500,000 rounded to the next highest \$1,000
II	Eligible Spouses (including civil unions or domestic partnerships) as defined in the Policy, when accompanying the employee on a trip authorized and/or paid by the policyholder, who are not in any other class.	\$50,000
III	Eligible Dependent Children as defined in the Policy, when accompanying the employee on a trip authorized and/or paid by the policyholder, who are not in any other class.	\$25,000

Base Plan Summary

Accidental Death, Dismemberment and Paralysis When Injury to an Insured Person results directly in any of the following covered Losses within 365 days (no limit of days in PA for Accidental Death) from the date of the accident that caused the Injury, We will pay, in one sum, the indicated percentage of the Principal Sum:

Loss of	% of Principal Sum
Life	100%
Both hands or both feet	100%
Sight of both eyes	100%
One hand and one foot	100%
One hand and sight of one eye	100%
One foot and sight of one eye	100%
Speech and hearing in both ears	100%
One hand or one foot	50%
Sight of one eye	50%
Speech or hearing in both ears	50%
Hearing in one ear	25%
Thumb and index finger of same hand	25%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	75%
Uniplegia	25%

If more than one loss is sustained by an Insured Person as a result of the same accident, only one amount (the largest) will be paid.

Reduction Schedule The Principal Sum for a loss will be reduced if an Insured Person is age 70 or older on the date of the accident causing the loss, according to the following schedule:

Age on Date of Accident	Percentage of Amount Otherwise Payable
70-74	65%
75-79	45%
80-84	30%
85 and older	15%

Premium for an Insured Person age 70 or older is based on 100% of the coverage that would be in effect if the Insured Person were under age 70.

Exposure and Disappearance If, by reason of an accident occurring while coverage is in force, an Insured Person is unavoidably exposed to the elements and, as a result of such exposure, suffers a loss for which a benefit is otherwise payable, the loss will be covered under the terms of the Policy. If an Insured Person's body has not been found within one year of the disappearance, forced landing, stranding, sinking or wrecking of a conveyance in which the Insured Person was an occupant while

covered under the Policy, then it will be deemed, subject to all other terms and provisions of the Policy, that the Insured Person has suffered accidental death within the meaning of the Policy.

Extraordinary Commutation An Insured is covered for Injury sustained while commuting by automobile or other means of transportation between the Insured's residence and place of regular employment with the Policyholder, but only when it is necessary for the Insured to use such means of transportation because of the discontinuance of service, due to strike or major breakdown, of one or more public transportation systems he or she regularly uses. This benefit is not available in NY.

Emergency Evacuation with Family Travel Pays for Covered Emergency Evacuation Expenses if an Insured Person suffers an Injury or Emergency Sickness while he or she is at least 100 miles from home and the Injury or Emergency Sickness warrants a Medically Necessary Emergency Evacuation Service, up to a maximum of \$1,000,000. Also provides benefits for reasonable expenses incurred following a covered Emergency Evacuation to return home the Insured Person's eligible Children traveling with the Insured Person; or to bring one person (chosen by the Insured Person) to and from the medical facility where the Insured Person is confined if the Insured Person is alone. The place of confinement must be at least 100 miles from home. All arrangements must be made through Travel Guard Group, Inc.

Attendor If a Repatriation of Remains benefit is payable, We will also pay for expenses reasonably incurred for one person (referred to as the Attendor) to accompany the deceased Insured Person's remains from the place where death occurred to the deceased Insured Person's place of primary residence, but not to exceed the cost of one round-trip economy airfare ticket. We will also pay for the Attendor's lodging and meals for up to 7 days, but (a) only while the Attendor is away from his or her place of primary residence in connection with accompanying the deceased Insured Person's remains as described above, and (b) not to exceed \$100 per day for lodging and \$50 per day for meals. Travel Guard Group, Inc. must make all arrangements and must authorize all expenses in advance for this benefit to be payable. This benefit is not available in NY.

Bedside Visitor If the Insured Person is confined to a Hospital or other medical facility for three days or more due to an Illness which begins while coverage under the policy is in force or Injury; We will pay for expenses reasonably incurred to bring one person chosen by the Insured Person's to and from the Hospital or other medical facility where the Insured Person is confined if the place of confinement is outside a 100-mile radius from the Insured Person's place of primary residence; but not to exceed the cost of one round-trip economy airfare ticket. We will also pay for lodging and meals for up to 7 days for such person in the area of such place of confinement, but (a) only while the Insured Person remains so confined, and (b) not to exceed \$100 per day for lodging and \$50 per day for meals. Travel Guard Group, Inc. must make all arrangements and must authorize all expenses in advance for this benefit to be payable. This benefit is not available in NY.

Repatriation of Remains Pays benefits for covered expenses to return the Insured Person's body to his or her home if the Insured Person suffers a covered loss of life due to Injury or Emergency Sickness while at least 100 miles from home, up to a maximum of \$1,000,000. All arrangements must be made through Travel Guard Group, Inc.

Coma Pays a monthly benefit of one percent of the Principal Sum if an Insured Person suffers a covered Coma, within 90 days (180 days in UT) of an accident and the Insured Person remains Comatose for at least 30 consecutive days. No benefits are payable for the first 30 days (not applicable in CT). This benefit is payable as long as the Insured Person remains Comatose due to that Injury until the earliest of: 1) The date the Insured Person ceases to be Comatose due to that Injury, 2) the date the Insured Person dies, 3) the date the total amount of monthly benefits

equals 100% of the Insured Person's Principal Sum. This benefit is not available in GA.

Bereavement and Trauma Counseling If the Insured Person suffers a covered Accidental Death, Accidental Dismemberment or Paralysis, or covered Coma, We will pay benefits for Covered Bereavement and Trauma Counseling Expense(s) for the Insured Person and all of his or her Immediate Family Member(s) for up to 10 sessions combined, with a maximum of \$150 per session. The expenses must be incurred within one year of the date of the accident.

Rehabilitation Reimburses Covered Rehabilitative Expense(s), up to a maximum of \$50,000, incurred within two years of and as a result of an Injury causing a covered Accidental Dismemberment or Paralysis.

Home Alteration and Vehicle Modification Pays Covered Home Alteration and Vehicle Modification Expenses incurred within one year of the date of the accident, up to a maximum of \$25,000, if the Insured Person suffers a covered Accidental Dismemberment or Paralysis for which an Accidental Dismemberment and Paralysis benefit is payable under the Policy.

Physical Therapy If an Accidental Dismemberment or Paralysis benefit is payable under the Policy, We will pay Covered Physical Therapy Expenses that are due to the Injury causing the loss. The expenses must be incurred within one year after the date of the accident causing the Injury and excludes any expenses for or resulting from Injury for which the Insured Person is entitled to benefits paid or payable by Workers' Compensation or other similar law. The amount payable for this benefit is \$100 per session, for up to 10 sessions for treatment of all losses caused by the same accident. This benefit is not available in MN or NY.

Psychological Therapy If an Injury results within 365 days of a covered accident for which an Accidental Dismemberment benefit is payable under the Policy, We will pay Covered Psychological Therapy Expenses that are due to the Injury causing the dismemberment. The Covered Psychological Therapy Expenses must be incurred within one year after the date of the accident causing the Injury. The amount payable for this benefit is the lesser of: 1) 5% of the Insured Person's Principal Sum; or 2) \$5,000. Covered Psychological Therapy Expenses do not include any expenses for or resulting from an Injury for which the Insured Person is entitled to benefits paid or payable by Workers' Compensation or other similar law. This benefit is not available in MN or NY.

Seat Belt and Air Bag Pays a benefit of the lesser of: 1) 10% of the Insured Person's Principal Sum; or 2) \$50,000 if the Insured Person is protected by a properly fastened, original, factory-installed seat belt when he/she suffers a covered Accidental Death under the Policy while operating or riding as a passenger in an Automobile. If the Insured Person is also protected by a properly functioning, original, factory-installed air bag that inflates on impact, an additional benefit of the lesser of: 1) 10% of the Insured Person's Principal Sum; or 2) \$50,000 is payable.

Severe Burn If an Insured Person suffers an Injury that is a Severe Burn, We will pay the indicated maximum percentage of the Insured Person's Principal Sum:

Specified Body Area	Maximum % of Principal Sum
Face and Neck and Head	99%
Hand and Forearm Below Elbow Joint (Right)	22.5%
Hand and Forearm Below Elbow Joint (Left)	22.5%
Upper Arm Below Shoulder Joint to Elbow Joint (Right)	13.5%
Upper Arm Below Shoulder Joint to Elbow Joint (Left)	13.5%
Torso Below Neck to Shoulder Joints and Hip Joints (Front)	36%

Severe Burn (continued)

Specified Body Area	Maximum % of Principal Sum
Torso Below Neck to Shoulder Joints and Hip Joints (Back)	36%
Thigh Below Hip Joint to Knee Joint (Right)	9%
Thigh Below Hip Joint to Knee Joint (Left)	9%
Foot and Lower Leg Below Knee Joint (Right)	27%
Foot and Lower Leg Below Knee Joint (Left)	27%

If only one Specified Body Area is Severely Burned and less than 100% of that specified area is Severely Burned, the amount payable is the same lesser proportion of the Maximum % of Principal Sum shown above. If more than one of the Insured Person's Specified Body Areas is Severely Burned as a result of the same accident, the amount payable is the lesser of: 1) the sum of the benefit amounts calculated separately with respect to each such Specified Body Area; or 2) 100% of the Insured Person's Principal Sum.

Day Care Helps pay covered Day Care expenses equal to the least of: 1) the actual cost of care; 2) 10% of the Insured's Principal Sum; or 3) \$5,000 on behalf of eligible Child(ren) who are enrolled or who subsequently enroll in a licensed Day Care Center within 365 days of the Insured's covered Accidental Death under the Policy for up to 4 years or the date the Child attains age 13, whichever is sooner. A one-time lump sum benefit of \$1,000 will be paid to the Insured's designated beneficiary if the Insured does not have a Child eligible for a benefit within 365 days of the Insured's death.

Tuition Pays a benefit equal to the least of: 1) the actual tuition (exclusive of room and board); 2) 10% of the Insured's Principal Sum; or 3) \$25,000 if the Insured suffers a covered accidental death so that the Insured's eligible Child who is enrolled or enrolls full-time within 365 days of the Insured's death in an institution of higher learning can continue or commence his or her education. The benefit will be paid for each year of continuous full-time enrollment, to a maximum of four consecutive years. The benefit is not payable for any term of enrollment that begins before the Insured's death. If there is no Child eligible for the benefit within 365 days after the date of the Insured's death, We will pay a one-time lump sum benefit of \$1,000 to the Insured's designated beneficiary.

Also pays a benefit equal to the least of: 1) the actual tuition (exclusive of room and board); 2) 10% of the Insured's Principal Sum; or 3) \$25,000 if the Insured suffers a covered accidental death so that the Insured's Spouse, who is enrolled or enrolls within 30 months after the Insured's death in an institution of higher learning or professional or trade training program, can obtain an independent source of support or enrich his or her ability to earn a living. The benefit will be paid for each year of continuous enrollment, to a maximum of four consecutive years. The benefit is not payable for any term of enrollment that begins before the Insured's death. If there is no Spouse eligible for the benefit within 30 months after the date of the Insured's death, We will pay a one-time lump sum benefit of \$1,000 to the Insured's designated beneficiary.

Carjacking Pays a benefit up to \$10,000 if an Insured Person suffers a covered loss as the result of a Carjacking of an automobile while the Insured Person is operating, or riding as a passenger in such automobile.

Medical Repatriation If an Insured suffers an Injury or Sickness outside a 50 mile radius from their current primary place of residence and has sufficiently recovered to travel with minimal risk to his or her health, the Company will pay for Covered Medical Repatriation Expenses reasonably incurred for a non-scheduled commercial air flight or a regularly scheduled air flight with special equipment and/or personnel at the option of the Insured to return to their current primary place of residence or a location selected by the insured. Any Medical Repatriation must be recommended by the attending Physician. Benefits are payable up to a maximum of \$250,000.

Non-Medical Repatriation If an Insured suffers an Injury or Sickness outside a 50 mile radius from their current place of residence and has sufficiently recovered to travel with minimal risk to his or her health, the Company will pay for Non-Medical Repatriation Expenses reasonably incurred for a regularly scheduled economy class air flight without special equipment or personnel at the option of the Insured to return to their current place of primary residence or a location selected by the Insured. Any Non-Medical Repatriation must be recommended by the attending Physician. Benefits are payable up to a maximum of \$250,000.

The Medical and Non-Medical Repatriation benefits are not available in IN, KS, ME, MN, NM, NY, OR, RI, VT, WA and WV.

Optional Benefits

A. Out-of-Country Medical Expense If, while traveling outside of an Insured Person's country of permanent residence, during the course of any Trip of less than 30 Days While on the Business of the Policyholder, an Insured Person suffers an Injury or contracts a Sickness that requires him or her to be treated by a Physician, We will pay, the Usual and Customary Charges incurred for Covered Medical Services received due to that Injury or Sickness up to \$250,000 per Insured Person. This benefit is payable for such charges incurred outside the Insured Person's country of permanent residence and within 52 weeks. Covered Medical Service(s), means any of the following services, if the service is Medically Necessary:

1. hospital semi-private room and board (or, when Medically Necessary, room and board in an intensive care or cardiac care unit); Hospital ancillary services (including, but not limited to, use of the operating room or emergency room); or use of an Ambulatory Medical Center;
 2. services of a Physician or a registered nurse (R.N.);
 3. ambulance service to or from a Hospital;
 4. laboratory tests;
 5. radiological procedures;
 6. anesthetics and the administration of anesthetics;
 7. blood, blood products and artificial blood products, and the transfusion thereof; physical therapy and occupational therapy;
 8. rental of Durable Medical Equipment;
 9. artificial limbs, artificial eyes or other prosthetic appliances; or
 10. medicines or drugs administered by a Physician or that can be obtained only with a Physician's written prescription.
- This benefit is not available in NY.

B. Security Evacuation Employers have an obligation to help ensure the safety and well-being of employees who travel outside their Home Country on the employer's behalf, including those who require a Security Evacuation. The Security Evacuation benefit pays for eligible expenses up to a \$100,000 benefit maximum to take an Insured Person to the Nearest Place of Safety, as determined by the Designated Security Consultant. Security Evacuation benefits are payable only once per Occurrence. Covered Occurrences may include:

- Expulsion by Appropriate Authorities from Host Country or being declared persona non-grata.
- Political or military events that trigger an Advisory from Appropriate Authorities involving a Host Country.
- Verified Physical Attack or Verified Threat of Physical Attack from a third party.
- The Insured Person is deemed kidnapped or a Missing Person by local or international authorities and his or her safety or well-being is in question within seven days of being found.
- Natural Disaster (within 7 days of the event).

The benefit also includes options to return to the Insured Person's Host Country, Home Country, or place of assignment within 7 days of

Security Evacuation. All arrangements must be made through Travel Guard Group, Inc. This benefit is not available in MT, NY, and WA.

C. Severe Infectious Disease Outbreak Helps mitigate the risk of exposure to a severe infectious disease, including COVID-19 and helps cover costs of lodging and meals due to a quarantine ordered by a physician or the government.

Severe Infectious Disease Outbreak pays a Severe Infectious Disease Evacuation Benefit, if a Severe Infectious Disease Outbreak occurs within a 15 mile radius of the Insured Person's location while he or she is outside a 500 mile radius from his or her current place of primary residence. The Company will pay the cost of Transportation to evacuate the Insured Person from his or her location to the Nearest Place of Safety as determined by Travel Guard Group, Inc. Aggregate limit for this benefit is \$100,000. This coverage also pays a Quarantine Benefit if an Insured Person is ordered into Quarantine while outside a 100 mile radius from his or her current place of primary residence. The Company will pay for lodging and meals for up to 14 days for such person in the area of the place of confinement, but: (a) only while the Insured Person remains so confined; and (b) not to exceed \$200 per day for lodging and \$75 per day for meals. This benefit is not available in IN, KS, ME, MN, NM, NY, OR, RI, VT, WA and WV.

D. Travel Inconvenience Pays for Trip Cancellation if an Insured Person has to cancel a Trip prior to Departure, We will reimburse the Policyholder for non-recoverable, non-refundable deposits and advanced payments for the cost of Travel Arrangements up to a maximum of \$2,500 which have been paid, or are payable under contract, and cannot be recovered elsewhere if the cancellation is due to: (a) Injury or Sickness of an Insured Person or Immediate Family Member if a Physician has recommended in writing that the cancellation is necessary; (b) death of an Insured Person or Immediate Family Member if the death has been certified by a Physician or other person legally qualified. Death of an Immediate Family Member must occur within 30 days before Departure of the Insured's Trip; or (c) any other unforeseen circumstances occurring outside the control of the Policyholder or the Insured other than those circumstances described in (a) or (b) above or specifically described or excluded under the Policy.

Pays for Trip Interruption & Replacement benefit if the Insured Person is unable to continue a Trip after the date of Departure. We will reimburse the Policyholder for: (a) the unused, non-refundable portion of the Travel Arrangements which have been paid, or are payable under contract and cannot be recovered elsewhere; and (b) any additional costs necessarily incurred for Travel Arrangements less any amount recoverable elsewhere to send one replacement person to assume the duties of the Insured up to a maximum of \$2,500 if the interruption is due to: (a) Injury or Sickness of an Insured Person or Immediate Family Member if a Physician has recommended in writing that the Trip Interruption is necessary; (b) death of an Insured Person or Immediate Family Member if the death has been certified by a Physician or other person legally qualified. Death of an Immediate Family Member must occur after the departure of the Insured Person on a Trip; or (c) any other unforeseen circumstances occurring outside the control of the Policyholder or the Insured other than those circumstances described in (a) or (b) above or specifically described or excluded under the Policy.

Pays for Trip Rearrangement Benefit when pre-booked Travel Arrangements for a Trip which has already commenced have to be altered for any of the following reasons: 1.) failure of a Conveyance in which an Insured Person is travelling in order to reach the point of departure at the beginning of a Trip that involves travel outside the Insured's Home Country or Country of Permanent Assignment; or 2.) failure of a Conveyance in which an Insured Person is travelling to arrive at its destination airport, port or station outside an Insured's Home Country or Country of Permanent Assignment at the published expected time of arrival which results in an Insured Person arriving too late to

board an onward connecting Conveyance on which an Insured Person is booked to travel; or 3.) loss or theft of passport, required visa(s) or other required travel documents; We will reimburse the Policyholder the additional reasonable and necessary costs to reschedule or rearrange the Travel Arrangements to enable the Insured to continue the Trip or return to their Home Country or Country of Permanent Assignment up to a maximum of \$1,000 less any refunds or credits from previously paid amounts or amounts recoverable elsewhere.

Pays for Trip Delay Benefit if the Departure of the scheduled Conveyance on which an Insured Person is booked to travel in order to get to their planned destination at the start, during or on completion of a Trip is delayed for more than 4 hours due to: 1.) mechanical breakdown or any delay caused by a Travel Supplier; or 2.) strike or industrial action; or 3.) adverse weather conditions; or 4.) Natural Disasters that cause a complete cessation of travel services at the point of Departure or destination; 5.) the Insured Person's being delayed due to a traffic accident while en route to a Departure as substantiated by a police report; 6.) breakdown of an owned or rented vehicle en route to the Insured Person's destination; 7.) flight delays resulting from the temporary closures of airports from which flights were scheduled to depart due to documented security breaches or threat; or 8.) civil disorder within 50 miles from the Departure point, We will pay the Policyholder for Reasonable Additional Expenses up to \$150 for every full four consecutive hours of delay, up to an overall maximum of \$1,000.

In the event of a claim, the Insured must notify the Policyholder who must notify Us as soon as reasonably possible. This benefit will not pay for any additional penalty charges incurred that would not have been imposed had notice been provided as soon as reasonably possible. In the event of a claim, the Insured and Policyholder must surrender to Us any unused tickets, vouchers, coupons and/or travel privileges. This benefit is not available in IN, KS, ME, MO, MN, NM, NY, OR, RI, TN, VT and WA.

Medical Emergency Guarantee Charge Expense Benefit. If, while traveling outside of his or her country of permanent residence, an Insured Person suffers a Medical Emergency for which Out-of-Country Medical Expense benefits become payable and such person incurs a Hospital Admission Guarantee Charge and/or a Medical Expense Guarantee Charge, We will pay the actual expenses incurred for guarantee of the payment to the Hospital or the medical provider up to a maximum of \$10,000*.

- **Hospital Admission Guarantee Charge** means any charge or expense made by a Hospital prior to and as a condition of an Insured Person's admission to that Hospital.
- **Medical Expense Guarantee Charge** means any charge or expense made by a medical provider other than a Hospital prior to and as a condition of an Insured Person being provided with the medical service or treatment by that provider.

** The \$250,000 maximum payable under the Out-of-Country Medical Expense Benefit will be reduced by any amounts paid or payable under this Medical Emergency Guarantee Charge Expense Benefit.*

Definitions

Definitions may vary depending on the state of issue.

Annual Salary means the Insured's base annual salary exclusive of overtime, bonuses, tips, commission, and special compensation.

Injury means bodily injury: 1) which is sustained as a direct result of an unintended, unanticipated accident that is external to the body and that occurs while the injured person's coverage is in force; 2) which occurs under the circumstances described in a Hazard applicable to that person; and 3) which directly (independent of sickness, disease, mental incapacity, bodily infirmity or any other cause) causes a covered loss.

Insured means a person: 1) who is a member of an eligible class of persons as described above; 2) for whom premium has been paid; and 3) while

Definitions (continued)

covered under the Policy. However, an Insured does not include any person covered under the Policy solely as an Insured Spouse (including civil unions or domestic partnerships) or Insured Dependent Child.

Insured Person means an Insured, an Insured Spouse (including civil unions or domestic partnerships) or an Insured Dependent Child.

Loss as used in the Accidental Death, Dismemberment and Paralysis Benefit

“Loss” of a hand or foot means complete severance through or above the wrist or ankle joint. “Loss” of sight of an eye means total and irrecoverable Loss of the entire sight in that eye. “Loss” of hearing in an ear means total and irrecoverable Loss of the entire ability to hear in that ear. “Loss” of speech means total and irrecoverable Loss of the entire ability to speak. “Loss” of thumb and index finger means complete severance through or above the metacarpophalangeal joint of both digits.

- “Quadriplegia” means the complete and irreversible paralysis of both upper and lower limbs.
- “Paraplegia” means the complete and irreversible paralysis of both lower limbs.
- “Hemiplegia” means the complete and irreversible paralysis of the upper and lower limbs on the same side of the body.
- “Uniplegia” means the complete and irreversible paralysis of one limb. “Limb” means entire arm or entire leg.

Medical Emergency as used in the Out-of-Country Medical Expense Benefit means a condition caused by an Injury or Sickness which meets all of the following criteria: 1) there is present a severe or acute symptom requiring immediate care and the failure to obtain such care could reasonably result in serious deterioration of the Insured Person’s condition or place his or her life in jeopardy; 2) the severe or acute symptom occurs suddenly and unexpectedly; and 3) the severe or acute symptom occurs while the Policy is in force for the person suffering the symptom and under the circumstances described in a Hazard (a) applicable to that person and (b) to which the Out-of-Country Medical Expense Benefit applies.

Sickness as used in the Out-of-Country Medical Expense Benefit means any disease, illness, or infection of an Insured Person that begins while coverage is in force as to the Insured Person.

Trip means a Trip taken by an Insured While on the Business of the Policyholder, which begins when the Insured leaves his or her residence or place of regular employment for the purpose of going on the Trip (whichever occurs last), and is deemed to end when the Insured returns from the Trip to his or her residence or place of regular employment (whichever occurs first). However, the Trip is deemed to exclude any period of time during which the Insured is on an authorized leave of absence or vacation or travel to and from the Insured’s place of regular employment. “Trip” does not include the Insured’s Trip to a location that extends for more than 365 days. Such a Trip will be deemed to change the Insured’s residence or place of regular employment to the new location. Coverage includes personal deviations if the deviation is no more than 25% of the duration of the Business Trip up to a maximum of 7 days.

We, Our means the Company.

While on the Business of the Policyholder means while on assignment by or at the direction of the Policyholder for the purpose of furthering the business of the Policyholder, but does not include any period of time: 1) while the Insured is working at his or her regular place of employment; 2) during the course of everyday travel to and from work; or 3) during an authorized leave of absence or vacation. If an Insured’s assignment to a location exceeds 365 days, such assignment will be deemed to change the Insured’s residence and regular place of employment to the new location.

General Exclusions

Exclusions may vary depending on the state of issue.

No coverage shall be provided under the Policy and no payment shall be made for any loss resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following excluded risks* even if the proximate or precipitating cause of the loss is an accidental bodily Injury:

1. suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury or auto-eroticism;
2. travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, whether as a Passenger, pilot, operator or crew member;
3. declared or undeclared war, or any act of declared or undeclared war.
4. sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from any of these;
5. infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes;
6. full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority (Unearned premium for any period for which the Insured Person is not covered due to his or her active duty status will be refunded) (Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded.);
7. the Insured Person being under the influence of intoxicants while operating any vehicle or means of transportation or conveyance;
8. the Insured Person being under the influence of drugs unless taken under the advice of and as specified by a Physician;
9. the Insured Person’s commission of or attempt to commit a crime;
10. the medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from the treatment;
11. stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm.

* Sickness as defined and applicable to the Out-of-Country Medical Expense benefit is not excluded from coverage.

Out-Of-Country Medical Expense Exclusions

Exclusions may vary depending on the state of issue.

In addition to the General Exclusions, Out-of-Country Medical Expense benefits are not payable for, and Usual and Customary Charges for Covered Medical Services do not include, any expense for or resulting from:

1. repair or replacement of existing artificial limbs, artificial eyes or other prosthetic appliances or rental of existing Durable Medical Equipment unless for the purpose of modifying the item because the Injury or Sickness has caused further impairment in the underlying bodily condition;
2. new, or repair or replacement of, dentures, bridges, dental implants, dental bands or braces or other dental appliances, crowns, caps, inlays or onlays, fillings or any other treatment of the teeth or gums, except for repair or replacement of sound natural teeth damaged or lost as a result of the Injury or Sickness not to exceed \$500 per tooth per accident;
3. new eye glasses or contact lenses or eye examinations related to the correction of vision or related to the fitting of glasses or contact lenses, unless the Injury or Sickness has caused impairment of sight; or repair or replacement of existing eyeglasses or contact lenses unless for the purpose of modifying the item because the Injury or Sickness has caused further impairment of sight;
4. new hearing aids or hearing examinations unless the Injury or Sickness

has caused impairment of hearing; or repair or replacement of existing hearing aids unless for the purpose of modifying the item because the Injury or Sickness has caused further impairment of hearing;

5. rental of Durable Medical Equipment where the total rental expense exceeds the usual purchase expense for similar equipment in the locality where the expense is incurred (but if, in Our sole judgment, Out-of-Country Medical Benefits for rental of Durable Medical Equipment are expected to exceed the usual purchase expense for similar equipment in the locality where the expense is incurred, We may, but are not required to, choose to consider such purchase expense as a Usual and Customary Covered Medical Expense in lieu of such rental expense);
6. personal comfort or convenience items, such as but not limited to Hospital telephone charges, television rental, or guest meals;
7. any condition for which the Insured Person is entitled to benefits under any Workers' Compensation Act or similar law.

Security Evacuation Exclusions

Exclusions may vary depending on the state of issue.

In addition to the General Exclusions, no benefits are payable under the Security Evacuation Expense Benefit for charges, fees or expenses:

1. payable under any other provision of, or rider to, the Policy;
2. that are recoverable through the Insured Person's employer;
3. arising from or attributable to an actual fraudulent, dishonest or criminal act committed or attempted by an Insured Person, acting alone or in collusion with others;
4. arising from or attributable to an alleged: a. violation of the laws of the Host Country by an Insured Person; or b. violation of the laws of the Insured Person's Home Country; unless the Designated Security Consultant determines that such allegations were intentionally false, fraudulent and malicious and made solely to achieve a political, propaganda and/or coercive effect upon or at the expense of the Insured Person;
5. due to the Insured Person's failure to maintain and possess duly authorized and issued required travel documents and visas;
6. arising from an Occurrence which took place in an Excluded Country;
7. for repatriation of remains expenses;
8. for common or endemic or epidemic diseases or global pandemic disease as defined by the World Health Organization;
9. for medical services;
10. for monies payable in the form of a ransom if a Missing Person case evolves into a kidnapping;
11. arising from or attributable, in whole or in part, to a debt, insolvency, commercial failure, the repossession of any property by any title holder or lien holder or any other financial cause;
12. arising from or attributable, in whole or in part to non-compliance by the Insured Person with regard to any obligation specified in a contract or license;
13. due to military or political issues if the Insured Person's Security Evacuation request is made more than 7 days after the Appropriate Authority(ies) Advisory was issued.

Limitations

Limitation on Multiple Benefits If an Insured Person suffers one or more losses from the same accident for which amounts are payable under the Accidental Death Benefit, Accidental Dismemberment and Paralysis Benefit, or the Coma Benefit the maximum amount payable for all of the Benefits combined will not exceed the amount payable for a covered loss under the largest benefit.

Limitation on Multiple Hazards If an Insured Person's Injury is caused by an accident that occurs under the circumstances of more than one event, occasion, experience or period of time for which coverage is provided under the Policy (Hazards) the Principal Sum for that Insured Person for that accident will be determined as though the accident occurred under the circumstances described in the Hazard with the largest Principal Sum.

Aggregate Limit \$5,000,000 Per Accident The maximum amount payable under the Policy may be reduced if more than one Insured Person suffers a loss as a result of the same accident, and if amounts are payable for those losses under the Accidental Death Benefit, Accidental Dismemberment and Paralysis Benefit, and/or Coma Benefit. The maximum amount payable for all Insured Persons combined will not exceed the amount of the Aggregate Limit. If the maximum amount otherwise payable for Insured Persons is reduced to comply with the Aggregate Limit maximum stated above, the reduction will be taken by applying the same percentage of reduction to each Insured Person's maximum amount otherwise payable.

Trip Cancellation Exclusions

No Trip Cancellation Benefit will be paid for a cancellation due to:

1. the Insured's deciding not to travel prior to commencement of the Trip unless this decision is made as a result of the government of the Insured's Home Country or Country of Permanent Assignment issuing a warning or advisory against all but essential travel (or similar advice) to a destination and such advice or warning was not issued prior to the booking of the Trip;
2. redundancy of an Insured or the termination of an Insured's contract of employment within 31 days prior to the Trip Departure date;
3. the Policyholder's or an Insured Person's financial circumstances;
4. default of any provider (or their agent) of transport or accommodation acting for the Policyholder or an Insured Person;
5. regulations made by any public authority or government or persons with the authority under legislation or licence to make regulations;
6. a claim that is recoverable under any other section of the Policy;
7. disinclination of an Insured Person or any other person to travel; or
8. failure of an Insured Person or the Policyholder to provide evidence of receipts and confirmation of the cancellation and/or changes to itinerary from the Conveyance operator(s) and/or service provider who made the Travel Arrangements.

Trip Interruption & Replacement Exclusions

No Trip Interruption & Replacement Benefit will be paid for an interruption due to:

1. the Insured's deciding not to continue travelling after the Trip has commenced, unless this decision is made as a result of the government of the Insured's Home Country or Country of Permanent Assignment issuing a warning or advisory against all but essential travel (or similar advice) to a destination and such advice or warning was issued after the Trip had commenced if the Trip is interrupted;
2. redundancy of an Insured or the termination of an Insured's contract of employment once a Trip has commenced;
3. the Policyholder's or an Insured Person's financial circumstances;
4. default of any provider (or their agent) of transport or accommodation acting for the Policyholder or an Insured Person;
5. regulations made by any public authority or government or persons with the authority under legislation or licence to make regulations;
6. a claim that is recoverable under any other section of the Policy;
7. curtailment or interruption on medical grounds that is not based on the recommendation of a Physician and which does not also result in a payable claim under any medical benefit in the Policy;
8. disinclination of an Insured Person or any other person to travel or continuing to travel on a Trip; or
9. failure of an Insured Person or the Policyholder to provide evidence of receipts and confirmation of the changes to itinerary from the Conveyance operator(s) and/or service provider who made the Travel Arrangements.

Trip Rearrangement Exclusions

No Trip Rearrangement Benefit will be paid for a rearrangement due to:

1. the Policyholder's or an Insured Person's financial circumstances;
2. default of any provider (or their agent) of transport or accommodation acting for the Policyholder or an Insured Person;
3. regulations made by any public authority or government or persons with the authority under legislation or licence to make regulations;
4. a claim that is recoverable under any other section of the Policy;
5. the delayed departure of the Conveyance due to strike or industrial action which existed or for which advance warning had been given before the date on which the Trip was booked;
6. disinclination of an Insured Person or any other person to travel or continuing to travel on a Trip;
7. delay of a Conveyance if the delay is due to the withdrawal from service temporarily or permanently of any ship, aircraft or train on the orders or recommendation of any port authority, rail authority or the Civil Aviation Authority or any similar body in any country;
8. late arrival due to a connecting flight not having allowed for the official minimum transfer time and at least a connection time of three hours;
9. the Insured Person's declining an alternative service by the transportation provider;
10. actions within the control of the Policyholder or Insured Person that resulted in missing a flight or flight connection; or
11. failure of an Insured Person or the Policyholder to provide evidence of receipts and confirmation of the changes to itinerary from the Conveyance operator(s) and/or service provider who made the Travel Arrangements. .

Trip Delay Exclusions

No trip delay benefit will be paid for a delay due to:

1. the Policyholder's or an Insured Person's financial circumstances;
2. default of any provider (or their agent) of transport or accommodation acting for the Policyholder or an Insured Person;
3. regulations made by any public authority or government or persons with the authority under legislation or licence to make regulations;
4. delayed departure of the Conveyance due to strike or industrial action which existed or for which advance warning had been given before the date on which the Trip was booked;
5. disinclination of the Insured Person or any other person to travel or continuing to travel on a Trip;
6. delay of a Conveyance if the Insured Person fails to check in according to the itinerary supplied unless the failure to check in was due to strike or industrial action;

7. delay of a Conveyance if the delay is due to the withdrawal from service temporarily or permanently of any ship, aircraft or train on the orders or recommendation of any port authority, rail authority or the Civil Aviation Authority or any similar body in any country;
8. any delay due to actions within the control of the Insured Person that resulted in missing a Conveyance or Conveyance connection; or
9. failure to obtain written confirmation from the Conveyance operator or their handling agents of the number of hours delay and the reason for such delay.

Notice of Claim

Written notice of claim must be given to the Company within 20 days after an Insured Person's loss, or as soon thereafter as reasonably possible. Notice given by or on behalf of the claimant to the Company at Accident and Health Claims Department, P.O. Box 25987, Shawnee Mission, KS 66225, with information sufficient to identify the Insured Person, is deemed notice to the Company. For more information please contact 1-800-551-0824.

Travel Assistance Services

A full spectrum of travel, medical, security, and assistance services are offered to help travelers cope with emergencies and simplify the travel experience. These services are provided by Travel Guard®, a wholly owned subsidiary of AIG.

Highlights

- 24/7 assistance services while traveling virtually anywhere in the world;
- A members-only website and mobile app, which offers up-to-date travel destination information, advisories, and alerts;
- Global command centers located on six continents;
- An extensive network with access to over 650,000 medical providers worldwide;
- Direct payment of expenses when using a local provider; eliminates an employee's out-of-pocket costs while traveling;
- An in-house security operation that includes a global network of security professionals who are ready to assist on the spot;
- 170 languages spoken;
- 24/7 access to online Travel Security Awareness Training.

Expenses incurred from third-party vendors for services not part of a filed insurance plan are the responsibility of the traveler.

For more information, contact your AIG Accident & Health representative or visit www.aig.com/bta.

Terms capitalized in this document are defined terms in this brochure or in the Policy.

The underwriting risks, financial and contractual obligations, and support functions associated with products issued by National Union Fire Insurance Company of Pittsburgh, Pa., are its responsibility. National Union Fire Insurance Company of Pittsburgh, Pa., a Pennsylvania insurance company, maintains its principal place of business at 1271 Ave of the Americas FL 37, New York, NY 10020-1304, and is authorized to conduct insurance business in all states and the District of Columbia. NAIC No. 19445. Travel assistance services are provided by AIG Travel, Inc., a member of American International Group, Inc. Travel Guard® is the marketing name for its portfolio of travel insurance solutions and travel related services. Coverages may not be available in all states. Producers are required to have a P&C license in addition to an A&H license in Florida, Kansas, Maryland, Minnesota, Nevada, South Carolina, Virginia and Tennessee when offering the Security Evacuation benefit.

This is only a brief description of the coverage(s) available under Policy series C11860DBG, C11860(Rev 3/13)DBG-AK, C11860(Rev 3/13)DBG-CO, C11860(Rev 3/13)DBG-CT, C11860(Rev 9/17)DBG-MO, C36183DBG-OH, C30391DBG-SC, C36060DBG-TX and C36183DBG-WA. The Policy contains reductions, limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern in all cases. Certain coverages may not be available in all states.



Business Travel Accident Insurance Plan

Please complete this questionnaire and submit to your AIG Accident and Health representative.

PRODUCER INFORMATION

Producer of Record: _____

Producer Company Name: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Website Address: _____

Are you the incumbent? ☐ Yes ☐ No

(Only appropriately licensed producers can sell, solicit, and negotiate insurance products with prospective customers.)

Standard commission for this program is 15 percent.

PROPOSED POLICYHOLDER INFORMATION

Proposed Policyholder Legal Name: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ FEIN Number: _____

Website Address: _____

TYPE OF ORGANIZATION

Describe Organization _____

CHOICE OF COVERAGE

Base Plan	Description of Coverage
Accidental Death and Dismemberment (w/ Paralysis) ¹	Employee: 5x Annual Salary to a maximum of \$500,000 rounded to the next highest \$1k. Eligible Spouse: \$50,000; Eligible Dependent Child(ren): \$25,000.
Policy Aggregate Limit	\$5,000,000
Bereavement & Trauma Counseling	\$150 Per Session, maximum 10 Sessions
Carjacking	Lesser of \$10,000 or 10% Insured Person's Principal Sum
Coma	1% of the Insured Person's Principal Sum per month to a maximum of the Principal Sum
Day Care	Least of actual cost, \$5,000 or 10% Insured's Principal Sum
Emergency Medical Evacuation w/ Family Travel	\$1,000,000 maximum
Extraordinary Commuting	Injury sustained during Extraordinary Commuting will not be excluded.
Medical/Non-Medical Repatriation	\$250,000 maximum

Home Alteration & Vehicle Modification	\$25,000 maximum
Rehabilitation	\$50,000 maximum
Repatriation of Remains	\$1,000,000 maximum
Attendor	Included (Maximum of round-trip economy airfare ticket + up to 7-day — Food \$50 per day & Lodging \$100 per day)
Seat Belt	Lesser of \$50,000 or 10% Insured Person's Principal Sum
Air Bag	Lesser of \$50,000 or 10% Insured Person's Principal Sum
Tuition	Least of actual tuition, \$25,000 or 10% of Insured's Principal Sum
Bedside Visit	Maximum of round-trip economy airfare ticket + up to 7-days — Food \$50 per day & Lodging \$100 per day; Minimum Hospital Stay = 3 days
Psychological Therapy	Lesser of \$5,000 or 5% of Insured Person's Principal Sum
Physical Therapy	\$100 Per Session, maximum 10 Sessions
Personal Deviation	25% Duration of Business Trip
Severe Burns ¹	% of Principal Sum

OPTIONAL BENEFITS AVAILABLE* (must be purchased in conjunction with the Base Plan)

A. Out-Of-Country Medical Expense	\$250,000
Medical Emergency Guarantee Charge Expense Benefit	\$10,000 (The overall \$250,000 Out of Country Medical Expense maximum will be reduced by any amounts paid under this benefit.)
Dental Expense	\$500 per tooth per covered accident
Deductible	None
B. Security Evacuation	\$100,000 maximum
C. Severe Infectious Disease Outbreak	\$100,000 maximum
Evacuation Benefit	Outside a 500 mile radius of primary residence. Aggregate Limit of \$500,000.
Quarantine Benefit	Up to \$200 per day for lodging and \$75 per day for meals for up to 14 days
D. Travel Inconvenience	
Trip Cancellation	\$2,500 maximum
Trip Interruption/Replacement	\$2,500 maximum
Trip Rearrangement	\$1,000 maximum
Trip Delay	\$150 for every full consecutive hours of delay, up to an overall maximum of \$1,000

Choose the Base Plan along with Optional Benefits*

Number of Employees	Annual Payment		3-Year Annual Installment		3-Year Pre-Paid	
	Base Plan	Optional Benefits*	Base Plan	Optional Benefits*	Base Plan	Optional Benefits*
2 to 49	☐ \$1,000	☐ \$250 Inclusive of all options A,B,C,D**	☐ \$950	☐ \$238 Inclusive of all options A,B,C,D**	☐ \$2,700	☐ \$675 Inclusive of all options A,B,C,D**
50 to 100	☐ \$1,217	☐ Option A: \$634 ☐ Option B: \$50 ☐ Option C: \$416 ☐ Option D: \$373	☐ \$1,155	☐ Option A: \$602 ☐ Option B: \$48 ☐ Option C: \$395 ☐ Option D: \$354	☐ \$3,284	☐ Option A: \$1,712 ☐ Option B: \$135 ☐ Option C: \$1,123 ☐ Option D: \$1,007
101 to 250	☐ \$2,035	☐ Option A: \$1,978 ☐ Option B: \$100 ☐ Option C: \$1,026 ☐ Option D: \$917	☐ \$2,191	☐ Option A: \$1,879 ☐ Option B: \$95 ☐ Option C: \$975 ☐ Option D: \$871	☐ \$6,225	☐ Option A: \$5,341 ☐ Option B: \$270 ☐ Option C: \$2,770 ☐ Option D: \$2,476
251 to 500	☐ \$3,670	☐ Option A: \$4,363 ☐ Option B: \$200 ☐ Option C: \$1,489 ☐ Option D: \$1,984	☐ \$3,487	☐ Option A: \$4,145 ☐ Option B: \$190 ☐ Option C: \$1,415 ☐ Option D: \$1,885	☐ \$9,908	☐ Option A: \$11,780 ☐ Option B: \$540 ☐ Option C: \$4,020 ☐ Option D: \$5,357

* Option A Not Available in: CO, MT, NY, VA and WA

Option B Not Available in: CO, MT, NY, VA and WA

Option C Not Available in: IN, KS, ME, MD, MN, NM, NY, OR, RI, VT, WA and WV.

Option D Not Available in: IN, KS, ME, MO, MN, NM, NY, OR, RI, TN, VT, VA and WA.

** For the 2-49 employee group: If one or more of the optional benefits is not available in the desired state, the pricing will remain as shown regardless of the optional benefits available.

PROPOSED COVERAGE EFFECTIVE DATE

Coverage becomes effective on the proposed date only if the insurance company has received the completed questionnaire and approved the risk on or before the proposed effective date. If the completed questionnaire is received after the proposed effective date, coverage will not take effect until the insurance company receives and accepts the questionnaire and approves the risk. Please enter the proposed effective date in the spaces below. The coverage period is one (1) year or three (3) years (if Annual Installment or Pre-Paid option selected) from the organization's Policy effective date.

____ / ____ / ____

APPROVAL

We will review the completed questionnaire promptly and notify you if coverage will be provided, or if there are any problems, miscalculations or omissions that would prevent us from issuing coverage.

PREVIOUS INSURANCE *(rates may vary from this brochure based on prior claim history)*

If an accident insurance program has been in force for your organization's employees, please give full details for the past three (3) years:

Policy year: _____
Total premium: \$ _____ \$ _____ \$ _____
Total paid claims: \$ _____ \$ _____ \$ _____
Number of claims: _____
Name(s) of previous carrier(s): _____

(Upon review, more detail may be requested.)

☐ Check here if no prior coverage

SIGNED STATEMENT

All information on the questionnaire is correct to the best of my knowledge. I understand that the insurance company must accept and approve this questionnaire before coverage is effective. I agree that the insurance company may audit my records to verify proper payment. By signing below, I acknowledge that I have read, understand and agree to the terms and conditions of this coverage as presented in this brochure.

Officer's name (print) _____

Signature _____

Title (print) _____

Date _____

After completing this questionnaire, email it to PABrochureIntake@aig.com or call your local representative.

1 Benefit amounts as described on pages 2-4 of this brochure and in the Policy.

This is only a brief description of the insurance coverage(s) available under Policy series C11860DBG, C11860(Rev 3/13)DBG-AK, C11860(Rev 3/13)DBG-CO, C11860(Rev 3/13)DBG-CT, C11860(Rev 9/17)DBG-MO, C36183DBG-OH, C30391DBG-SC, C36060DBG-TX and C36183DBG-WA. The Policy contains reductions, limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern in all cases. Certain coverages may not be available in all states.



For more information, contact your AIG Accident & Health representative or visit www.aig.com/bta.

Terms capitalized in this document are defined terms in this brochure or in the Policy.

The underwriting risks, financial and contractual obligations, and support functions associated with products issued by National Union Fire Insurance Company of Pittsburgh, Pa., are its responsibility. National Union Fire Insurance Company of Pittsburgh, Pa., a Pennsylvania insurance company, maintains its principal place of business at 1271 Ave of the Americas FL 37, New York, NY 10020-1304, and is authorized to conduct insurance business in all states and the District of Columbia. NAIC No. 19445. Travel assistance services are provided by AIG Travel, Inc., a member of American International Group, Inc. Travel Guard® is the marketing name for its portfolio of travel insurance solutions and travel related services. Coverages may not be available in all states. Producers are required to have a P&C license in addition to an A&H license in Florida, Kansas, Maryland, Minnesota, Nevada, South Carolina, Virginia and Tennessee when offering the Security Evacuation benefit.

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