

SERFF Tracking Number: ACEH-126011054 State: Arkansas
Filing Company: ACE American Insurance Company State Tracking Number: 41396
Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: Blanket - Addl Benefits Amend - Trip Travel
Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Filing at a Glance

Company: ACE American Insurance Company

Product Name: Blanket - Addl Benefits Amend - SERFF Tr Num: ACEH-126011054 State: ArkansasLH

Trip Travel

TOI: H04 Health - Blanket Accident/Sickness

SERFF Status: Closed

State Tr Num: 41396

Sub-TOI: H04.000 Health - Blanket

Co Tr Num: BLK/GLM - TRIP

State Status: Approved-Closed

Accident/Sickness

TRAVEL AMEND

Filing Type: Form

Co Status:

Reviewer(s): Rosalind Minor

Authors: Karen Moore, Ilona Slofer

Disposition Date: 02/03/2009

Date Submitted: 01/29/2009

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Blanket - Addl Benefits Amend - Trip Travel

Project Number: Blanket - Addl Benefits Amend - Trip Travel

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Authorized

Date Approved in Domicile:

Domicile Status Comments: Pennsylvania, our domiciliary state, does not require the filing of forms intended for issue in the Commonwealth of Pennsylvania (PA Notice 96-1).

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Large

Overall Rate Impact:

Group Market Type: Blanket

Filing Status Changed: 02/03/2009

State Status Changed: 02/03/2009

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Re: ACE American Insurance Company

NAIC #: 626-22667 / FEIN #: 95-2371728

SERFF Tracking Number: ACEH-126011054 State: Arkansas
Filing Company: ACE American Insurance Company State Tracking Number: 41396
Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: Blanket - Addl Benefits Amend - Trip Travel
Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Re: Supplemental Amendment, AH-15092-TRP, for use with
Blanket Accident Insurance Policy - AH-10324
and Blanket Accident and Sickness Policy, AH15090

In-state and Out-of-state Filing

Dear Commissioner:

We submit this filing on behalf of ACE American Insurance Company. This form is new and is not intended to replace any forms currently on file. Pennsylvania, our domiciliary state, does not require the filing of forms intended for issue in the Commonwealth of Pennsylvania (PA Notice 96-1). The Readability Certification Form is enclosed.

AH-15092-TRP provides additional supplemental trip travel benefits for use with our Blanket Accident and Blanket Accident and Sickness policies. The additional benefits, hazard and exclusions are optional and may be selected at the case or class level by the Policyholder. Specific variability is noted throughout the form, indicated by soft brackets ({ }). Optional material is indicated by hard brackets ([]) and will be included or excluded as requested by the Policyholder. For existing cases, the benefits may be issued on amendment form AH-15092-TRP, and for new cases, we may incorporate the language directly into the policy.

Using the Rudolph Flesch Formula and when scored along with the Blanket Policy forms to which it will be attached, the Readability Score is 50.8.

We appreciate the time spent on this filing and trust that you will find everything in order. If there are questions or if additional information is required, please do not hesitate to contact me directly at 215.640.5134 or e-mail karen.moore@ace-ina.com.

Regards,

Karen N. Moore
Compliance Manager

SERFF Tracking Number: ACEH-126011054 State: Arkansas
 Filing Company: ACE American Insurance Company State Tracking Number: 41396
 Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: Blanket - Addl Benefits Amend - Trip Travel
 Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Company and Contact

Filing Contact Information

Karen Moore, Compliance Manager karen.moore@ace-ina.com
 436 Walnut Street (215) 640-5134 [Phone]
 Philadelphia, PA 19106 (215) 640-5548[FAX]

Filing Company Information

ACE American Insurance Company CoCode: 22667 State of Domicile: Pennsylvania
 PO Box 1000 Group Code: 626 Company Type:
 436 Walnut Street
 Philadelphia, PA 19106 Group Name: State ID Number:
 (215) 640-5123 ext. [Phone] FEIN Number: 95-2371728

Filing Fees

Fee Required? Yes
 Fee Amount: \$20.00
 Retaliatory? No
 Fee Explanation: One amendment filed separately from basic form = \$20
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
ACE American Insurance Company	\$20.00	01/29/2009	25348898

SERFF Tracking Number: ACEH-126011054 State: Arkansas
 Filing Company: ACE American Insurance Company State Tracking Number: 41396
 Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: Blanket - Addl Benefits Amend - Trip Travel
 Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	02/03/2009	02/03/2009

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	02/02/2009	02/02/2009	Karen Moore	02/02/2009	02/02/2009

SERFF Tracking Number: ACEH-126011054 State: Arkansas
Filing Company: ACE American Insurance Company State Tracking Number: 41396
Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: Blanket - Addl Benefits Amend - Trip Travel
Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Disposition

Disposition Date: 02/03/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ACEH-126011054 State: Arkansas
 Filing Company: ACE American Insurance Company State Tracking Number: 41396
 Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: Blanket - Addl Benefits Amend - Trip Travel
 Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Item Type	Item Name	Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Form (revised)	Additional Benefits Amendment - Trip Travel	Approved-Closed	Yes
Form	Additional Benefits Amendment - Trip Travel	Replaced	Yes

SERFF Tracking Number: ACEH-126011054 State: Arkansas
Filing Company: ACE American Insurance Company State Tracking Number: 41396
Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: Blanket - Addl Benefits Amend - Trip Travel
Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 02/02/2009

Submitted Date 02/02/2009

Respond By Date

Dear Karen Moore,

This will acknowledge receipt of the captioned filing.

Objection 1

- Additional Benefits Amendment - Trip Travel (Form)

Comment: Our Department will not approve exclusions for terrorism in accident and health or life contracts. Please delete this exclusion.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State

Response Letter Date 02/02/2009

Submitted Date 02/02/2009

Dear Rosalind Minor,

Comments:

Response 1

Comments: Dear Ms. Minor:

In response to today's Objection Letter, please refer to the Arkansas state-specific Amendment, AH-15092-TRP-AR, which replaces that previously submitted. Exclusion (r) under the Checked Baggage and Travel Document Coverage has been deleted.

I trust this will allow your approval.

SERFF Tracking Number: ACEH-126011054 State: Arkansas
 Filing Company: ACE American Insurance Company State Tracking Number: 41396
 Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: Blanket - Addl Benefits Amend - Trip Travel
 Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Please let me know if I can be of further assistance.

Regards,

Karen N. Moore

Related Objection 1

Applies To:

- Additional Benefits Amendment - Trip Travel (Form)

Comment:

Our Department will not approve exclusions for terrorism in accident and health or life contracts. Please delete this exclusion.

Changed Items:

No Supporting Documents changed.

Form Schedule Item Changes

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific Data	Readability Score	Attach Document
Additional Benefits Amendment - Trip Travel	AH-15902-TRP-AR		Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		51	AR - AH-15092-TRP - BA&S - Additional Benefits Amendment - Trip Canc-Delay-Int-Baggage-Trust.pdf

Previous Version

Additional Benefits Amendment - Trip	AH-15902-		Policy/Contract/Fraternal Certificate: Amendment,	Initial		51	AH-15092-
--------------------------------------	-----------	--	---	---------	--	----	-----------

SERFF Tracking Number: ACEH-126011054 State: Arkansas
Filing Company: ACE American Insurance Company State Tracking Number: 41396
Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: Blanket - Addl Benefits Amend - Trip Travel
Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel
Travel TRP

*Insert Page, Endorsement
or Rider*

TRP -
BA&S -
Additional
Benefits
Amendme
nt - Trip
Canc-
Delay-Int-
Baggage-
Trust.pdf

SERFF Tracking Number: ACEH-126011054 State: Arkansas
 Filing Company: ACE American Insurance Company State Tracking Number: 41396
 Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: Blanket - Addl Benefits Amend - Trip Travel
 Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Form Schedule

Lead Form Number: AH-15092-TRP

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	AH-15902-TRP-AR	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Additional Benefits Amendment - Trip Travel	Initial		51	AR - AH-15092-TRP - BA&S - Additional Benefits Amendment - Trip Cancel-Delay-Int-Baggage-Trust.pdf



ACE American Insurance Company
 A Stock Company
 436 Walnut Street
 Philadelphia, PA 19106
 (Herein called We, Us, Our)

Additional Benefits Amendment – Trip Travel

Policy Number: {GLM N}
 Policyholder: {ABC Company }
 [Participating Organization:]

Policy Effective Date: {MM/DD/YYYY}
 Amendment No.:
 [Participating Organization
 Effective Date:]

[Participating Organization Number:]

This Amendment form is made a part of the Policy to which it is attached as of the Effective Date shown above. If no Effective Date is shown, this Amendment takes effect as of the Policy Effective Date. This Amendment ends at the same time as the Policy. It is subject to all of the terms, limitations and conditions of the Policy except as they are changed by it.

[Any changes in premium apply as of the first premium due date on or after the Effective Date of this Amendment.]

The Policy is changed as follows:

{1.} The following are added to the *Schedule of Benefits*:

[TRIP CANCELLATION AND INTERRUPTION BENEFIT

Maximum Limit: {\$15,000 per person}}

[TRIP CANCELLATION BENEFIT

Maximum Limit: {\$15,000 per person}}

[TRIP INTERRUPTION BENEFIT

Maximum Limit: {\$15,000 per person}}

[[TRIP] [TRAVEL] DELAY BENEFIT

Maximum Limit: {\$600 per person}}

[[CHECKED] BAGGAGE & TRAVEL DOCUMENTS BENEFIT

Maximum Limit: {\$1,000 per person}}

[TOUR OPERATOR/AIRLINE DEFAULT BENEFIT {- see benefit}]

[PRE-EXISTING MEDICAL CONDITION EXCLUSION WAIVER {- see waiver}]

2. The following Definitions are added to the *Definitions* Section:

[“**Actual Cash Value**” means the purchase price less depreciation.]

["Aircraft"] means any air conveyance which: a) is organized and licensed for the transportation of passengers for hire; b) is piloted by a person who has a valid and current certificate of competency or a rating which authorizes him or her to pilot the Aircraft; and c) is not operated by the militia or armed forces of any state, national government or international authority.]

["Baggage"] means luggage and personal possessions, whether owned, borrowed or rented, taken by the {Insured/Covered Person} on the Trip.]

["Business Partner"] means a person who shares: a) in a legal business relationship created by voluntary association as a co-owner with the {Insured/Covered Person}; and b) in the management of the {Insured/Covered Person}'s business.]

["Checked Baggage"] means Baggage for which a claim check has been issued to the {Insured/Covered Person} by a Common Carrier.]

["City"] means an incorporated municipality having defined borders and does not include the high seas, uninhabited areas or airspace.]

["Common Carrier"] means a vehicle or service licensed to carry passengers for hire on a regularly scheduled basis.]

["Complication of Pregnancy"] means a condition requiring Hospital confinement, whose diagnosis is distinct from pregnancy but adversely affected or caused by pregnancy, such as: a) acute nephritis or nephrosis; b) cardiac decompensation; c) missed abortion; and d) similar medical and surgical conditions of comparable severity.

Complications of Pregnancy will also include: a) non-elective cesarean section; b) termination of ectopic pregnancy; and c) spontaneous termination of pregnancy, occurring during a period of gestation in which a viable birth is not possible. However, the term Complication of Pregnancy will not include: a) false labor, occasional spotting, or morning sickness; b) Doctor prescribed rest; c) hyperemesis gravidarum; d) pre-eclampsia; or any similar condition associated with the management of a difficult pregnancy not consisting of a nosologically distinct Complication of Pregnancy.]

["Contracted Departure Date"] means the date on which the {Insured/Covered Person} is originally scheduled to leave on the Trip.]

["Covered Expenses"]

- [With regard to Trip Cancellation/Interruption] means:
 - (a) before the Scheduled Departure Date, the lesser of:
 - (1) the cancellation charges imposed by a Travel Supplier for the Covered Trip;
 - (2) the cost of substituting a travel arrangement not provided due to the Financial Insolvency of a Travel Supplier to enable the {Insured/Covered Person} to take the Covered Trip; and
 - (3) all sums prepaid to Travel Suppliers for the Covered Trip that become non-recoverable due to the Financial Insolvency of a Travel Supplier; or
 - (b) after the Scheduled Departure Date:
 - (1) the greater of either:
 - (a) the amount of the unused, non-refundable prepaid air arrangements

- which formed a part of the {Insured/Covered Person}'s Covered Trip; or
- (b) the fare paid, less the value of applied credit from the unused travel tickets, to return to the {Insured/Covered Person}'s place of permanent residence or to continue a Covered Trip {limited to the cost of one-way Economy Airfare, or first class if the {Insured/Covered Person}'s original tickets were first-class} by a scheduled carrier from the Destination point to the point of origin shown on the original travel tickets; and
- (2) the cost of any unused, non-refundable Land and Sea Arrangements prepaid to the Travel Supplier for the {Insured/Covered Person}'s Covered Trip.]
- [With regard to Trip Delay means:
 - (a) any prepaid, unused non-refundable Land and Sea accommodations;
 - (b) any Reasonable Additional Expenses for meals and lodging; or
 - (c) additional cost of Economy Airfare to join scheduled travel arrangements, less the value of applied credit from unused travel tickets.]

[“Covered Trip” means a) A period of round-trip travel away from Home to a Destination outside of the {Insured/Covered Person}'s City of residence; the purpose of the Trip is business or pleasure and is not to obtain health care or treatment of any kind; the Trip has defined departure and return dates specified when the {Insured/Covered Person} applies; the Trip does not exceed 365 days; and the {Insured/Covered Person}'s Destination is not to another Home; travel is primarily by Common Carrier and only incidental by private conveyance; or b) A period of one-way travel that starts in the U.S. or Canada (except U.S. citizens may begin their Trip outside the U.S., if returning to the U.S.); the purpose of the Trip is business or pleasure and is not to obtain health care or treatment of any kind; the Trip has defined departure and arrival dates and defined departure and arrival places specified when the {Insured/Covered Person} applies; travel is primarily by Common Carrier and only incidentally by private conveyance; and the Trip does not exceed {31 days} in length.

In this policy, Covered Trip is also referred to as “Trip”.]

[“Default” means any failure of a provider of travel related services (including any Tour operator) to provide the bargained-for travel services or to refund money due the {Insured/Covered Person}.]

[“Destination” means the place where the {Insured/Covered Person} expects to travel on his or her Trip[, as shown on the Application].]

[“Economy Airfare” means the lowest published rate for a one-way ticket.]

[“Equipment Failure” means any sudden, Unforeseen breakdown in the Common Carrier's equipment that caused a delay or interruption of normal Trips.]

[“Family Member” means a) the {Insured/Covered Person}'s Traveling Companion(s); and b) the {Insured/Covered Person}'s or Traveling Companion(s): 1) Spouse; 2) child; 3) parent; 4) sibling; 5) grandparent or child; 6) step-parent, child or sibling; 7) son- or daughter-in-law; 8) parents-in-law; 9) brother- or sister-in-law; 10) aunt; 11) uncle; 12) niece or nephew; 13) legal guardian; 14) legal ward.

[Family Member also means the {Insured/Covered Person}'s Business Partner. Business Partner means someone who is a majority stockholder, managing officer, or majority owner

of the company. [They all must reside in the U.S. or Canada at the time of purchase of the Policy.]]

["Financial Insolvency"] means a Travel Supplier has ceased operations either after filing a petition for bankruptcy or as a result of a denial of credit or inability to meet financial obligations.]

["Felonious Assault"] means an act of violence against the {Insured/Covered Person} or a Traveling Companion requiring medical treatment in a Hospital. A Felonious Assault may not be inflicted by {an Insured/a Covered Person}, a Family Member, a Traveling Companion or a Traveling Companion's Family Member.]

["Financial Default"] means either: (a) the complete suspension of operations due to financial circumstances, whether or not a bankruptcy petition is filed; or (b) a partial suspension of operations following a filing of a bankruptcy petition.]

["Home"] means the {Insured/Covered Person}'s principle or secondary place of residence.]

["Inclement Weather"] means any severe weather condition, other than a hurricane, which delays the scheduled arrival or departure of a Common Carrier.]

["Initial Trip Payment"] means the date the first deposit is made to the {Insured/Covered Person}'s Travel Agent toward the cost of his or her Trip.]

["Insured Property"] means

[(In regard to [Checked] Baggage Protection): The {Insured/Covered Person}'s [Checked] Baggage and personal effects.

Insured Property does not include any of the following:

- [(1) animals;]
- [(2) automobiles and equipment;]
- [(3) boats, motorcycles, motors or any other vehicles;]
- [(4) other conveyances and their equipment (except bicycles checked as Baggage on a Common Carrier);]
- [(5) household furniture;]
- [(6) contact lenses, eyeglasses or hearing aids;]
- [(7) artificial teeth, dental bridges or limbs;]
- [(8) money or securities;]
- [(9) tickets, documents and valuable papers except for lost or stolen passports or visas;]
- [(10) business samples;] and
- [(11) unauthorized use of credit cards unless the {Insured/Covered Person} has complied with all credit card conditions imposed by the credit card companies.]]

[(In regard to [Checked] Baggage Delay): The {Insured/Covered Person}'s [Checked] Baggage and personal effects which have been checked with a Common Carrier.

Items not covered by this benefit include but are not limited to:

- [(1) contact lenses, eyeglasses or hearing aids;]
- [(2) artificial teeth, dental bridges or limbs;]
- [(3) tickets, documents and valuable papers;] or
- [(4) business samples.]]

["Land/Sea Arrangements"] means Land and/or Sea Arrangements made by the {Insured/Covered Person}'s Travel Agent.]

["Natural Disaster" means fold, hurricane, tornado, earthquake or blizzard that is due to natural causes.]

["On" when used with reference to any Common Carrier, means in or on, boarding or alighting from the conveyance.]

["Reasonable Additional Expense(s)"] means any expense(s) for meals and lodging which were necessarily incurred as the result of a Trip Delay and which were not provided by the Common Carrier or any other party free of charge.]

["Return Destination"] means the place to which the {Insured/Covered Person} expects to return from his or her Trip, {as shown on the Individual Application}.]

["Scheduled Departure Date"] means the date on which the {Insured/Covered Person} is scheduled to leave on his or her Covered Trip. [This date is shown on the {Insured/Covered Person}'s *Schedule of Benefits*.]

["Scheduled Return Date"] means the date on which the {Insured/Covered Person} is scheduled to return from his or her Covered Trip.]

["Spouse"] means a person to whom the Insured is married, or with whom the Insured lives in a spousal relationship.]

["Strike"] means a stoppage of work: a) announced, organized and sanctioned by a labor union; and b) which interferes with the normal departure and arrival of a Common Carrier. Included in the definition of Strike are work slowdowns and sickouts.]

["Terrorism"] means the unsanctioned and illegal use of force which caused destruction of property, Injury, or death by an individual or group for the express or implied purpose of achieving a political, ethnic, or religious goal or result. Terrorism does not include general civil protest, unrest, rioting, or an act of war.]

["Terrorist Incident"] means an act of violence, other than civil disorder or riot, (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government.]

["Tour"] means Trip Arrangements and shall include flight connections to join and depart such Trip Arrangements provided such flights are scheduled to commence within {1} day(s) of the Trip Arrangements.]

["Travel Agent"] means the Travel Agent, Tour operator, or other entity from which the {Insured/Covered Person} purchases his or her coverage or travel arrangements, and includes all officers, employees, and affiliates of the Travel Agent or Tour operator.]

["Travel Arranger"] means the Travel Agent or Travel Agency that is responsible for arranging the pre-paid travel arrangements for the {Insured/Covered Person}'s Trip.]

["Travel Supplier" means the Tour operator, hotel, cruise line or airline providing prepaid travel arrangements for a Covered Trip. Travel Supplier does not mean the person, organization or firm from whom the {Insured/Covered Person} directly purchased and paid for the {Insured/Covered Person}'s Covered Trip.]

["Traveling Companion" means a person who accompanies the {Insured/Covered Person} on the entire Trip [and is named on the {Insured/Covered Person}'s Application for coverage] [and who shares accommodations with the {Insured/Covered Person} for the entire Trip].]

["Traveling Family Members" means the Insured, his or her Spouse and Dependent children [and those of his or her Spouse] under {23} years of age who are traveling with the Insured.]

["Trip" means a Trip or Tour arranged by a Travel Agent. It includes direct flight connections to join and depart the arranged Trip, provided such flights are scheduled to commence during the {Insured/Covered Person}'s Term of Coverage.]

["Unforeseen" means not anticipated or expected and occurring after the effective date of the Policy or certificate.]

["Unforeseen Emergency" means an emergency which: a) could not be foreseen by a Family Member; and b) is outside the Family Member's control; and c) occurs while being transported to a departure point; and d) is directly related to the transportation of a Family Member to that departure point; and e) delays arrival at the departure point at the prescribed time at least one hour.]

3. The following is added to the *Effective Date of Insurance* section:

After Premium is paid by the {Insured/Covered Person} and the Application is completed and signed, the TRIP CANCELLATION BENEFIT will be effective:

- [(a) at 12:01 a.m. on the day after the Application is postmarked {to Us} if coverage is purchased by mail;] or
- [(b) at 12:01 a.m. on the day after the Application is phoned in {to Us} if coverage is purchased by phone;] or
- [(c) at 12:01 a.m. on the day after the Application is faxed {to Us} if coverage is purchased by facsimile;]
- [(d) at 12:01 a.m. on the day after the online purchase confirmation date;]
- [(e) on the day after the Application is completed online.]]

[All other coverages will begin on the later of:

- (a) the date and time the {Insured/Covered Person} starts his or her Trip, or
- (b) the scheduled Trip Departure Date {shown on the Application};
- [(c) the date the Premium is paid;]]

4. The following are added to the *Description of Coverages*:

[TRIP CANCELLATION AND INTERRUPTION

We will pay this benefit [for the actual transportation costs of a Common Carrier,] up to the Maximum Limit shown in the *Schedule of Benefits* if a Trip is [delayed,]cancelled or interrupted for the {Insured/Covered Person}, due to [any of the following Unforeseen reasons]:

- [(a) [Sickness,]Injury, or death of {an Insured/a Covered Person} or [Immediate] {Family Member/or Traveling Companion/or Business Partner}. Injury [or Sickness] must be so disabling as to reasonably cause a Trip to be delayed, canceled, or interrupted. If the {Insured/Covered Person} must cancel or interrupt the Trip due to Injury [or Sickness] of a Family Member, it must be because their condition is life threatening, or because the Family Member requires the {Insured/Covered Person}'s care. Cancellation due to the death of a Family Member or Traveling Companion is covered only if the death occurs within 30 days of the {Insured/Covered Person}'s Scheduled Departure Date.]
- [(b) Financial Default of an airline, cruise line or Tour operator resulting in the complete cessation of services or filing of bankruptcy [up to a maximum of {\$350}]. Excluded is the organization from which the {Insured/Covered Person} purchased this coverage or Financial Default occurring on or before the effective date of coverage.]
- [(c) termination of employment or layoff affecting the {Insured/Covered Person} or his or her Traveling Companion; the individual must have been with the same employer for at least 5 continuous years.]
- [(d) weather conditions or Natural Disasters causing delay, cancellation or interruption of travel.]
- [(e) the {Insured/Covered Person}'s {Home/primary residence} or Destination being made uninhabitable by fire, flood, vandalism, burglary or Natural Disaster.
- [(f) the {Insured/Covered Person} [or a Traveling Companion/Family Member] being subpoenaed, required to serve on jury duty; [being hijacked or quarantined or] being required by a court order to appear as a witness in a legal action, provided the {Insured/Covered Person}, a Family Member traveling with the {Insured/Covered Person}, or a Traveling Companion is not: 1) a party to the legal action, or 2) appearing as a law enforcement officer.]
- [(g) being [directly] involved in or delayed due to a traffic accident en route to departure.]
- [(h) an Unforeseen Emergency occurring while en route to the {Insured/Covered Person}'s departure that delays the {Insured/Covered Person} at least one hour.]
- [(i) military duty[, having leave revoked or being reassigned within {10} days of departure date].]
- [(j) being called into active military service to provide aid or relief in the event of a Natural Disaster.]
- [(k) the {Insured/Covered Person} [or a Traveling Companion] being the victim of a Felonious Assault within {10} days prior to departure.]
- [(l) Strike resulting in the complete cessation of travel services.]
- [(m) carrier-caused delays due to adverse weather or as the result of [organized labor] Strikes that affect public transportation.]
- [(n) travel arrangements canceled by a Tour operator or Common Carrier due to adverse weather or as a result of labor disputes that affect public transportation.]
- [(o) a covered Travel Delay which results in the loss of more than {50}% of the {Insured/Covered Person}'s scheduled Trip length. The {Insured/Covered Person} must have purchased Trip Delay coverage.]
- [(p) a Terrorist Incident in a [foreign] City in which the {Insured/Covered Person} was scheduled to arrive within {30} days following the incident.]
- [(q) an employer-initiated transfer of employment within the same organization of {250} miles or more.]
- [(r) a documented theft of passports or visas.]
- [(s) cancellation of scheduled public transportation as a result of: riot, civil commotion, Strikes,

hijacking, Natural Disasters, motor or railway accidents that were unknown at the time of booking the reservation.]

- [(t) Unforeseen circumstances, which are those events or their consequences which could not have been reasonably foreseen or expected by the {Insured/Covered Person}, and are outside the {Insured/Covered Person}'s control;
[during Covered Activities described in the *Schedule of Benefits*].

[This coverage does not cover loss caused by:

- [(1) carrier caused delays, including an announced, organized, sanctioned union labor Strike that affects public transportation, unless the Policy effective date is prior to when the Strike is foreseeable. A Strike is foreseeable on the date labor union members vote to approve a Strike;]
- [(2) travel arrangements canceled or changed by an airline, cruise line, or Tour operator, unless the cancellation is the result of bad weather or Financial Default, as defined;]
- [(3) changes in plans by the {Insured/Covered Person}, a Family Member, or Traveling Companion, for any reason;]
- [(4) financial circumstances of the {Insured/Covered Person}, a Family Member, or a Traveling Companion;]
- [(5) any business or contractual obligations of the {Insured/Covered Person}, a Family Member, or a Traveling Companion, except for termination or layoff of employment as defined above;]
- [(6) Default by the person, agency, or Tour operator from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements;]
- [(7) any government regulation or prohibition;]
- [(8) an event or circumstance which occurs prior to the effective date of coverage;]
- [(9) personal reasons;]
- [(10) weather.] or,
- [(11) Default caused by Financial Insolvency of the Travel Supplier, or Travel Arranger, from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements, unless due to Financial Insolvency.]

[Limitations: The benefit does not cover:

- [(1) any expenses caused by Injury [or Sickness] which are not verified by an attending Doctor;]
- [(2) any expenses incurred due to a pregnancy, except Complications of Pregnancy;]
- [(3) any expenses incurred due to a Pre-existing Condition. [NOTE: This limitation does not apply if the Pre-existing Conditions Waiver applies;]
- [(4) any expenses in excess of the amount shown in the *Schedule of Benefits*;] and
- [(5) any expenses incurred due to any Financial Insolvency:
 - a) of the person, organization or firm from whom the {Insured/Covered Person} directly purchased or paid for the {Insured/Covered Person}'s Covered Trip;
 - b) which occurred before the {Insured/Covered Person}'s effective date of Trip Cancellation Insurance; and
 - c) which occurs within {7} days following the {Insured/Covered Person}'s effective date of Trip Cancellation Insurance.]

If the {Insured/Covered Person} fails to give Us Notice, We will limit payment under this benefit to the cancellation charges that would have been applicable had prompt Notice been given.]

[TRIP CANCELLATION BENEFITS

We will pay this benefit up to the Maximum Limit shown in the *Schedule of Benefits* for Trips that are delayed or cancelled before the scheduled Trip Departure Date, [due to the reasons shown at the beginning of this section.]

We will pay for the following:

[(a) forfeited, non-refundable, unused prepaid payments, or deposits if the {Insured/Covered Person}'s Trip is canceled due to the reasons shown at the beginning of this section.]

[If the {Insured/Covered Person}'s claim is covered due to the Pre-Existing Medical Conditions Exclusion Waiver, We will not pay any cancellation penalties to which the {Insured/Covered Person} was subject prior to the purchase of this coverage.

If the {Insured/Covered Person} fails to notify the appropriate Travel Supplier(s) of his or her cancellation within {72} hours of becoming aware of the need to cancel, We will pay only the cancellation penalties to which the {Insured/Covered Person} was subject at the time of becoming aware of the need to cancel.

If the {Insured/Covered Person} is medically unable to notify the appropriate Travel Supplier within {72} hours, he or she must notify them as soon as medically possible.]

[(b) additional costs as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion's Trip is canceled, and the {Insured/Covered Person}'s Trip is not canceled due to the reasons shown at the beginning of this section.] [A {\$100} Deductible applies if a Trip is canceled within {8} days of the Scheduled Departure Date.]

[(c) if the {Insured/Covered Person} is forced to temporarily postpone his or her departure date and has set a new departure date, We will pay the additional cost for adjusting the original airfare up to the Economy Airfare over the most direct route.]

[Trip Cancellation: Non-refundable cancellation charges imposed by the Tour Operator and/or airfare cancellation charges for amounts commencing within {1} day of Trip Arrangements due to the reasons shown at the beginning of this section. In no event shall the amount reimbursed exceed the amount prepaid for the {Insured/Covered Person}'s Trip.]

[Special Conditions: The {Insured/Covered Person} must advise the {Travel Provider/Tour operator} as soon as possible in the event of a claim. We will not pay benefits for any additional charges incurred that would not have been charged if the {Insured/Covered Person} notified the {Travel Provider/Tour operator} of cancellation as soon as reasonably possible.]

[TRIP INTERRUPTION BENEFITS

{We will pay this benefit/We will reimburse} up to the Maximum Limit shown in the *Schedule of Benefits* for Trips that have been interrupted or delayed, due to the reasons shown at the beginning of this section.

We will pay for the following:

[(a) forfeited, non-refundable, unused prepaid payments or arrangements for the {Insured/Covered Person}'s Trip if the {Insured/Covered Person}'s Trip is interrupted; or]

[(b) additional transportation expenses [up to {150}% of the {Insured/Covered Person}'s coverage limit, if the {Insured/Covered Person} covered the total non-refundable value of his or her Trip] incurred by the {Insured/Covered Person}, either, (i) to the Return Destination; or (ii) from the place that the {Insured/Covered Person} left the Trip to the place that the {Insured/Covered Person} may rejoin the Trip; or]

[(c) additional transportation expenses incurred by the {Insured/Covered Person} to reach the original Trip Destination if the {Insured/Covered Person} is delayed and leaves after the Trip Departure Date.]

[However, the benefit payable under (b) and (c) above will not exceed the cost of Economy Airfare [or first class if the {Insured/Covered Person}'s original tickets were first class] by the most direct route, less any refunds paid or payable.]

[(d) the {Insured/Covered Person}'s additional cost as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion's Trip is interrupted, and the {Insured/Covered Person}'s Trip is continued.]

[(e) unused, nonrefundable arrangement costs, with the exception of unused airfare.]

[(f) the greater of:

- (i) additional transportation expenses to the {Insured/Covered Person}'s Home, less any refunds paid or payable, not to exceed the cost of Economy Airfare [or first class airfare if the {Insured/Covered Person}'s original tickets were first class]; or
- (ii) the value of the {Insured/Covered Person}'s unused airfare if he or she must return Home due to a covered loss.]

[(g) the charge for a single supplement if the {Insured/Covered Person}'s Traveling Companion or Traveling Family Member's Trip is interrupted but the {Insured/Covered Person}'s is not.]

[(h) reasonable, additional accommodation and transportation expenses [up to \${150} per day] if the {Insured/Covered Person}, his or her Traveling Family Members, or his or her Traveling Companion must remain in the Hospital or has been certified as medically unable to travel.]

[This benefit is provided for a maximum of {5} days.]

[If the {Insured/Covered Person} is interrupted in the course of his or her Trip, the {Insured/Covered Person} must call Us prior to making any additional accommodations or transportation arrangements. Failure to do so may affect his or her coverage.]

[In addition to the General Exclusions, coverage is not provided for losses caused by or as a result of:

- [(i) carrier-caused delays including an announced, organized, sanctioned union labor Strike that affects public transportation, unless the Policy effective date is prior to when the Strike is foreseeable. A Strike is foreseeable on the date labor union members vote to approve a Strike, except as provided elsewhere in this certificate.]
- [(ii) travel arrangements cancelled [or changed] by an airline, cruise line, or Tour operator, except as provided elsewhere in this certificate [unless the cancellation is the result of bad weather].]
- [(iii) changes [in plans] by the {Insured/Covered Person}, a Family Member or Traveling Companion, for any reason.]
- [(iv) financial circumstances of the {Insured/Covered Person}, a Family Member or a Traveling Companion.]
- [(v) any business or contractual obligations of the {Insured/Covered Person}, a Family Member or Traveling Companion.]
- [(vi) Default by the person, agency, or Tour operator from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements.]
- [(vii) any government regulation or prohibition.]
- [(viii) an event which occurs prior to the Effective Date, whether known to the {Insured/Covered Person} or not.]
- [(ix) failure of any Tour operator, Common Carrier, person or agency to provide the bargained-for travel arrangements.]

- [(x) Default caused by Financial Insolvency of the Travel Supplier, or Travel Arranger, from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements, unless due to Financial Insolvency.]

The {Insured/Covered Person}'s Duties In The Event Of Loss: The {Insured/Covered Person} must provide Us documentation of the cancellation, interruption or delay and proof of the expenses incurred.

The {Insured/Covered Person} must provide proof of payment for the Trip such as cancelled checks or credit card statements, proof of refunds received, copies of applicable Tour operator or Common Carrier cancellation policies, and any other information reasonably required to prove the loss.

Claims involving loss due to [Sickness,] Injury or death require signed patient (or next of kin) authorization to release medical information and an attending Doctor's statement.

The {Insured/Covered Person} must provide Us with all unused air, rail, cruise or other tickets if he or she is claiming the value of those unused tickets.]

[[TRIP] [TRAVEL] DELAY BENEFIT

{We will pay incurred expenses/We will reimburse} {[up to] \${200/100} a day/\${100} per person per day} [for up to {five} days] to the Maximum Limit shown on the *Schedule of Benefits* if the {Insured/Covered Person}'s Trip is delayed for more than {6/12} hours for reasonable, additional accommodations and traveling expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable only for one delay of the {Insured/Covered Person}'s Trip. Travel Delay must be caused by reasons listed under the Trip Cancellation and Interruption Benefit, in addition to:

- [(a) carrier delay;]
- [(b) lost or stolen passport, travel documents or money;]
- [(c) quarantine;]
- [(d) Natural Disaster;]
- [(e) Injury [or Sickness] of the {Insured/Covered Person} or a Traveling Companion;]
- [(f) the {Insured/Covered Person} being delayed by a traffic accident while en route to a departure;]
- [(g) hijacking;]
- [(h) [unpublished or] unannounced Strike;]
- [(i) civil disorder [or commotion];]
- [(j) riot;]
- [(k) Inclement Weather which prohibits Common Carrier departure;]
- [(l) a Common Carrier Strike or other job action;]
- [(m) Equipment Failure of a Common Carrier;]
- [(n) the loss of the {Insured/Covered Person}'s and/or Traveling Companion's travel documents, tickets or money due to theft.]

[Limitations: This benefit is limited to {\$100/\$150/\$200} [per day] [per {Insured/Covered Person}] up to the maximum benefit shown in the *Schedule of Benefits*.

Payments for additional accommodation expenses will not exceed {\$100/\$150/\$200} [per day] [per {Insured/Covered Person}] up to the Maximum Limit of Coverage.]

[The {Insured/Covered Person}'s Duties in the Event of Loss: The {Insured/Covered Person} must provide Us with proof of the Travel Delay {such as a letter from the airline, cruise line, or Tour operator/newspaper clipping/weather report/police report or the like} and proof of the expenses claimed as a result of Trip Delay.]

[[CHECKED] BAGGAGE [AND TRAVEL DOCUMENTS] BENEFIT

{We will pay this benefit/We will reimburse} up to the Maximum Limit shown in the *Schedule of Benefits* [subject to a {\$100/\$150/\$200} Deductible per loss]. We will pay for all direct loss [due to accident] of or to the {Insured/Covered Person}'s [Checked] Baggage[, passports and visas] during the {Insured/Covered Person}'s Trip. [We will also pay for loss due to unauthorized use of the {Insured/Covered Person}'s credit cards, if the {Insured/Covered Person} has complied with all credit card conditions imposed by the credit card companies.] [There is a maximum benefit of {\$1,000/\$2,000/\$3,000/\$4,000} per traveling group.]

[Continuation of Coverage: If the {covered [Checked] Baggage/Insured Property},[passports and visas] is/are in the charge of a charter or Common Carrier, and delivery is delayed, this coverage will continue until such {[Checked] Baggage/property} is delivered to the {Insured/Covered Person}. This coverage does not include loss caused by the delay.]

[[Checked] Baggage Protection Benefit: We will pay a benefit up to the Maximum Benefit shown in the *Schedule of Benefits* for loss, theft or damage of {[Checked] Baggage/Insured Property} while on a Covered Trip. The benefit will be equal to the lesser of: (a) the Actual Cash Value at the time of loss, or (b) the cost of repair or replacement.]

[Limitation: Benefits for [Checked] Baggage will be in excess of any amount paid or payable by the Common Carrier responsible for the loss.]

[[Checked] Baggage Repatriation: The {Travel Provider/Tour operator} will reimburse the fees to ship the {Insured/Covered Person}'s [Checked] Baggage and its contents to the {Insured/Covered Person}'s location, anywhere in the world up to the maximum shown in the *Schedule of Benefits*.]

[Destroyed/Damaged [Checked] Baggage: We will reimburse the {Insured/Covered Person} up to the maximum shown in the *Schedule of Benefits* for damage to [Checked] Baggage on a Common Carrier during the Trip. We will pay the lesser of the following: the original cash value of the item less depreciation as determined by Us; or the cost of repair or replacement [limit per article - \${250}]. If receipts are not provided, benefits may be reduced. [All items over {\$100/\$150/\$200/\$250/\$300} must be accompanied by an original receipt.] This benefit excludes the contents of the [Checked] Baggage.]

[Lost [Checked] Baggage: We will reimburse the {Insured/Covered Person} up to the maximum shown in the *Schedule of Benefits* for loss [due to theft or misdirection] of [Checked] Baggage on a Common Carrier during the Trip. [The [Checked] Baggage must be owned by and accompany the {Insured/Covered Person} during the Trip.] [All claims must be documented by the Common Carrier.] [All payments are to accumulate to the Maximum Benefit shown in the Schedule of benefits.]]

[We will pay the lesser of the following: the original cash value of the item less depreciation as determined by Us; or the cost of repair or replacement [limit per article - \${250}]. [If receipts are not provided, benefits may be reduced. All items over {\$100/\$150/\$200/\$250/\$300} must be

accompanied by an original receipt.] [There will be a combined maximum limit of {\$250/\$500/\$1,000} for the following: jewelry, watches, articles consisting in whole or in part of silver, gold, or platinum; furs and articles trimmed with or made mostly with fur. This benefit includes the contents of the [Checked] Baggage.]]

[Lost/Stolen Passport Replacement: The {Travel Provider/Tour operator} will assist with obtaining replacements and reimburse the costs up to the maximum limit shown in the *Schedule of Benefits* to the {Insured/Covered Person} if the {Insured/Covered Person} loses his or her passport while traveling outside the {Insured/Covered Person}'s country of residence.]

[Prescription Replacement Service: For lost, damaged or locally unavailable prescriptions, the {Travel Provider/Tour operator} will coordinate the dispatch and reimburse costs up to the maximum amount shown in the *Schedule of Benefits* of such medications, when possible and legally permissible, to the {Insured/Covered Person} upon the authorization of the prescribing Doctor.]

Property Not Covered: We will not pay for damage or loss of:

- [(a) animals;]
- [(b) bicycles {except when checked with a Common Carrier/except while checked as Baggage};]
- [(c) motor vehicles [and equipment], Aircraft, and other conveyances [and their equipment]; boats, motorcycles, motors or any other vehicles;]
- [(d) artificial limbs, {false/artificial} teeth, {dental bridges/appliances}, any type of eyeglasses, sunglasses or contact lenses; hearing aids;]
- [(e) tickets, except for administrative fees required to reissue tickets; [documents and valuable papers, except for lost or stolen passports or visas];]
- [(f) tickets, keys, money, notes, securities, accounts, bills, currency, deeds, food stamps or other evidence of debt, credit cards and other travel documents [except passports and visas];]
- [(g) money, stamps, stocks and bonds, postal or money orders;]
- [(h) property shipped as freight, or shipped prior to the Trip Departure Date;]
- [(i) credit cards[, except as noted above;]]
- [(j) contraband, illegal transportation or trade;]
- [(k) seizure by any {government/government official/customs official};]
- [(l) household furniture or furnishings;]
- [(m) business {samples/items};]
- [(n) sporting equipment if loss or damage results from the use thereof;]
- [(o) cameras, camera equipment [and accessories];]
- [(p) electronic equipment;]
- [(q) art objects;]
- [(r) property used in trade, business or for the production of income.]
- [(s) perishables and consumables;]
- [(t) portable personal computers, laptop computers, cell phones, electronic organizers and portable CD players, cameras, camera equipment;] or
- [(u) musical instruments.]

[Special Limitation: We will not pay more than {\$100/%200/\$300/\$400/\$500} for the first item and thereafter, no more than {\$50/\$100/\$150/\$200/\$250/\$300} per item up to the limit of coverage as shown in the *Schedule of Benefits*.

We will not pay more than {\$250/\$500/\$750/\$1,000} aggregate on all losses to: jewelry, watches, gems, furs, cameras and camera equipment, camcorders, sporting equipment, computers, radios and other electronic items.

[Items over {\$100/\$150/\$200/\$250/\$300/\$350} should be accompanied by original receipts. If receipts are not provided, benefits may be reduced.]

[Limitations: This benefit is limited to:

[(a) {\$50 to \$300} for any one article or pair of articles, such as earrings or gloves; and

[(b) a total of {\$250 to \$1,000} for all loss of:

[(i) watches or jewelry;]

[(ii) articles consisting in whole or in part of silver, gold or platinum;]

[(iii) furs or articles trimmed with or made with fur;] and

[(iv) cameras and accessories [including lenses/accessories/equipment].]

However, in no event will We pay more than the Maximum Benefit shown in the *Schedule of Benefits*.]

[Additional Exclusions: We will not pay this benefit for loss due to:

[(a) defective materials or craftsmanship;]

[(b) normal wear and tear;]

[(c) [gradual] deterioration;]

[(d) rodents, animals or insects;]

[(e) damage while being worked on;]

[(f) natural defect or damage sustained due to any process or repair;]

[(g) civil war, insurrection, rebellion, revolution or warlike act by a military force, whether war is declared or not declared;]

[(h) confiscation or expropriation by order of any government;]

[(i) destruction, seizure or use of Insured Property for a military purpose;]

[(j) nuclear reaction, nuclear radiation, or radioactive contamination;]

[(k) sporting equipment damaged while being used;]

[(l) breakage of brittle or fragile articles, cameras, [camera equipment and accessories], musical instruments, radios and similar property computers or laptop computers;]

[(m) electronic equipment and business items;]

[(n) inherent vice or damage;]

[(o) theft or pilferage while left unattended in any vehicle;]

[(p) mysterious disappearance;]

[(q) lost or stolen passport, travel documents, or credit cards;]

[(r) art objects;]

[(s) breakage;]

[(t) theft or pilferage while left unattended unless there are visible signs of forcible entry;]

[(u) electrical current, including electric arcing that damages or destroys electrical devices or appliances.] or

[(v) usurped power or action taken by governmental authority in hindering, combating or defending against such an occurrence.]

[Payment of Loss: We will pay the lesser of the cost to repair an item, or to replace it with an item of like kind and quality. [We will pay, in cash, the cost of repair or replacement of the {Insured/Covered Person}'s damaged [Checked] Baggage, less depreciation; or at Our option repair or replace the {Insured/Covered Person}'s [Checked] Baggage. We will notify the {Insured/Covered Person} within {15/30/45/60} days after We receive his or her proof of loss. We may take all or part

of the damaged [Checked] Baggage at the appraised or agreed value. In the event of a loss to a pair or set of items, We may, at Our option:

- (a) repair or replace any part to restore the pair or set to its value before the loss; or
- (b) pay the difference between the value of the property before and after the loss.]

[This coverage is excess over any other coverage or indemnity.]]

[TOUR OPERATOR/AIRLINE DEFAULT BENEFIT

This benefit pays lost deposits due to the Financial Default of any airline or Tour operator. Default by the person, agency or Tour operator from whom the {Insured/Covered Person} purchased travel arrangements or this coverage is excluded.]

5. The following are added to *Hazards Insured Against*:

[Exposure and Disappearance

Coverage under this hazard includes exposure to the elements after the forced landing, stranding, sinking, or wrecking of a vehicle in which the {Insured/Covered Person} was traveling.

{An Insured/A Covered Person} is presumed dead if:

1. he or she is in a vehicle that disappears, sinks or is stranded or wrecked on a Trip covered by this Policy; and
2. the body is not found within {six months/one year} of the Covered Accident.]

[School Coverage

The Covered Accident [or Sickness] must take place:

1. on School premises during normal School hours;
2. on School premises after normal School hours; or
3. at another School or site where the Covered Activity is scheduled.

[The Covered Activity includes travel without deviation or interruption:

1. between Home and School; or
2. between the site of the Covered Activity and Home or School when the {Insured/Covered Person} is scheduled to attend the Covered Activity.

Benefits are paid as described in this Policy if the Covered Accident [or Sickness] occurs while the {Insured/Covered Person} is in a vehicle:

1. operated by a properly licensed driver over the age of {19, 21, 23, 24, 25} who is under the direct supervision of the School;
2. and travel time does not exceed {1 –24 hours} each way.

Travel time includes the time:

1. to or from Home or School and the Covered Activity;
2. before the required attendance time; and
3. after dismissal and after completing any extra duties assigned by the School.]]

[Sports Coverage

The Covered Accident [or Sickness] must take place while:

1. participating as a member of the team in a scheduled game, official tournament game, or practice session; or
2. serving as an equipment manager, scorekeeper, trainer or volunteer worker for the team.

[The Covered Activity includes travel without deviation or interruption:

1. between Home and practice sessions for the game or competition; or
2. between the site of the game or competition and Home or School when the {Insured/Covered Person} is scheduled to attend the game or competition.

Benefits are paid as described in this Policy if the Covered Accident [or Sickness] occurs while the {Insured/Covered Person} is in a vehicle:

1. operated by a properly licensed driver over the age of {19, 21, 23, 24, 25} who is under the direct supervision of the School;
2. and travel time does not exceed {1 –24 hours} each way.

Travel time includes the time:

1. to or from Home or School and the Covered Activity;
2. before the required attendance time; and
3. after dismissal and after completing any extra duties assigned by the School.]]

[Volunteer Activities Coverage

The Covered Accident [or Sickness] must take place while:

1. participating in activities sponsored and supervised by the {organization/Policyholder} or
2. traveling with a group in connection with such activities.]

6. The following Exclusions are added to the *General Exclusions* section:

- [[{62.} pregnancy or childbirth, or elective abortion, other than Complications of Pregnancy;]
- [[{63.} auto eroticism by the Insured, Covered Person, Immediate Family Member, Traveling Companion or Business Partner;]
- [[{64.} panic attacks and post-traumatic stress disorder[, except if hospitalized];]

7. The following provisions are added:

[Pre-existing Medical Condition Exclusion Applicable To All Coverages

The Policy will not pay for loss or expense incurred as the result of Injury [or Sickness] of the {Insured/Covered Person} or Family Member which manifests itself during the {30 to 90} days immediately preceding and including the Effective Date, unless the condition is controlled through the taking of prescription drugs or medication and remains controlled throughout the {30 to 90} day period. [A Sickness has manifested itself when: (a) medical care or treatment has been given; or (b) there exist symptoms which would cause a reasonably prudent person to seek diagnosis, care, or treatment.]]

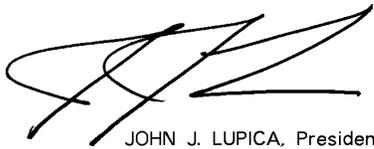
[Pre-existing Medical Condition Exclusion Waiver

The above exclusion does not apply if insurance was purchased within {7, 14} calendar days of the Initial Trip Payment. In order to receive the Waiver of Pre-existing Conditions, the amount of Trip Cancellation coverage purchased must equal the full [non-refundable] cost of all Trip arrangements. The {Insured/Covered Person} must be medically able to travel when the Premium is paid.

If insurance was purchased within {7, 14} calendar days of the Initial Trip Payment, the Pre-existing Medical Condition Exclusion will be waived. This is applicable to all coverages contained in the Policy. The {Insured/Covered Person} must be medically able to travel when the {Insured/Covered Person} pays the Premium. In the event that a claim is filed, the Injury [or Sickness] must be substantiated to Our Claims Department.]

This Amendment ends at the same time as the Policy.

Signed for ACE American Insurance Company in Philadelphia, Pennsylvania.



JOHN J. LUPICA, President



GEORGE D. MULLIGAN, Secretary

SERFF Tracking Number: *ACEH-126011054* *State:* *Arkansas*
Filing Company: *ACE American Insurance Company* *State Tracking Number:* *41396*
Company Tracking Number: *BLK/GLM - TRIP TRAVEL AMEND*
TOI: *H04 Health - Blanket Accident/Sickness* *Sub-TOI:* *H04.000 Health - Blanket Accident/Sickness*
Product Name: *Blanket - Addl Benefits Amend - Trip Travel*
Project Name/Number: *Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: ACEH-126011054 State: Arkansas
Filing Company: ACE American Insurance Company State Tracking Number: 41396
Company Tracking Number: BLK/GLM - TRIP TRAVEL AMEND
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: Blanket - Addl Benefits Amend - Trip Travel
Project Name/Number: Blanket - Addl Benefits Amend - Trip Travel/Blanket - Addl Benefits Amend - Trip Travel

Supporting Document Schedules

Satisfied -Name: Flesch Certification **Review Status:** Approved-Closed 02/03/2009
Comments:
Attachments:
Blk Acc - GLM - AH-15092-TRP- Readability Cert.pdf
AR - Certif of Compliance with Rule 19.pdf

Bypassed -Name: Application **Review Status:** Approved-Closed 02/03/2009
Bypass Reason: Not applicable to this submission.
Comments:

ACE American Insurance Company

436 Walnut Street
Philadelphia, Pennsylvania 19106

READABILITY CERTIFICATION

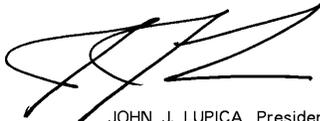
SCHEDULE OF FORMS

I hereby certify that the following forms were tested for readability using the Rudolf Flesch Formula and achieved the following results.

January 2009

**RE: Blanket Accident and Blanket Accident and Sickness Policies
Amendment – AH-15092-TRP**

Form Number	Description	Score
AH-15092-TRP	Additional Benefits Amendment- Trip Travel	50.8



JOHN J. LUPICA, President

Person Responsible for this filing: Karen Moore, Compliance Manager
ACE USA Accident & Health Department
karen.moore@ace-ina.com
(After 2/9/2009, Email will change to
karen.moore@acegroup.com)
215.640.5134

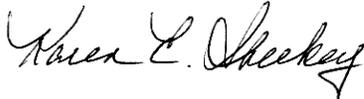
**Certificate of Compliance with
Arkansas Rule and Regulation 19**

Insurer: Ace American Insurance Company

AH-15092-TRP

Form Number(s):

I hereby certify that the filing above meets all applicable Arkansas requirements including the Requirements of Rule and Regulation 19.



Signature of Company Officer

Karen E. Sheekey

Name

Compliance & Communications Officer

Title

01/29/2009

Date



ACE American Insurance Company
 A Stock Company
 436 Walnut Street
 Philadelphia, PA 19106
 (Herein called We, Us, Our)

Additional Benefits Amendment – Trip Travel

Policy Number: {GLM N}
 Policyholder: {ABC Company }
 [Participating Organization:]

Policy Effective Date: {MM/DD/YYYY}
 Amendment No.:
 [Participating Organization
 Effective Date:]

[Participating Organization Number:]

This Amendment form is made a part of the Policy to which it is attached as of the Effective Date shown above. If no Effective Date is shown, this Amendment takes effect as of the Policy Effective Date. This Amendment ends at the same time as the Policy. It is subject to all of the terms, limitations and conditions of the Policy except as they are changed by it.

[Any changes in premium apply as of the first premium due date on or after the Effective Date of this Amendment.]

The Policy is changed as follows:

{1.} The following are added to the *Schedule of Benefits*:

[TRIP CANCELLATION AND INTERRUPTION BENEFIT
 Maximum Limit: {\$15,000 per person}}

[TRIP CANCELLATION BENEFIT
 Maximum Limit: {\$15,000 per person}}

[TRIP INTERRUPTION BENEFIT
 Maximum Limit: {\$15,000 per person}}

[[TRIP] [TRAVEL] DELAY BENEFIT
 Maximum Limit: {\$600 per person}}

[[CHECKED] BAGGAGE & TRAVEL DOCUMENTS BENEFIT
 Maximum Limit: {\$1,000 per person}}

[TOUR OPERATOR/AIRLINE DEFAULT BENEFIT {- see benefit}]

[PRE-EXISTING MEDICAL CONDITION EXCLUSION WAIVER {- see waiver}]

2. The following Definitions are added to the *Definitions* Section:

[“**Actual Cash Value**” means the purchase price less depreciation.]

["Aircraft"] means any air conveyance which: a) is organized and licensed for the transportation of passengers for hire; b) is piloted by a person who has a valid and current certificate of competency or a rating which authorizes him or her to pilot the Aircraft; and c) is not operated by the militia or armed forces of any state, national government or international authority.]

["Baggage"] means luggage and personal possessions, whether owned, borrowed or rented, taken by the {Insured/Covered Person} on the Trip.]

["Business Partner"] means a person who shares: a) in a legal business relationship created by voluntary association as a co-owner with the {Insured/Covered Person}; and b) in the management of the {Insured/Covered Person}'s business.]

["Checked Baggage"] means Baggage for which a claim check has been issued to the {Insured/Covered Person} by a Common Carrier.]

["City"] means an incorporated municipality having defined borders and does not include the high seas, uninhabited areas or airspace.]

["Common Carrier"] means a vehicle or service licensed to carry passengers for hire on a regularly scheduled basis.]

["Complication of Pregnancy"] means a condition requiring Hospital confinement, whose diagnosis is distinct from pregnancy but adversely affected or caused by pregnancy, such as: a) acute nephritis or nephrosis; b) cardiac decompensation; c) missed abortion; and d) similar medical and surgical conditions of comparable severity.

Complications of Pregnancy will also include: a) non-elective cesarean section; b) termination of ectopic pregnancy; and c) spontaneous termination of pregnancy, occurring during a period of gestation in which a viable birth is not possible. However, the term Complication of Pregnancy will not include: a) false labor, occasional spotting, or morning sickness; b) Doctor prescribed rest; c) hyperemesis gravidarum; d) pre-eclampsia; or any similar condition associated with the management of a difficult pregnancy not consisting of a nosologically distinct Complication of Pregnancy.]

["Contracted Departure Date"] means the date on which the {Insured/Covered Person} is originally scheduled to leave on the Trip.]

["Covered Expenses"]

- [With regard to Trip Cancellation/Interruption] means:
 - (a) before the Scheduled Departure Date, the lesser of:
 - (1) the cancellation charges imposed by a Travel Supplier for the Covered Trip;
 - (2) the cost of substituting a travel arrangement not provided due to the Financial Insolvency of a Travel Supplier to enable the {Insured/Covered Person} to take the Covered Trip; and
 - (3) all sums prepaid to Travel Suppliers for the Covered Trip that become non-recoverable due to the Financial Insolvency of a Travel Supplier; or
 - (b) after the Scheduled Departure Date:
 - (1) the greater of either:
 - (a) the amount of the unused, non-refundable prepaid air arrangements

- which formed a part of the {Insured/Covered Person}'s Covered Trip; or
- (b) the fare paid, less the value of applied credit from the unused travel tickets, to return to the {Insured/Covered Person}'s place of permanent residence or to continue a Covered Trip {limited to the cost of one-way Economy Airfare, or first class if the {Insured/Covered Person}'s original tickets were first-class} by a scheduled carrier from the Destination point to the point of origin shown on the original travel tickets; and
 - (2) the cost of any unused, non-refundable Land and Sea Arrangements prepaid to the Travel Supplier for the {Insured/Covered Person}'s Covered Trip.]
- [With regard to Trip Delay means:
 - (a) any prepaid, unused non-refundable Land and Sea accommodations;
 - (b) any Reasonable Additional Expenses for meals and lodging; or
 - (c) additional cost of Economy Airfare to join scheduled travel arrangements, less the value of applied credit from unused travel tickets.]

[“Covered Trip” means a) A period of round-trip travel away from Home to a Destination outside of the {Insured/Covered Person}'s City of residence; the purpose of the Trip is business or pleasure and is not to obtain health care or treatment of any kind; the Trip has defined departure and return dates specified when the {Insured/Covered Person} applies; the Trip does not exceed 365 days; and the {Insured/Covered Person}'s Destination is not to another Home; travel is primarily by Common Carrier and only incidental by private conveyance; or b) A period of one-way travel that starts in the U.S. or Canada (except U.S. citizens may begin their Trip outside the U.S., if returning to the U.S.); the purpose of the Trip is business or pleasure and is not to obtain health care or treatment of any kind; the Trip has defined departure and arrival dates and defined departure and arrival places specified when the {Insured/Covered Person} applies; travel is primarily by Common Carrier and only incidentally by private conveyance; and the Trip does not exceed {31 days} in length.

In this policy, Covered Trip is also referred to as “Trip”.]

[“Default” means any failure of a provider of travel related services (including any Tour operator) to provide the bargained-for travel services or to refund money due the {Insured/Covered Person}.]

[“Destination” means the place where the {Insured/Covered Person} expects to travel on his or her Trip[, as shown on the Application].]

[“Economy Airfare” means the lowest published rate for a one-way ticket.]

[“Equipment Failure” means any sudden, Unforeseen breakdown in the Common Carrier's equipment that caused a delay or interruption of normal Trips.]

[“Family Member” means a) the {Insured/Covered Person}'s Traveling Companion(s); and b) the {Insured/Covered Person}'s or Traveling Companion(s): 1) Spouse; 2) child; 3) parent; 4) sibling; 5) grandparent or child; 6) step-parent, child or sibling; 7) son- or daughter-in-law; 8) parents-in-law; 9) brother- or sister-in-law; 10) aunt; 11) uncle; 12) niece or nephew; 13) legal guardian; 14) legal ward.

[Family Member also means the {Insured/Covered Person}'s Business Partner. Business Partner means someone who is a majority stockholder, managing officer, or majority owner

of the company. [They all must reside in the U.S. or Canada at the time of purchase of the Policy.]]

["Financial Insolvency"] means a Travel Supplier has ceased operations either after filing a petition for bankruptcy or as a result of a denial of credit or inability to meet financial obligations.]

["Felonious Assault"] means an act of violence against the {Insured/Covered Person} or a Traveling Companion requiring medical treatment in a Hospital. A Felonious Assault may not be inflicted by {an Insured/a Covered Person}, a Family Member, a Traveling Companion or a Traveling Companion's Family Member.]

["Financial Default"] means either: (a) the complete suspension of operations due to financial circumstances, whether or not a bankruptcy petition is filed; or (b) a partial suspension of operations following a filing of a bankruptcy petition.]

["Home"] means the {Insured/Covered Person}'s principle or secondary place of residence.]

["Inclement Weather"] means any severe weather condition, other than a hurricane, which delays the scheduled arrival or departure of a Common Carrier.]

["Initial Trip Payment"] means the date the first deposit is made to the {Insured/Covered Person}'s Travel Agent toward the cost of his or her Trip.]

["Insured Property"] means

[(In regard to [Checked] Baggage Protection): The {Insured/Covered Person}'s [Checked] Baggage and personal effects.

Insured Property does not include any of the following:

- [(1) animals;]
- [(2) automobiles and equipment;]
- [(3) boats, motorcycles, motors or any other vehicles;]
- [(4) other conveyances and their equipment (except bicycles checked as Baggage on a Common Carrier);]
- [(5) household furniture;]
- [(6) contact lenses, eyeglasses or hearing aids;]
- [(7) artificial teeth, dental bridges or limbs;]
- [(8) money or securities;]
- [(9) tickets, documents and valuable papers except for lost or stolen passports or visas;]
- [(10) business samples;] and
- [(11) unauthorized use of credit cards unless the {Insured/Covered Person} has complied with all credit card conditions imposed by the credit card companies.]]

[(In regard to [Checked] Baggage Delay): The {Insured/Covered Person}'s [Checked] Baggage and personal effects which have been checked with a Common Carrier.

Items not covered by this benefit include but are not limited to:

- [(1) contact lenses, eyeglasses or hearing aids;]
- [(2) artificial teeth, dental bridges or limbs;]
- [(3) tickets, documents and valuable papers;] or
- [(4) business samples.]]

["Land/Sea Arrangements"] means Land and/or Sea Arrangements made by the {Insured/Covered Person}'s Travel Agent.]

["Natural Disaster"] means flood, hurricane, tornado, earthquake or blizzard that is due to natural causes.]

["On"] when used with reference to any Common Carrier, means in or on, boarding or alighting from the conveyance.]

["Reasonable Additional Expense(s)"] means any expense(s) for meals and lodging which were necessarily incurred as the result of a Trip Delay and which were not provided by the Common Carrier or any other party free of charge.]

["Return Destination"] means the place to which the {Insured/Covered Person} expects to return from his or her Trip, {as shown on the Individual Application}.]

["Scheduled Departure Date"] means the date on which the {Insured/Covered Person} is scheduled to leave on his or her Covered Trip. [This date is shown on the {Insured/Covered Person}'s *Schedule of Benefits*.]

["Scheduled Return Date"] means the date on which the {Insured/Covered Person} is scheduled to return from his or her Covered Trip.]

["Spouse"] means a person to whom the Insured is married, or with whom the Insured lives in a spousal relationship.]

["Strike"] means a stoppage of work: a) announced, organized and sanctioned by a labor union; and b) which interferes with the normal departure and arrival of a Common Carrier. Included in the definition of Strike are work slowdowns and sickouts.]

["Terrorism"] means the unsanctioned and illegal use of force which caused destruction of property, injury, or death by an individual or group for the express or implied purpose of achieving a political, ethnic, or religious goal or result. Terrorism does not include general civil protest, unrest, rioting, or an act of war.]

["Terrorist Incident"] means an act of violence, other than civil disorder or riot, (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government.]

["Tour"] means Trip Arrangements and shall include flight connections to join and depart such Trip Arrangements provided such flights are scheduled to commence within {1} day(s) of the Trip Arrangements.]

["Travel Agent"] means the Travel Agent, Tour operator, or other entity from which the {Insured/Covered Person} purchases his or her coverage or travel arrangements, and includes all officers, employees, and affiliates of the Travel Agent or Tour operator.]

["Travel Arranger"] means the Travel Agent or Travel Agency that is responsible for arranging the pre-paid travel arrangements for the {Insured/Covered Person}'s Trip.]

["Travel Supplier" means the Tour operator, hotel, cruise line or airline providing prepaid travel arrangements for a Covered Trip. Travel Supplier does not mean the person, organization or firm from whom the {Insured/Covered Person} directly purchased and paid for the {Insured/Covered Person}'s Covered Trip.]

["Traveling Companion" means a person who accompanies the {Insured/Covered Person} on the entire Trip [and is named on the {Insured/Covered Person}'s Application for coverage] [and who shares accommodations with the {Insured/Covered Person} for the entire Trip].]

["Traveling Family Members" means the Insured, his or her Spouse and Dependent children [and those of his or her Spouse] under {23} years of age who are traveling with the Insured.]

["Trip" means a Trip or Tour arranged by a Travel Agent. It includes direct flight connections to join and depart the arranged Trip, provided such flights are scheduled to commence during the {Insured/Covered Person}'s Term of Coverage.]

["Unforeseen" means not anticipated or expected and occurring after the effective date of the Policy or certificate.]

["Unforeseen Emergency" means an emergency which: a) could not be foreseen by a Family Member; and b) is outside the Family Member's control; and c) occurs while being transported to a departure point; and d) is directly related to the transportation of a Family Member to that departure point; and e) delays arrival at the departure point at the prescribed time at least one hour.]

3. The following is added to the *Effective Date of Insurance* section:

After Premium is paid by the {Insured/Covered Person} and the Application is completed and signed, the TRIP CANCELLATION BENEFIT will be effective:

- [(a) at 12:01 a.m. on the day after the Application is postmarked {to Us} if coverage is purchased by mail;] or
- [(b) at 12:01 a.m. on the day after the Application is phoned in {to Us} if coverage is purchased by phone;] or
- [(c) at 12:01 a.m. on the day after the Application is faxed {to Us} if coverage is purchased by facsimile;]
- [(d) at 12:01 a.m. on the day after the online purchase confirmation date;]
- [(e) on the day after the Application is completed online.]]

[All other coverages will begin on the later of:

- (a) the date and time the {Insured/Covered Person} starts his or her Trip, or
- (b) the scheduled Trip Departure Date {shown on the Application};
- [(c) the date the Premium is paid;]]

4. The following are added to the *Description of Coverages*:

[TRIP CANCELLATION AND INTERRUPTION

We will pay this benefit [for the actual transportation costs of a Common Carrier,] up to the Maximum Limit shown in the *Schedule of Benefits* if a Trip is [delayed,]cancelled or interrupted for the {Insured/Covered Person}, due to [any of the following Unforeseen reasons]:

- [(a) [Sickness,]Injury, or death of {an Insured/a Covered Person} or [Immediate] {Family Member/or Traveling Companion/or Business Partner}. Injury [or Sickness] must be so disabling as to reasonably cause a Trip to be delayed, canceled, or interrupted. If the {Insured/Covered Person} must cancel or interrupt the Trip due to Injury [or Sickness] of a Family Member, it must be because their condition is life threatening, or because the Family Member requires the {Insured/Covered Person}'s care. Cancellation due to the death of a Family Member or Traveling Companion is covered only if the death occurs within 30 days of the {Insured/Covered Person}'s Scheduled Departure Date.]
- [(b) Financial Default of an airline, cruise line or Tour operator resulting in the complete cessation of services or filing of bankruptcy [up to a maximum of {\$350}]. Excluded is the organization from which the {Insured/Covered Person} purchased this coverage or Financial Default occurring on or before the effective date of coverage.]
- [(c) termination of employment or layoff affecting the {Insured/Covered Person} or his or her Traveling Companion; the individual must have been with the same employer for at least 5 continuous years.]
- [(d) weather conditions or Natural Disasters causing delay, cancellation or interruption of travel.]
- [(e) the {Insured/Covered Person}'s {Home/primary residence} or Destination being made uninhabitable by fire, flood, vandalism, burglary or Natural Disaster.
- [(f) the {Insured/Covered Person} [or a Traveling Companion/Family Member] being subpoenaed, required to serve on jury duty; [being hijacked or quarantined or] being required by a court order to appear as a witness in a legal action, provided the {Insured/Covered Person}, a Family Member traveling with the {Insured/Covered Person}, or a Traveling Companion is not: 1) a party to the legal action, or 2) appearing as a law enforcement officer.]
- [(g) being [directly] involved in or delayed due to a traffic accident en route to departure.]
- [(h) an Unforeseen Emergency occurring while en route to the {Insured/Covered Person}'s departure that delays the {Insured/Covered Person} at least one hour.]
- [(i) military duty[, having leave revoked or being reassigned within {10} days of departure date].]
- [(j) being called into active military service to provide aid or relief in the event of a Natural Disaster.]
- [(k) the {Insured/Covered Person} [or a Traveling Companion] being the victim of a Felonious Assault within {10} days prior to departure.]
- [(l) Strike resulting in the complete cessation of travel services.]
- [(m) carrier-caused delays due to adverse weather or as the result of [organized labor] Strikes that affect public transportation.]
- [(n) travel arrangements canceled by a Tour operator or Common Carrier due to adverse weather or as a result of labor disputes that affect public transportation.]
- [(o) a covered Travel Delay which results in the loss of more than {50}% of the {Insured/Covered Person}'s scheduled Trip length. The {Insured/Covered Person} must have purchased Trip Delay coverage.]
- [(p) a Terrorist Incident in a [foreign] City in which the {Insured/Covered Person} was scheduled to arrive within {30} days following the incident.]
- [(q) an employer-initiated transfer of employment within the same organization of {250} miles or more.]
- [(r) a documented theft of passports or visas.]
- [(s) cancellation of scheduled public transportation as a result of: riot, civil commotion, Strikes,

hijacking, Natural Disasters, motor or railway accidents that were unknown at the time of booking the reservation.]

- [(t) Unforeseen circumstances, which are those events or their consequences which could not have been reasonably foreseen or expected by the {Insured/Covered Person}, and are outside the {Insured/Covered Person}'s control;
[during Covered Activities described in the *Schedule of Benefits*].

[This coverage does not cover loss caused by:

- [(1) carrier caused delays, including an announced, organized, sanctioned union labor Strike that affects public transportation, unless the Policy effective date is prior to when the Strike is foreseeable. A Strike is foreseeable on the date labor union members vote to approve a Strike;]
- [(2) travel arrangements canceled or changed by an airline, cruise line, or Tour operator, unless the cancellation is the result of bad weather or Financial Default, as defined;]
- [(3) changes in plans by the {Insured/Covered Person}, a Family Member, or Traveling Companion, for any reason;]
- [(4) financial circumstances of the {Insured/Covered Person}, a Family Member, or a Traveling Companion;]
- [(5) any business or contractual obligations of the {Insured/Covered Person}, a Family Member, or a Traveling Companion, except for termination or layoff of employment as defined above;]
- [(6) Default by the person, agency, or Tour operator from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements;]
- [(7) any government regulation or prohibition;]
- [(8) an event or circumstance which occurs prior to the effective date of coverage;]
- [(9) personal reasons;]
- [(10) weather.] or,
- [(11) Default caused by Financial Insolvency of the Travel Supplier, or Travel Arranger, from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements, unless due to Financial Insolvency.]

[Limitations: The benefit does not cover:

- [(1) any expenses caused by Injury [or Sickness] which are not verified by an attending Doctor;]
- [(2) any expenses incurred due to a pregnancy, except Complications of Pregnancy;]
- [(3) any expenses incurred due to a Pre-existing Condition. [NOTE: This limitation does not apply if the Pre-existing Conditions Waiver applies;]
- [(4) any expenses in excess of the amount shown in the *Schedule of Benefits*;] and
- [(5) any expenses incurred due to any Financial Insolvency:
 - a) of the person, organization or firm from whom the {Insured/Covered Person} directly purchased or paid for the {Insured/Covered Person}'s Covered Trip;
 - b) which occurred before the {Insured/Covered Person}'s effective date of Trip Cancellation Insurance; and
 - c) which occurs within {7} days following the {Insured/Covered Person}'s effective date of Trip Cancellation Insurance.]

If the {Insured/Covered Person} fails to give Us Notice, We will limit payment under this benefit to the cancellation charges that would have been applicable had prompt Notice been given.]

[TRIP CANCELLATION BENEFITS

We will pay this benefit up to the Maximum Limit shown in the *Schedule of Benefits* for Trips that are delayed or cancelled before the scheduled Trip Departure Date, [due to the reasons shown at the beginning of this section.]

We will pay for the following:

[(a) forfeited, non-refundable, unused prepaid payments, or deposits if the {Insured/Covered Person}'s Trip is canceled due to the reasons shown at the beginning of this section.]

[If the {Insured/Covered Person}'s claim is covered due to the Pre-Existing Medical Conditions Exclusion Waiver, We will not pay any cancellation penalties to which the {Insured/Covered Person} was subject prior to the purchase of this coverage.

If the {Insured/Covered Person} fails to notify the appropriate Travel Supplier(s) of his or her cancellation within {72} hours of becoming aware of the need to cancel, We will pay only the cancellation penalties to which the {Insured/Covered Person} was subject at the time of becoming aware of the need to cancel.

If the {Insured/Covered Person} is medically unable to notify the appropriate Travel Supplier within {72} hours, he or she must notify them as soon as medically possible.]

[(b) additional costs as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion's Trip is canceled, and the {Insured/Covered Person}'s Trip is not canceled due to the reasons shown at the beginning of this section.] [A {\$100} Deductible applies if a Trip is canceled within {8} days of the Scheduled Departure Date.]

[(c) if the {Insured/Covered Person} is forced to temporarily postpone his or her departure date and has set a new departure date, We will pay the additional cost for adjusting the original airfare up to the Economy Airfare over the most direct route.]

[Trip Cancellation: Non-refundable cancellation charges imposed by the Tour Operator and/or airfare cancellation charges for amounts commencing within {1} day of Trip Arrangements due to the reasons shown at the beginning of this section. In no event shall the amount reimbursed exceed the amount prepaid for the {Insured/Covered Person}'s Trip.]

[Special Conditions: The {Insured/Covered Person} must advise the {Travel Provider/Tour operator} as soon as possible in the event of a claim. We will not pay benefits for any additional charges incurred that would not have been charged if the {Insured/Covered Person} notified the {Travel Provider/Tour operator} of cancellation as soon as reasonably possible.]

[TRIP INTERRUPTION BENEFITS

{We will pay this benefit/We will reimburse} up to the Maximum Limit shown in the *Schedule of Benefits* for Trips that have been interrupted or delayed, due to the reasons shown at the beginning of this section.

We will pay for the following:

[(a) forfeited, non-refundable, unused prepaid payments or arrangements for the {Insured/Covered Person}'s Trip if the {Insured/Covered Person}'s Trip is interrupted; or]

[(b) additional transportation expenses [up to {150}% of the {Insured/Covered Person}'s coverage limit, if the {Insured/Covered Person} covered the total non-refundable value of his or her Trip] incurred by the {Insured/Covered Person}, either, (i) to the Return Destination; or (ii) from the place that the {Insured/Covered Person} left the Trip to the place that the {Insured/Covered Person} may rejoin the Trip; or]

[(c) additional transportation expenses incurred by the {Insured/Covered Person} to reach the original Trip Destination if the {Insured/Covered Person} is delayed and leaves after the Trip Departure Date.]

[However, the benefit payable under (b) and (c) above will not exceed the cost of Economy Airfare [or first class if the {Insured/Covered Person}'s original tickets were first class] by the most direct route, less any refunds paid or payable.]

[(d) the {Insured/Covered Person}'s additional cost as a result of a change in the per-person occupancy rate for prepaid travel arrangements if a Traveling Companion's Trip is interrupted, and the {Insured/Covered Person}'s Trip is continued.]

[(e) unused, nonrefundable arrangement costs, with the exception of unused airfare.]

[(f) the greater of:

- (i) additional transportation expenses to the {Insured/Covered Person}'s Home, less any refunds paid or payable, not to exceed the cost of Economy Airfare [or first class airfare if the {Insured/Covered Person}'s original tickets were first class]; or
- (ii) the value of the {Insured/Covered Person}'s unused airfare if he or she must return Home due to a covered loss.]

[(g) the charge for a single supplement if the {Insured/Covered Person}'s Traveling Companion or Traveling Family Member's Trip is interrupted but the {Insured/Covered Person}'s is not.]

[(h) reasonable, additional accommodation and transportation expenses [up to \${150} per day] if the {Insured/Covered Person}, his or her Traveling Family Members, or his or her Traveling Companion must remain in the Hospital or has been certified as medically unable to travel.]

[This benefit is provided for a maximum of {5} days.]

[If the {Insured/Covered Person} is interrupted in the course of his or her Trip, the {Insured/Covered Person} must call Us prior to making any additional accommodations or transportation arrangements. Failure to do so may affect his or her coverage.]

[In addition to the General Exclusions, coverage is not provided for losses caused by or as a result of:

- [(i) carrier-caused delays including an announced, organized, sanctioned union labor Strike that affects public transportation, unless the Policy effective date is prior to when the Strike is foreseeable. A Strike is foreseeable on the date labor union members vote to approve a Strike, except as provided elsewhere in this certificate.]
- [(ii) travel arrangements cancelled [or changed] by an airline, cruise line, or Tour operator, except as provided elsewhere in this certificate [unless the cancellation is the result of bad weather].]
- [(iii) changes [in plans] by the {Insured/Covered Person}, a Family Member or Traveling Companion, for any reason.]
- [(iv) financial circumstances of the {Insured/Covered Person}, a Family Member or a Traveling Companion.]
- [(v) any business or contractual obligations of the {Insured/Covered Person}, a Family Member or Traveling Companion.]
- [(vi) Default by the person, agency, or Tour operator from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements.]
- [(vii) any government regulation or prohibition.]
- [(viii) an event which occurs prior to the Effective Date, whether known to the {Insured/Covered Person} or not.]
- [(ix) failure of any Tour operator, Common Carrier, person or agency to provide the bargained-for travel arrangements.]

- [(x) Default caused by Financial Insolvency of the Travel Supplier, or Travel Arranger, from whom the {Insured/Covered Person} bought his or her coverage or purchased his or her travel arrangements, unless due to Financial Insolvency.]

The {Insured/Covered Person}'s Duties In The Event Of Loss: The {Insured/Covered Person} must provide Us documentation of the cancellation, interruption or delay and proof of the expenses incurred.

The {Insured/Covered Person} must provide proof of payment for the Trip such as cancelled checks or credit card statements, proof of refunds received, copies of applicable Tour operator or Common Carrier cancellation policies, and any other information reasonably required to prove the loss.

Claims involving loss due to [Sickness,] Injury or death require signed patient (or next of kin) authorization to release medical information and an attending Doctor's statement.

The {Insured/Covered Person} must provide Us with all unused air, rail, cruise or other tickets if he or she is claiming the value of those unused tickets.]

[[TRIP] [TRAVEL] DELAY BENEFIT

{We will pay incurred expenses/We will reimburse} {[up to] \${200/100} a day/\${100} per person per day} [for up to {five} days] to the Maximum Limit shown on the *Schedule of Benefits* if the {Insured/Covered Person}'s Trip is delayed for more than {6/12} hours for reasonable, additional accommodations and traveling expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable only for one delay of the {Insured/Covered Person}'s Trip. Travel Delay must be caused by reasons listed under the Trip Cancellation and Interruption Benefit, in addition to:

- [(a) carrier delay;]
- [(b) lost or stolen passport, travel documents or money;]
- [(c) quarantine;]
- [(d) Natural Disaster;]
- [(e) Injury [or Sickness] of the {Insured/Covered Person} or a Traveling Companion;]
- [(f) the {Insured/Covered Person} being delayed by a traffic accident while en route to a departure;]
- [(g) hijacking;]
- [(h) [unpublished or] unannounced Strike;]
- [(i) civil disorder [or commotion];]
- [(j) riot;]
- [(k) Inclement Weather which prohibits Common Carrier departure;]
- [(l) a Common Carrier Strike or other job action;]
- [(m) Equipment Failure of a Common Carrier;]
- [(n) the loss of the {Insured/Covered Person}'s and/or Traveling Companion's travel documents, tickets or money due to theft.]

[Limitations: This benefit is limited to {\$100/\$150/\$200} [per day] [per {Insured/Covered Person}] up to the maximum benefit shown in the *Schedule of Benefits*.

Payments for additional accommodation expenses will not exceed {\$100/\$150/\$200} [per day] [per {Insured/Covered Person}] up to the Maximum Limit of Coverage.]

[The {Insured/Covered Person}'s Duties in the Event of Loss: The {Insured/Covered Person} must provide Us with proof of the Travel Delay {such as a letter from the airline, cruise line, or Tour operator/newspaper clipping/weather report/police report or the like} and proof of the expenses claimed as a result of Trip Delay.]

[[CHECKED] BAGGAGE [AND TRAVEL DOCUMENTS] BENEFIT

{We will pay this benefit/We will reimburse} up to the Maximum Limit shown in the *Schedule of Benefits* [subject to a {\$100/\$150/\$200} Deductible per loss]. We will pay for all direct loss [due to accident] of or to the {Insured/Covered Person}'s [Checked] Baggage[, passports and visas] during the {Insured/Covered Person}'s Trip. [We will also pay for loss due to unauthorized use of the {Insured/Covered Person}'s credit cards, if the {Insured/Covered Person} has complied with all credit card conditions imposed by the credit card companies.] [There is a maximum benefit of {\$1,000/\$2,000/\$3,000/\$4,000} per traveling group.]

[Continuation of Coverage: If the {covered [Checked] Baggage/Insured Property},[passports and visas] is/are in the charge of a charter or Common Carrier, and delivery is delayed, this coverage will continue until such {[Checked] Baggage/property} is delivered to the {Insured/Covered Person}. This coverage does not include loss caused by the delay.]

[[Checked] Baggage Protection Benefit: We will pay a benefit up to the Maximum Benefit shown in the *Schedule of Benefits* for loss, theft or damage of {[Checked] Baggage/Insured Property} while on a Covered Trip. The benefit will be equal to the lesser of: (a) the Actual Cash Value at the time of loss, or (b) the cost of repair or replacement.]

[Limitation: Benefits for [Checked] Baggage will be in excess of any amount paid or payable by the Common Carrier responsible for the loss.]

[[Checked] Baggage Repatriation: The {Travel Provider/Tour operator} will reimburse the fees to ship the {Insured/Covered Person}'s [Checked] Baggage and its contents to the {Insured/Covered Person}'s location, anywhere in the world up to the maximum shown in the *Schedule of Benefits*.]

[Destroyed/Damaged [Checked] Baggage: We will reimburse the {Insured/Covered Person} up to the maximum shown in the *Schedule of Benefits* for damage to [Checked] Baggage on a Common Carrier during the Trip. We will pay the lesser of the following: the original cash value of the item less depreciation as determined by Us; or the cost of repair or replacement [limit per article - \${250}]. If receipts are not provided, benefits may be reduced. [All items over {\$100/\$150/\$200/\$250/\$300} must be accompanied by an original receipt.] This benefit excludes the contents of the [Checked] Baggage.]

[Lost [Checked] Baggage: We will reimburse the {Insured/Covered Person} up to the maximum shown in the *Schedule of Benefits* for loss [due to theft or misdirection] of [Checked] Baggage on a Common Carrier during the Trip. [The [Checked] Baggage must be owned by and accompany the {Insured/Covered Person} during the Trip.] [All claims must be documented by the Common Carrier.] [All payments are to accumulate to the Maximum Benefit shown in the Schedule of benefits.]]

[We will pay the lesser of the following: the original cash value of the item less depreciation as determined by Us; or the cost of repair or replacement [limit per article - \${250}]. [If receipts are not provided, benefits may be reduced. All items over {\$100/\$150/\$200/\$250/\$300} must be

accompanied by an original receipt.] [There will be a combined maximum limit of {\$250/\$500/\$1,000} for the following: jewelry, watches, articles consisting in whole or in part of silver, gold, or platinum; furs and articles trimmed with or made mostly with fur. This benefit includes the contents of the [Checked] Baggage.]]

[Lost/Stolen Passport Replacement: The {Travel Provider/Tour operator} will assist with obtaining replacements and reimburse the costs up to the maximum limit shown in the *Schedule of Benefits* to the {Insured/Covered Person} if the {Insured/Covered Person} loses his or her passport while traveling outside the {Insured/Covered Person}'s country of residence.]

[Prescription Replacement Service: For lost, damaged or locally unavailable prescriptions, the {Travel Provider/Tour operator} will coordinate the dispatch and reimburse costs up to the maximum amount shown in the *Schedule of Benefits* of such medications, when possible and legally permissible, to the {Insured/Covered Person} upon the authorization of the prescribing Doctor.]

Property Not Covered: We will not pay for damage or loss of:

- [(a) animals;]
- [(b) bicycles {except when checked with a Common Carrier/except while checked as Baggage};]
- [(c) motor vehicles [and equipment], Aircraft, and other conveyances [and their equipment]; boats, motorcycles, motors or any other vehicles;]
- [(d) artificial limbs, {false/artificial} teeth, {dental bridges/appliances}, any type of eyeglasses, sunglasses or contact lenses; hearing aids;]
- [(e) tickets, except for administrative fees required to reissue tickets; [documents and valuable papers, except for lost or stolen passports or visas];]
- [(f) tickets, keys, money, notes, securities, accounts, bills, currency, deeds, food stamps or other evidence of debt, credit cards and other travel documents [except passports and visas];]
- [(g) money, stamps, stocks and bonds, postal or money orders;]
- [(h) property shipped as freight, or shipped prior to the Trip Departure Date;]
- [(i) credit cards[, except as noted above;]]
- [(j) contraband, illegal transportation or trade;]
- [(k) seizure by any {government/government official/customs official};]
- [(l) household furniture or furnishings;]
- [(m) business {samples/items};]
- [(n) sporting equipment if loss or damage results from the use thereof;]
- [(o) cameras, camera equipment [and accessories];]
- [(p) electronic equipment;]
- [(q) art objects;]
- [(r) property used in trade, business or for the production of income.]
- [(s) perishables and consumables;]
- [(t) portable personal computers, laptop computers, cell phones, electronic organizers and portable CD players, cameras, camera equipment;] or
- [(u) musical instruments.]

[Special Limitation: We will not pay more than {\$100/%200/\$300/\$400/\$500} for the first item and thereafter, no more than {\$50/\$100/\$150/\$200/\$250/\$300} per item up to the limit of coverage as shown in the *Schedule of Benefits*.

We will not pay more than {\$250/\$500/\$750/\$1,000} aggregate on all losses to: jewelry, watches, gems, furs, cameras and camera equipment, camcorders, sporting equipment, computers, radios and other electronic items.

[Items over {\$100/\$150/\$200/\$250/\$300/\$350} should be accompanied by original receipts. If receipts are not provided, benefits may be reduced.]

Limitations: This benefit is limited to:

[(a) {\$50 to \$300} for any one article or pair of articles, such as earrings or gloves; and

[(b) a total of {\$250 to \$1,000} for all loss of:

[(i) watches or jewelry;]

[(ii) articles consisting in whole or in part of silver, gold or platinum;]

[(iii) furs or articles trimmed with or made with fur;] and

[(iv) cameras and accessories [including lenses/accessories/equipment].]

However, in no event will We pay more than the Maximum Benefit shown in the *Schedule of Benefits*.]

Additional Exclusions: We will not pay this benefit for loss due to:

[(a) defective materials or craftsmanship;]

[(b) normal wear and tear;]

[(c) [gradual] deterioration;]

[(d) rodents, animals or insects;]

[(e) damage while being worked on;]

[(f) natural defect or damage sustained due to any process or repair;]

[(g) civil war, insurrection, rebellion, revolution or warlike act by a military force, whether war is declared or not declared;]

[(h) confiscation or expropriation by order of any government;]

[(i) destruction, seizure or use of Insured Property for a military purpose;]

[(j) nuclear reaction, nuclear radiation, or radioactive contamination;]

[(k) sporting equipment damaged while being used;]

[(l) breakage of brittle or fragile articles, cameras, [camera equipment and accessories], musical instruments, radios and similar property computers or laptop computers;]

[(m) electronic equipment and business items;]

[(n) inherent vice or damage;]

[(o) theft or pilferage while left unattended in any vehicle;]

[(p) mysterious disappearance;]

[(q) lost or stolen passport, travel documents, or credit cards;]

[(r) Terrorism;]

[(s) art objects;]

[(t) breakage;]

[(u) theft or pilferage while left unattended unless there are visible signs of forcible entry;]

[(v) electrical current, including electric arcing that damages or destroys electrical devices or appliances.] or

[(w) usurped power or action taken by governmental authority in hindering, combating or defending against such an occurrence.]

Payment of Loss: We will pay the lesser of the cost to repair an item, or to replace it with an item of like kind and quality. [We will pay, in cash, the cost of repair or replacement of the {Insured/Covered Person}'s damaged [Checked] Baggage, less depreciation; or at Our option repair or replace the {Insured/Covered Person}'s [Checked] Baggage. We will notify the {Insured/Covered

Person} within {15/30/45/60} days after We receive his or her proof of loss. We may take all or part of the damaged [Checked] Baggage at the appraised or agreed value. In the event of a loss to a pair or set of items, We may, at Our option:

- (a) repair or replace any part to restore the pair or set to its value before the loss; or
- (b) pay the difference between the value of the property before and after the loss.]

[This coverage is excess over any other coverage or indemnity.]]

[TOUR OPERATOR/AIRLINE DEFAULT BENEFIT

This benefit pays lost deposits due to the Financial Default of any airline or Tour operator. Default by the person, agency or Tour operator from whom the {Insured/Covered Person} purchased travel arrangements or this coverage is excluded.]

5. The following are added to *Hazards Insured Against*:

[Exposure and Disappearance

Coverage under this hazard includes exposure to the elements after the forced landing, stranding, sinking, or wrecking of a vehicle in which the {Insured/Covered Person} was traveling.

{An Insured/A Covered Person} is presumed dead if:

1. he or she is in a vehicle that disappears, sinks or is stranded or wrecked on a Trip covered by this Policy; and
2. the body is not found within {six months/one year} of the Covered Accident.]

[School Coverage

The Covered Accident [or Sickness] must take place:

1. on School premises during normal School hours;
2. on School premises after normal School hours; or
3. at another School or site where the Covered Activity is scheduled.

[The Covered Activity includes travel without deviation or interruption:

1. between Home and School; or
2. between the site of the Covered Activity and Home or School when the {Insured/Covered Person} is scheduled to attend the Covered Activity.

Benefits are paid as described in this Policy if the Covered Accident [or Sickness] occurs while the {Insured/Covered Person} is in a vehicle:

1. operated by a properly licensed driver over the age of {19, 21, 23, 24, 25} who is under the direct supervision of the School;
2. and travel time does not exceed {1 –24 hours} each way.

Travel time includes the time:

1. to or from Home or School and the Covered Activity;
2. before the required attendance time; and
3. after dismissal and after completing any extra duties assigned by the School.]]

[Sports Coverage

The Covered Accident [or Sickness] must take place while:

1. participating as a member of the team in a scheduled game, official tournament game, or practice session; or
2. serving as an equipment manager, scorekeeper, trainer or volunteer worker for the team.

[The Covered Activity includes travel without deviation or interruption:

1. between Home and practice sessions for the game or competition; or
2. between the site of the game or competition and Home or School when the {Insured/Covered Person} is scheduled to attend the game or competition.

Benefits are paid as described in this Policy if the Covered Accident [or Sickness] occurs while the {Insured/Covered Person} is in a vehicle:

1. operated by a properly licensed driver over the age of {19, 21, 23, 24, 25} who is under the direct supervision of the School;
2. and travel time does not exceed {1 –24 hours} each way.

Travel time includes the time:

1. to or from Home or School and the Covered Activity;
2. before the required attendance time; and
3. after dismissal and after completing any extra duties assigned by the School.]]

[Volunteer Activities Coverage

The Covered Accident [or Sickness] must take place while:

1. participating in activities sponsored and supervised by the {organization/Policyholder} or
2. traveling with a group in connection with such activities.]

6. The following Exclusions are added to the *General Exclusions* section:

- [[{62.} pregnancy or childbirth, or elective abortion, other than Complications of Pregnancy;]
- [[{63.} auto eroticism by the Insured, Covered Person, Immediate Family Member, Traveling Companion or Business Partner;]
- [[{64.} panic attacks and post-traumatic stress disorder[, except if hospitalized];]

7. The following provisions are added:

[Pre-existing Medical Condition Exclusion Applicable To All Coverages

The Policy will not pay for loss or expense incurred as the result of Injury [or Sickness] of the {Insured/Covered Person} or Family Member which manifests itself during the {30 to 90} days immediately preceding and including the Effective Date, unless the condition is controlled through the taking of prescription drugs or medication and remains controlled throughout the {30 to 90} day period. [A Sickness has manifested itself when: (a) medical care or treatment has been given; or (b) there exist symptoms which would cause a reasonably prudent person to seek diagnosis, care, or treatment.]]

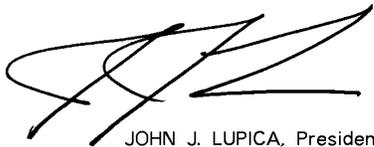
[Pre-existing Medical Condition Exclusion Waiver

The above exclusion does not apply if insurance was purchased within {7, 14} calendar days of the Initial Trip Payment. In order to receive the Waiver of Pre-existing Conditions, the amount of Trip Cancellation coverage purchased must equal the full [non-refundable] cost of all Trip arrangements. The {Insured/Covered Person} must be medically able to travel when the Premium is paid.

If insurance was purchased within {7, 14} calendar days of the Initial Trip Payment, the Pre-existing Medical Condition Exclusion will be waived. This is applicable to all coverages contained in the Policy. The {Insured/Covered Person} must be medically able to travel when the {Insured/Covered Person} pays the Premium. In the event that a claim is filed, the Injury [or Sickness] must be substantiated to Our Claims Department.]

This Amendment ends at the same time as the Policy.

Signed for ACE American Insurance Company in Philadelphia, Pennsylvania.



JOHN J. LUPICA, President



GEORGE D. MULLIGAN, Secretary