

Travel Assistance Program



Travel Assistance Program Protection You Can Take With You When You Travel

Have you ever...

- ...forgotten your prescription medication while traveling?
- ...become sick or injured while you were far away from home?
- ...lost your luggage?

The AXA Travel Assistance Program can help.



AXA Assistance is one of the world's largest insurance groups and ranked 13 among the Fortune Global 500 companies AXA Assistance USA is pleased to provide your company and its employees the most comprehensive and sophisticated emergency and travel assistance program available today.

Company employees and their eligible family members can now have peace of mind while traveling, knowing that with one single phone call they will have immediate access to a broad range of medical, travel, legal and financial assistance services 24 hours a day, 365 days a year.

Through this program eligible participants will be connected to a global network of:

- Over 600,000 pre-qualified providers in more than 238 countries and iurisdictions.
- Air and ground ambulance service.
- Trained multilingual personnel who can advise and assist you quickly and professionally in a travel emergency.

AXA Assistance is a wholly owned subsidiary of AXA Group, one of the world's largest insurance groups and ranked 13 among the Fortune Global 500 companies. Founded in 1959 in Barcelona, Spain, it was the first assistance company to open its doors. AXA is a fully independent company and is not owned by or a subsidiary of Prudential.

Insurance benefits for the travel assistance program are underwritten by Fairmont Premier Insurance Company or Fairmont Insurance Company and are administered by AXA Assistance U.S.A. AXA Assistance U.S.A., Fairmont Premier Insurance Company, and Fairmont Insurance Company are not affiliated with Prudential, and the Travel Assistance services they provide are separate and apart from the insurance provided by Prudential.

On the next pages you will find Frequently Asked Questions and your Certificate of Insurance.

AXA Assistance USA provides a secure website where you can electronically sign the Certificate of Insurance. Using your control number, please log on to:

https://www.axa-web.com/c3213500

If you have any questions about the procedure please contact your Prudential Account Manager.

Who is entitled to receive the benefits of this program?

The services and benefits are available to you and your dependents home.

• What other services are available in addition to the Emergency Medical Evacuation?

Other benefits include:

- Transportation of participant's spouse or family member when the member is expected to be hospitalized for more than 7 days and is traveling alone
- Return home of minor children who are left unattended because of a participant's evacuation or repatriation
- Return of participant's vehicle, up to \$1,000
- Transportation of participant's spouse or traveling companion acting as an escort, based on availability of space.
- Medical, dental and legal referrals.
- Lost document and luggage assistance
- Political evacuation
- Emergency message transmission
- Return of mortal remains
- Pre-trip information such as weather conditions, visa, passport and inoculation requirements, currency, local customs.
- Emergency cash/bail assistance and more.
- I am in a mountain skiing and I fall and break my leg. Can I use my cell phone to have a helicopter pick me up?

The Emergency Medical Evacuation benefit is a hospital to hospital benefit and does not act as a 911 service. It is important that the AXA Assistance Medical Staff consult with a local attending physician in order to provide the adequate level of care during your evacuation.

Can I get reimbursed for an emergency evacuation or repatriation arranged by my family or a hospital?

All arrangements for the assistance must be made by AXA Assistance USA and expenses cannot be reimbursed.

• I am traveling in Asia by myself and become severely ill. I'm expected to stay at a hospital for at least 7 days. Will the program cover for my spouse to travel and be with me?

Yes. If you are traveling by yourself and is expected to be hospitalized for more than 7 days prior to a repatriation, one economy ticket will be provided so your spouse or a family member can be with you.







AXA Assistance provides a Toll-Free number that can be dialed from anywhere in the world, 24 hours a day, 365 days a year. While traveling in Europe I got involved in a car accident and broke my leg. I'm taken to the hospital where surgery is to be performed. I want my home doctor to perform the surgery. Can I be evacuated back home to have the surgery?

If the Program Medical Director in consultation with the local attending physician are in agreement that the appropriate surgery and treatment can be provided at the present location an evacuation will not be authorized. The program provides an evacuation when it is medically necessary to move the participant to the nearest facility where adequate care can be provided. Once the participant has recovered adequately and the local attending physician and the Program Medical Director agree it is medically necessary, the program will provide transportation for the participant to a hospital or nursing home nearer his place of permanent residence.

Will the program cover my hospital bills?

Your health insurance still pays the medical expenses, but AXA can help you coordinate the payment with your insurance and a foreign hospital, if necessary.

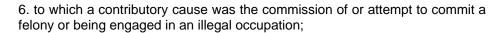
• How do I access the services?

AXA Assistance provides a 800 number to be used within North America and a Toll- Free number that can be dialed collect from anywhere in the world, 24 hours a day, 365 days a year. These numbers connect our clients directly to our Alarm Center, where highly trained multilingual Assistance Coordinators will gather all the necessary information and proceed with the travel assistance. Please refer to the wallet card provided with your brochure for the telephone numbers to access the services.



The AXA Travel Assistance Program is available for participants in traveling status. Whenever a trip exceeds 120 days, the participant is no longer in traveling status and no longer requires or is eligible for our services. Benefits are not payable for sickness, injuries or losses:

- 1. resulting from suicide, attempted suicide or any intentionally self-inflicted injury while sane or insane;
- 2. resulting from an act of declared or undeclared war;
- 3. while participating in maneuvers or training exercises of an armed service;
- 4. while piloting or learning to pilot or acting as a member of the crew of any aircraft:
- 5 received as a result or consequence of being intoxicated or under the influence of any controlled substance unless administered on the advise of a Legally Qualified Physician;



- 7. due to normal childbirth, normal pregnancy through the first six months of pregnancy or voluntarily induced abortion;
- 8. for dental treatment
- 9. which exceed the Maximum Benefit Amount



FAIRMONT PREMIER INSURANCE COMPANY

Administrative Office: Hovchild Plaza • 4000 Route 66 • Tinton Falls, NJ 07753 (Hereinafter referred to as "the Company")

TRAVEL PROTECTION INSURANCE

CERTIFICATE OF INSURANCE

This Certificate of Insurance describes all of the travel insurance benefits underwritten by Fairmont Premier Insurance Company, herein referred to as the Company.

Insurance provided by this Certificate is subject to all of the terms and conditions of the Group Policy. If there is a conflict between the Policy and Certificate, the Policy will govern.

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Signed for Fairmont Premier Insurance Company by:

Mar J alee PRESIDENT

SECTION I. **SCHEDULE**

COVERAGE IS PROVIDED UNDER GROUP POLICY NUMBER:

ISSUED TO GROUP POLICYHOLDER: American Travel Services Trust

CERTIFICATE HOLDER: UNIVERSITY OF UTAH

CERTIFICATE NUMBER: AXA-42713

CERTIFICATE EFFECTIVE DATE: 9/1/2006

9/1/2007 **CERTIFICATE EXPIRATION DATE:**

Emergency Medical Evacuation, Medical Repatriation and Return of Remains Maximum Benefit Amount for each Covered Trip: \$150,000

SECTION II. COVERAGES

EMERGENCY MEDICAL EVACUATION, MEDICAL REPATRIATION AND RETURN OF REMAINS

This Coverage is provided only as shown on the Confirmation of Benefits.

When an Insured suffers loss of life for any reason or incurs a Sickness or Injury during the course of a Covered Trip, the following benefits are payable, up to the Maximum Benefit Amount.

1. For Emergency Medical Evacuation: If the local attending Legally Qualified Physician and the authorized travel assistance company determine that transportation to a Hospital or medical facility is Medically Necessary to treat an unforeseen Sickness or Injury which is acute or life threatening and adequate Medical Treatment is not available in the immediate area, the Transportation Expense incurred will be paid for the Usual and Customary Charges for transportation to the closest Hospital or medical facility capable of providing that treatment.

If an Insured is expected to be in the Hospital for more than seven consecutive days following a covered Emergency Medical Evacuation, the Company will pay to return by Economy Transportation, the Insured's dependent children who are under 18 years of age and accompanying an Insured on the Covered Trip, to their home, with an attendant, if considered necessary by the travel assistance company.

If an Insured is expected to be in a Hospital alone for more than 7 consecutive days and Emergency Evacuation is imminent, upon request of the Insured or next of kin if Insured is incapacitated, the Company will pay to transport one person, chosen by the Insured, by Economy Transportation, for a single visit to and from his or her bedside.

2. For Medical Repatriation:

- a) If the local attending Legally Qualified Physician and the authorized travel assistance company determine that it is Medically Necessary for an Insured to return to his or her place of permanent residence because of an unforeseen Sickness or Injury which is acute or life-threatening, the Transportation Expense incurred will be paid for an Insured's return to his or her permanent residence via:
 - i) one-way Economy Transportation; or
 - ii) commercial upgrade, based on an Insured's condition as recommended by the local attending Legally Qualified Physician and verified in writing.

Transportation must be via the most direct and economical route.

- b) If the local attending Legally Qualified Physician and the authorized travel assistance company determine that it is Medically Necessary for an Insured to return to his or her place of permanent residence for continued treatment of an unforeseen Sickness or Injury which is acute or life-threatening, the Transportation Expense incurred will be paid for transportation to the Hospital or medical facility closest to an Insured's permanent place of residence capable of providing that treatment. Transportation must be by the most direct and economical route. Covered land or air transportation includes, but is not limited to, commercial stretcher, medical escort, or the Usual and Customary Charges for air ambulance, provided such transportation has been pre-approved and arranged by the authorized travel assistance company.
- 3. **For Return of Remains**: In the event of an Insured's death, the expense incurred will be paid for minimally necessary casket or air tray, preparation and transportation of an Insured's remains to his or her place of residence or to the place of burial.

If benefits are payable under this Coverage and an Insured has other insurance that may provide benefits for this same loss, the Company reserves the right to recover from such other insurance. An Insured shall:

a) notify the Company of any other insurance:

- b) help the Company exercise the Company's rights in any reasonable way that the Company may request, including the filing and assignment of other insurance benefits:
- c) not do anything after the loss to prejudice the Company's rights; and
- d) reimburse to the Company, to the extent of any payment the Company has made, for benefits received from such other insurance.

The Maximum Benefit Amount is shown in the Confirmation of Benefits.

SECTION III. DEFINITIONS

"Confirmation of Benefits" means the coverage confirmation provided to an Insured following enrollment and payment of the applicable premium.

"Covered Trip" means any trip that the Insured takes during the Policy Term where the Insured is more than 100 miles from the Insured's primary residence. Maximum trip duration is 120 days.

"Family Member" means an Insured's or a Traveling Companion's: legal spouse or common-law spouse where legal; legal guardian; son or daughter (adopted, foster or step); son-in-law; daughter-in-law; grandmother; grandmother-in-law; grandfather; grandfather-in-law; grandchild; aunt; uncle; niece; or nephew; brother, step-brother; sister; step-sister; brother-in-law; sister-in-law; mother; father; step-parent.

"Hospital" means (a) a place which is licensed or recognized as a general hospital by the proper authority of the state in which it is located: (b) a place operated for the care and treatment of resident inpatients with a registered graduate nurse (RN) always on duty and with a laboratory and X-ray facility: (c) a place recognized as a general hospital by the Joint Commission on the Accreditation of Hospitals. Not included is a hospital or institution licensed or used principally: (1) for the treatment or care of drug addicts or alcoholics: or (2) as a clinic continued or extended care facility, skilled nursing facility, convalescent home, rest home, nursing home or home for the aged.

"Injury" or "Injuries" means accidental bodily injuries: (a) received while insured under the Policy and any attached coverages: (b) resulting in loss independently of sickness and all other causes: and (c) not excluded from coverage.

"Insured" means the person(s) named on the enrollment form or Roster as the Principal Participant, participant's spouse or participant's child.

"Intoxicated" mean a blood alcohol level that equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where an Insured is located at the time of an incident.

"Legally Qualified Physician" means a physician (a) other than an Insured, a Traveling Companion or a Family Member: (b) practicing within the scope of his or her license: and (c) recognized as a physician in the place where the services are rendered.

"Maximum Benefit Amount" means the maximum amount payable for coverage provided to an Insured as shown in the Confirmation of Benefits.

"Medical Treatment" means treatment advice or consultation by a Legally Qualified Physician.

"Medically Necessary" means a service or supply which: (a) is recommended by the attending Legally Qualified Physician: (b) is appropriate and consistent with the diagnosis in accord with accepted standards of community practice: (c) could not have been omitted without adversely affecting an Insured's condition or quality of medical care: (d) is delivered at the most appropriate level of care and not primarily for the sake of convenience: and (e) is not considered experimental unless coverage for experimental services or supplies is required by law.

"Scheduled Departure Date" means the date on which an Insured is originally scheduled to leave on the Covered Trip.

"Scheduled Return Date" means the date on which an Insured is originally scheduled to return to the point of origin or the original final destination.

"Sickness" means an illness or disease that is diagnosed or treated by a Legally Qualified Physician after the effective date of insurance and while the Insured is covered under the Policy.

"Third Party" means a person or entity other than an Insured or the Company.

"Transportation Expense" means: (a) the cost of conveyance of an Insured and any medical personnel (if Medically Necessary): and (b) Medically Necessary services or supplies.

"Travel Arrangements" means: (a) transportation: (b) accommodations: and (c) other specified services arranged by the Travel Supplier for the covered trip.

Usual and Customary Charges" means those comparable charges for similar treatment, services and supplies in the geographic area where treatment is performed.

SECTION IV. INSURING PROVISIONS

Insured's Term of Coverage:

Coverage begins at the point and time of departure on the Scheduled Departure Date. Coverage ends at the point and time of return on an Insured's Scheduled Return Date.

In the event the Scheduled Departure Date and/or the Schedule Return Date are delayed, or the point and time of departure and/or point and time of return are changed because of circumstances over which neither the Travel Supplier nor an Insured has control an Insured's term of coverage shall be automatically adjusted accordance with the Travel Supplier's notice to the Company of the delay or change.

SECTION V. GENERAL LIMITATIONS AND EXCLUSIONS

Benefits are not payable for Sickness, Injuries or losses of an Insured, his or her Traveling Companion, Insured's or Traveling Companion's Family Member, or Insured's Business Partner:

- 1. resulting from suicide, attempted suicide or any intentionally self-inflicted injury while sane or insane (in Missouri, sane only);
- resulting from an act of declared or undeclared war;
- 3. while participating in maneuvers or training exercises of an armed service;
- 4. while piloting or learning to pilot or acting as a member of the crew of any aircraft;
- 9. received as a result or consequence of being Intoxicated, as specifically defined in the policy, or under the influence of any controlled substance unless administered on the advise of a Legally Qualified Physician;
- 10. to which a contributory cause was the commission of or attempt to commit a felony or being engaged in an illegal occupation;
- 11. due to voluntarily induced abortion;
- 12. for dental treatment (except as coverage is otherwise specifically provided herein);
- 13. which exceed the Maximum Benefit Amount for each attached coverage as shown in the Confirmation of Benefits: or;

SECTION VI. GENERAL PROVISIONS

Notice of Claim: Notice of claim must be reported within 20 days after a loss occurs or as soon as is reasonably possible. An Insured or someone on an Insured's behalf may give the notice. The notice should be given to the Company or designated representative and should include sufficient information to identify the Insured.

Claim Forms: When notice of claim is received by the Company or designated representative, forms for filing proof of loss will be furnished. If these forms are not sent within 15 days, the proof of loss requirements can be met by sending a written statement of what happened. This statement must be received within the time given for filing proof of loss.

Proof of Loss: Proof of loss must be provided within 90 days after the date of the loss or as soon as is reasonably possible. Proof must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

Time of Payment of Claims: The Company or its designated representative, will pay the claim after receipt of acceptable proof of loss.

Payment of Claims: Benefits for loss of life are payable to the Principal Insured, who is the beneficiary for all other Insureds. If: (a) the Principal Insured predeceases an Insured: and (b) a beneficiary is not otherwise designated by the Principal Insured benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

- a) the Principal Insured's spouse;
- b) the Principal Insured's child or children jointly;
- c) an Insured's parents jointly if both are living or the surviving parent if only one survives;
- d) an Insured's brothers and sisters jointly; or
- e) the Principal Insured's estate.

All or a portion of all other benefits provided by the Policy may, at the option of the Company, be paid directly to the provider of the service(s). All benefits not paid to the provider will be paid to the Principal Insured.

Other than for loss of life, if any benefit is payable to: (a) an Insured or the Principal Insured's beneficiary who is minor or otherwise not able to give a valid release: or (b) the Principal Insured's estate: the Company may pay up to \$1,000.00 to the Principal Insured's beneficiary or any relative to whom the

Company finds entitled to the payment. Any payment made in good faith shall fully discharge the Company to the extent of such payment.

Physician Examination and Autopsy: The Company, at the expense of the Company, may have an Insured examined when and as often as is reasonable while the claim is pending. The Company may have an autopsy done (at the expense of the Company) where it is not forbidden by law.

Legal Actions: No legal action for a claim can be brought against us until 60 days after we receive proof of loss. No legal action for a claim can be brought against us more than 3 years after the time required for giving proof of loss. This 3-year time period is extended from the date proof of loss is filed and the date the claim is denied in whole or in part.

Concealment and Misrepresentation: The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

Other Insurance with the Company: An Insured may be covered under only one travel policy with the Company for each Covered Trip. If an Insured is covered under more than one such policy, he or she may select the coverage that is to remain in effect. In the event of death, the selection will be made by the beneficiary or estate. Premiums paid (less claims paid) will be refunded for the duplicate coverage that does not remain in effect.

Subrogation: If the Company has made a payment for a loss under this coverage, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right. An Insured shall help the Company exercise the Company's rights in any reasonable way that the Company may request: nor do anything after the loss to prejudice the Company's rights: and in the event an Insured recovers damages from the Third Party responsible for the loss, the Insured will hold the proceeds of the recover for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss.

SECTION VII. MASTER POLICY PROVISIONS

Entire Contract: Changes: This policy, and any attachments is the entire contract of insurance. No agent may change it in any way. Only an officer of the Company can approve a change. Any such change must be shown in the policy.

Policy Term and Renewal: This policy is issued for an initial term which will begin on the Policy Date and will be for a period of time specified in the attached Application. This policy may be renewed, with the Company's consent, from term to term, subject to the provisions of this policy. Each renewal term will be for a period of time specified in the Application. The initial term and each renewal term of this policy shall begin and end at 12:01 a.m. Standard Time of the place where the main office of the Policyholder is located.

The Company reserves the right to change premium rates subject to 60 days prior notice to the Policyholder, but in no event will any increase in premium be retroactive.

Premiums and Payment of Premiums: The premiums for an Insured's coverage provided under this policy are shown in the Schedule of Coverages. An Insured's premium is due prior to his or her Scheduled Departure Date. All premiums should be submitted to the Company or to an authorized agent of the Company. Premiums are non-refundable except when an Insured is covered under more than one travel policy with the Company for each Covered Trip, or unless required by applicable state statutes.

Clerical Error: Clerical error on the Company's part or that of a Travel Supplier in keeping records or furnishing information will not void an Insured's coverage if it is otherwise validly in force; nor will it continue an Insured's coverage if it is otherwise validly terminated under the terms of this policy.

Conformity with State Statutes: The provisions of this policy must conform with the laws of the state in which the policy is issued. If any do not, they are hereby amended to conform.

Subrogation: If the Company has made a payment for a loss under this coverage, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right. An Insured shall help the Company exercise the Company's rights in any reasonable way that the Company may request: nor do anything after the loss to prejudice the Company's rights: and in the event an Insured recovers damages from the Third Party responsible for the loss, the Insured will hold the proceeds of the recover for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss.

ASSISTANCE SERVICES

Assistance Services: The Assistance Services described below are provided by AXA ASSISTANCE USA.

DESCRIPTION OF SERVICES

Transportation Services

- Vehicle Return: In the event a participant should suffer from a certified illness, injury or death which requires emergency medical evacuation/medically necessary repatriation or transportation of mortal remains and participant is thereby unable to drive his/her vehicle, AXA will provide vehicle return service for ground vehicles such as cars, trucks, vans, travel trailers or motor homes, operated by the Participant, to the Participant's permanent residence. This benefit will pay the cost, up to \$1,000 for fuel, oil, driver, and tolls to affect such vehicle return. The participant will bear the cost of any repair due to mechanical breakdown en route, as well as, costs for food and accommodation during the trip. The vehicle must be in a condition capable of begin safely operated on the highway (limit of \$1,000 per participant per agreement period).
- Transportation of Escort: In case that the Covered person requires Emergency Medical Evacuation by air ambulance or Repatriation by commercial airline, air transport of the Covered person's Spouse or other Family Member or traveling companion will be provided (up to a limit of \$5,000) so that the Covered person may be accompanied. This is subject to space availability, giving priority to medical equipment and medical personnel aboard for the welfare and safety of the Covered person. All services in connection with Transportation of Escort must be preapproved and arranged by the authorized travel assistance company.
- Return of Minor Children: If a covered person is in the Hospital for more than 24 hours following a covered Emergency Medical Evacuation due to Illness or Injury, or in the event of death, AXA Assistance will arrange for the return by Economy Transportation, of the covered person's dependent children who are under 18 years of age and accompanying the covered person on the Covered Trip, to their home, with an attendant if considered necessary by AXA Assistance (up to a limit of \$5,000).

Medical Assistance Services

- Medical referral: AXA Assistance will refer the user to preferred providers including primary care physicians, clinics and hospitals all over the world. Primary care physicians are defined as referrals to the following: family practitioners, general practitioners, internists, ophthalmologists, obstetricians/ gynecologists, orthopedists, and pediatricians. The user will be given the name, address, telephone number, office hours, and if applicable, language(s) spoken by the provider. The nature of the situation, location of the caller, and time of the day will influence whether a referral is made to an individual provider or to a hospital/emergency care facility. AXA Assistance will also provide referrals to medical specialists in major cities and nearby areas using specific selection criteria. Specialists are defined as physicians other than those previously identified as primary care physicians. Some examples of specialists include allergists, cardiologists and endocrinologists. Arrangements for services are available at no additional cost. Fees incurred for services provided are the responsibility of the user.
- Dental referrals: AXA Assistance will provide referrals to dentists and facilities that provide
 emergency dental care in accordance with established selection criteria. If AXA Assistance
 receives a request for dental referrals in any area of the world in which AXA Assistance does not
 recommend seeking dental treatment, the User or Customer will be so informed. If appropriate,
 the User or Customer will be provided with referrals to physicians or hospitals for pain control.

Arrangements for services are available at no additional cost. Fees incurred for services provided are the responsibility of the user.

- Dispatch of Physician: For the convenience of the user, AXA Assistance USA will make arrangements for a general practice physician to consult the user's hotel or current location while traveling. Although AXA Assistance USA will make every effort, this service is not available is all states and countries. If a physician can not be dispatched, other arrangements will be made by AXA Assistance USA and options will be offered to the user. Arrangements for services are available at no additional cost. Fees incurred for services provided are the responsibility of the user.
- **Pre-Certification and Referral Management**: AXA Assistance USA will provide pre-certification for all inpatient cases and for elective outpatient surgical intervention. The pre-certification process entails our case managers reviewing the patient's current & past medical history, consulting with the patient's physician and reviewing the suggested treatment plan. After this review they will certify that the confinement and/or surgery are medical necessary and considered recognized treatment in the medical community for the patient's condition. If the patient requires additional certification then we will contact the utilization review department of the hospital or the attending physician to review the case and potentially certify additional hospital days. Arrangements for services are available at no additional cost. Fees incurred incurred for services provided are the responsibility of the user.
- Medical Monitoring: Upon notification that a patient is in the hospital or requires medical monitoring, the case will be assigned to a nurse case manager to make the initial medical contact. (IMC) The case manager will attempt an IMC by contacting the medical facility to obtain medical information about the patient from a treating physician, hospital nurse case manager or other valid source of information. The goal, during regular office hours, is to obtain an IMC within 2 hours of notification. If required the IMC report will be sent to the client.

In the IMC, the nurse will attempt to obtain the following information:

- Age
- Chief complaint
- History of Present Illness
- Relevant past medical history
- Intended medical plan
- Expected discharge date and anticipated clearance to travel home (CTF).

The nurse will judge the adequacy of the treating facility to determine need for transfer or evacuation. If the nurse requires consultation with an AXA Assistance USA physician for complex cases, uncertainty about appropriateness of care, recommendations for discharge or clearance to fly or because s/he feels the AXA Assistance physician should speak with the treating physician (TP), she will speak to the in-office or on-call AXA Assistance physician. An AXA Assistance USA medical doctor will speak with the treating physician on ALL In-patient cases within the first 48 hours.

Arrangements for services are available at no additional cost. Fees incurred for services provided are the responsibility of the user.

Vaccination Recommendations/Insect Precautions: AXA Assistance USA will provide up-to-date
information on health hazards in the areas where Users are traveling. AXA Assistance USA will
recommend medications or vaccinations that should be received prior to departure in order to
minimize the risk of infection. AXA Assistance USA will also provide information regarding
protective measures against the bites of mosquitoes and other disease-bearing insects.

• Prescription Transfer/Shipping

AXA Assistance helps Beneficiaries replace lost or misplaced medication or other important items, such as eyeglasses or contact lenses, by first endeavoring to find a local resource for replacement, or by locating and arranging prompt shipment of the item or its equivalent (subject to local law.). Arrangements for services are available at no additional cost. Fees incurred incurred for services provided are the responsibility of the user.

Shipment of Medication or Blood Supply

AXA Assistance USA will provide administrative services for the lawful delivery of medication or blood supply, whenever such medication or blood supply is required and not available locally. Arrangements for services are available at no additional cost. Fees incurred for services provided are the responsibility of the user.

- **Medical record transfer:** Our SIA management system houses all patient interactions and correspondence between AXA medical staff, case managers, treating facilities and patient.
 - ✓ SIA is built on standard database technologies which allows for convenient exporting into a required format that can be delivered at Prudential's convenience.
 - ✓ AXA supports multiple encryption methods and is flexible to Prudential's requirements in securing electronic communications.
- **Insurance coordination**: AXA Assistance will verify and activate primary insurance through the employer. When coverage is not accepted and upfront payment is required, AXA Assistance will issue payment directly to the treating facility, re-price claims when possible and bill back the employer or primary insurance directly.
- Replacement of medical devices: When medical devices or equipment are not available locally, AXA Assistance will make every effort to procure and arrange for delivery. AXA can also arrange for appointments with local physicians and hospitals
- **Hotel arrangements:** AXA Assistance can arrange for hotel / convalescence stay at the request of the policyholder and arrange for up-front payment when required.
- Coordinate hospital admission and discharge planning: AXA Assistance can arrange for up
 front payment or guarantee of emergency medical expenses at a hospital, clinic or emergency
 room facility in the event that the user can not be admitted without a financial guarantee. In many
 areas, hospitals will only accept guarantee of expenses from a local company. AXA Assistance
 will be able to provide extensive coverage in this area with its worldwide network of Operation
 Centers, correspondents and agents.

AXA Assistance will arrange hospital admissions when we are notified of a case in advance or in cases of evacuation. In many areas, hospitals will only accept a guarantee of expenses and agree to bill a domestic company. AXA Assistance will be able to provide extensive coverage in this area with its worldwide network of Operation Centers, correspondents and agents.

Upon discharge, if the patient requires a lesser level of care AXA Assistance USA will recommend this level of care for approval in advance by the client. Once approved, the medical team of AXA Assistance USA will make all necessary arrangements. If discharge planning requires repatriation to the home country this will also be arranged by AXA Assistance USA. The discharge planning is a part of the case management process.

Disbursement of funds is dependent on the availability of such funds through the employer, primary insurance carrier or availability of any financial mean to secure payment.

Personal Assistance Services

- **Telephone interpretation service:** AXA Assistance USA's multi-lingual staff and international correspondents will provide emergency telephone interpretation.
- General Travel Assistance/Information Services: Available 24/7, both pre-travel and during trip, AXA Assistance USA will provide the User or Customer with visa, passport and inoculation information, State Department travel advisories, location of embassies and consulates, exchange rates between the U.S. and most major currencies, and weather forecasts for major cities around the world.
- Emergency Cash/Bail Assistance: Emergency funds will be arranged and made available to the User in the event money is lost, stolen, or inaccessible due to banking holidays, etc. AXA Assistance USA will also assist with the payment of legal fees, as well as secure and post bail bonds when required. All costs associated with is service are borne by the user. All expenses associated with this service shall be applied to the User's personal credit card. Disbursement of funds is dependent on the availability of such funds in the User's personal credit card.
- Lost Document Assistance: AXA Assistance USA will coordinate arrangements to replace or forward lost or stolen documents, including passports, driver's licenses and credit cards, and will assist with procedures to file loss reports and to recover lost or stolen articles.
- Legal Referrals: AXA Assistance USA will provide legal referrals to English-speaking lawyers.

Should legal action be taken against an Insured further to an unintentional violation of the applicable laws or regulations, other than a felony, in a foreign country where the Insured is traveling, AXA Assistance shall provide assistance at the written request of the Insured.

These provisions do not apply in the case of acts related to the Insured's business or occupation. Arrangements for services are available at no additional cost. Fees incurred incurred for services provided are the responsibility of the user.

- **Urgent Message Relay:** AXA Assistance USA will relay emergency messages to or from User to family members or colleagues 24 hours a day.
- **Pre Trip and Cultural Information:** Available 24/7, both pre-travel and during trip, AXA Assistance is able to quickly provide the following pre-departure information upon a Beneficiary's request:
 - Passport, visa, and immunization/inoculation requirements;
 - Foreign currency exchange rates;
 - Weather forecasts and average seasonal temperatures;
 - Embassy and Consular referrals;
 - General information on local customs
 - General Information on business etiquette;
 - Information on national holidays and standard business hours;
 - Travel advisories & customs information:
 - Local voltage information;
 - Value-Added Tax regulations (excluding any legal advice, interpretation or analysis of such laws).
 - Insured Travel Service
 - Provide information regarding other provisions included in your plan not listed above.
- **Political evacuation:** AXA Assistance USA can arrange for the repatriation on political grounds for all covered corporate travelers located in countries where upon their home country governmental decision need to be evacuated
- **Pet Housing and return:** AXA Assistance can assist with pet friendly hotel accommodations, boarding facilities and travel home for pets.

 Personal Security Services: AXA assistance Offers combined programs of security and assistance services, designed specifically for expatriates and business travelers as well as their families. Initial calls are answered by Assistance Coordinators and supervisors. For cases requiring expertise in this area, Assistance Coordinators will seamlessly activate our security partner, for round-the clock access to a live security officer for 24hr assistance services via the telephone. Customized security services can be provided.

Our current security partner is security partner Securite Sans Frontieres (SSF) and is composed of 21 agents having international jobs and backgrounds in special-forces, military, intelligence, police and legal fields. Also included are 10 administrative and support staff. The worldwide network includes 60 correspondents and 6 agents. Their headquarters is in Paris, France and have specific presence in Fort Lauderdale, FL. as an operative office for the US and Latin America.

Service capabilities include but are not limited to:

- Round the clock access to our web site for Security information on 184 countries
- 24-hour access to security officer
- Customized security assistance
- Political evacuations, kidnap and ransom coverage
- Threats and extortion assistance
- Counseling assistance and training

Exclusions and Limitations:

- 1. Losses resulting from suicide, attempted suicide or any intentionally self-inflicted injury while sane or insane;
- 2. resulting from an act of declared or undeclared war;
- 3. while participating in maneuvers or training exercises of an armed service;
- 4. while piloting or learning to pilot or acting as a member of the crew of any aircraft;
- 5. received as a result or consequence of being Intoxicated, as specifically defined in the policy, or under the influence of any controlled substance unless administered on the advise of a Legally Qualified Physician:
- 6. to which a contributory cause was the commission of or attempt to commit a felony or being engaged in an illegal occupation;
- 7. due to voluntarily induced abortion;
- 8. for dental treatment (except as coverage is otherwise specifically provided herein).



AXA Assistance USA, Inc. 122 South Michigan Avenue, suite 1100 - Chicago, IL - 60603 - USA

If you have any questions about the services or need travel assistance please call the Travel Assistance Program Hotline:

(800) 565-9320 or (312) 935-3654 (collect)

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