

**MEDEX PLUS**  
**DESCRIPTION OF COVERAGE**  
**FOR OREGON RESIDENTS**

**Notice to State of Washington Residents:** This is not Your Description of Coverage. To obtain Your state-specific insurance policy, call 1.800.527.0218.



*Please keep this document with you while you travel.*

*A comprehensive program providing you with 24/7 emergency medical, security, and travel assistance - including emergency medical evacuation and repatriation - when you are 100 or more miles away from your permanent residence in your home country.(Expatriates are eligible regardless of distance from your expatriate home.)*

This Insurance is underwritten by: Arch Insurance Company, with its principal place of business in New York, NY.

Schedule of Coverage & Services	Maximum Benefits Per Person
Emergency Evacuation and Repatriation of Remains	Unlimited
Worldwide Emergency Assistance Services	

**Emergency Evacuation:** The Company will pay, subject to the limitations set out herein, for Covered Emergency Evacuation expenses reasonably incurred if You suffer an Injury or Emergency Sickness that warrants Your Emergency Evacuation while You are on a Trip. Benefits payable are subject to the maximum amount per person shown on the Schedule of Coverage and Services for all Emergency Evacuations due to all Injuries from the same Accident or all Emergency Sicknesses from the same or related causes.

A legally licensed Physician, in coordination with the Assistance Company, must order the Emergency Evacuation and must certify that the severity of Your Injury or Emergency Sickness warrants Your Emergency Evacuation to the closest adequate medical facility. It must be determined that such Emergency Evacuation is required due to the inadequacy of local facilities.

The certification and approval for Emergency Evacuation must be coordinated through the most direct and economical conveyance and route possible, such as air or land ambulance, or commercial airline carrier.

Covered Emergency Evacuation expenses are those for Medically Necessary Transportation, including reasonable and customary medical services and supplies incurred in connection with Your Emergency Evacuation. Expenses for Transportation must be: (a) recommended by the attending Physician; and (b) required by the standard regulations of the conveyance transporting You and (c) reviewed and pre-approved by the Assistance Company;

The Company will pay the expenses incurred to return to where they reside, with an attendant if necessary, any of Your Dependent Children who were accompanying You when the Injury or Emergency Sickness occurred but not to exceed the cost of a single one-way economy airfare ticket less the value of applied credit from any unused return travel tickets per person.

If You are hospitalized for more than 7 days following a covered Emergency Evacuation expense, the Company will pay subject to the limitations set out herein, for expenses to bring one person chosen by You to and from the Hospital or other medical facility where You are confined if You are alone; but not to exceed the cost of one round-trip economy airfare ticket.

In addition to the above covered expenses, if the Company has previously evacuated You to a medical facility, the Company will pay Your airfare costs from that facility to Your primary residence, less refunds from Your unused transportation tickets. Airfare costs will be economy, or first class if Your original tickets are first class, or in business or first class as in compliance to Your medical necessities and requirements upon the discharge, less refunds from Your unused transportation tickets.

**All transportation must be authorized and arranged by the Assistance Company.**  
**To access emergency assistance, call the Assistance Company's operation center at: 800-527-0218 or call collect 410-453-6330.**

**Repatriation of Remains:** The Company will pay reasonable covered expenses incurred to return Your body to Your primary residence if You die during the covered Trip. This will not exceed the maximum shown on the Schedule of Coverage and Services. Covered expenses include, but are not limited to, expenses for embalming, cremation, minimally necessary coffins for transport, and transportation.

**WORLDWIDE EMERGENCY ASSISTANCE SERVICES**

**Worldwide Medical and Dental Referrals:** MEDEX will provide referrals to help You locate appropriate treatment or care.

**Monitoring of Treatment:** MEDEX assistance coordinators will continually monitor Your case. In addition, MEDEX regional medical advisors provide consultative and advisory services, including review and analysis of the quality of medical care You are receiving.

**Facilitation of Hospital Payment:** Upon securing payment or a guarantee to reimburse, MEDEX will either wire funds or guarantee required emergency Hospital admittance deposits. You are ultimately responsible for the payment of the cost of medical care and treatment, including hospital expenses.

**Transfer of Insurance Information to Medical Providers:** MEDEX will assist You with Hospital admission, such as relaying insurance benefit information, to help prevent delays or denials of medical care. MEDEX will also assist with discharge planning.

**Medication, Vaccine and Blood Transfers:** In the event medication, vaccines, or blood products are not available locally, or a prescription medication is lost or stolen, MEDEX will coordinate their transfer to You upon the prescribing Physician's authorization, if it is legally permissible.

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

**Dispatch of Doctors/Specialists:** In an emergency where You cannot adequately be assessed by telephone for possible evacuation, or You cannot be moved and local treatment is unavailable, MEDEX will send an appropriate medical practitioner to you.

**Medical Records Transfer:** Upon Your consent, MEDEX will assist with the transfer of medical information and records to You or the treating physician.

**Continuous Updates to Family, Employer, and Physician:** With your approval, MEDEX will provide case updates to appropriate individuals You designate in order to keep them informed.

**Hotel Arrangements for Convalescence:** MEDEX will assist You with the arrangement of hotel stays and room requirements before or after hospitalization.

**TRAVEL ASSISTANCE SERVICES**

**Pre-Travel Information:** Upon your request, MEDEX can provide continuously updated destination intelligence for more than 180 countries covering ten subject areas: security, health, transportation, entry/exit, finance, culture, language, communication, legal, and weather/environment.

**Emergency Travel Arrangements:** MEDEX will make new reservations for airlines, hotels, and other travel services in the event of an Emergency Sickness or Injury.

**Transfer of Funds:** MEDEX will provide You with an emergency cash advance subject to us first securing funds from You or Your family.

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

**Legal Referrals:** Should You require legal assistance, MEDEX will direct You to an attorney and assist You in securing a bail bond.

**Translation Services:** MEDEX's multilingual assistance coordinators are available to provide immediate verbal translation assistance in a variety of languages in an emergency; otherwise MEDEX will provide You with referrals to local interpreter services.

**Message Transmittals:** You may send and receive emergency messages toll-free, 24-hours a day, through the MEDEX assistance center.

**Emergency Pet Housing and/or Pet Return:** MEDEX will coordinate arrangements for temporary boarding or the return of a pet left unattended as a result of Your Injury or Illness.

**PERSONAL SECURITY SERVICES**

**Real-time Security Intelligence:** In the event You feel threatened by political unrest, social instability, weather conditions, or health or environmental hazards, We will provide you with the latest authoritative information and guidance for over 180 countries and select cities. Our global intelligence database is continuously updated and includes destination intelligence from over 5,000 worldwide sources.

**Security Evacuation Services:** In the event of a threatening situation, MEDEX will assist you in making evacuation arrangements, including flight arrangements, securing visas, and logistical arrangements such as ground transportation and housing. In more complex situations, MEDEX will assist You in making arrangements with providers of specialized security services.

**EXCLUSIONS**

The following exclusions apply:

- 1) Suicide, attempted suicide, or any intentionally self-inflicted Injury while sane or insane;
- 2) Participating in skydiving; hang gliding; parachuting; mountaineering; any race; bungee cord jumping; and spelunking ;
- 3) Participation as a professional in athletics;
- 4) Participation in any military maneuver or training exercise;
- 5) Being under the influence of drugs or intoxicants unless prescribed by a Physician;
- 6) Commission or the attempt to commit a criminal act;
- 7) Pregnancy and childbirth (except for Complications of Pregnancy);
- 8) Mental or emotional disorders;
- 9) Traveling for the purpose of securing medical treatment;
- 10) Injury or Sickness when traveling against the advice of a Physician;

- 11) Services not shown as covered;
- 12) War or act of war (whether declared or not);
- 13) This policy does not insure against loss or damage (including death or injury) and any associated cost or expense resulting directly or indirectly from the discharge, explosion or use of any device, weapon or material employing or involving nuclear fission, nuclear fusion or radioactive force, or chemical, biological, radiological or similar agents, whether in time of peace or war, and regardless of who commits the act, regardless of any other cause or event contributing concurrently or in any other sequence thereto when such event occurs in a foreign country.

#### DEFINITIONS

- 1) **“Accident”** means a sudden, unexpected, unusual, specific event which occurs at an identifiable time and place, but shall also include exposure resulting from a mishap to a conveyance in which You are traveling.
- 2) **“Accidental Injury”** means Bodily Injury caused by an Accident (of external origin) being the direct and independent cause in the loss.
- 3) **“Assistance Company”** means MEDEX.
- 4) **“Bodily Injury”** means identifiable physical Injury which:
  - (a) is caused by an Accident, and
  - (b) solely and independently of any other cause, except illness resulting from, or medical or surgical treatment rendered necessary by such Injury, is the direct cause of death or dismemberment of You within twelve months from the date of the Accident.
- 5) **“Common Carrier”** means any land, sea, and/or air conveyance operating under a valid license for the transportation of passengers for hire.
- 6) **“The Company”** means Arch Insurance Company.
- 7) **“Complication of Pregnancy”** means a condition whose diagnosis is distinct from pregnancy but is adversely affected or caused by pregnancy.
- 8) **“Dependent Child(ren)”** means Your child (or children), including an unmarried child, stepchild, legally adopted child or foster child who is:
  - (1) less than age 19 and primarily dependent on You for support and maintenance; or
  - (2) who is at least age 19 but less than age 23 and who regularly attends an accredited school or college; and who is primarily dependent on You for support and maintenance;
- 9) **“Emergency Evacuation”** – means Your medical condition warrants immediate transportation from the place where You are injured or sick to the nearest Hospital where appropriate medical treatment can be obtained;
- 10) **“Emergency Sickness”** - means an illness or disease, diagnosed by a legally licensed Physician, which meets all of the following criteria: (1) there is a present severe or acute symptom requiring immediate care and the failure to obtain such care could reasonably result in serious deterioration of Your condition or place Your life in jeopardy; (2) the severe or acute symptom occurs suddenly and unexpectedly; and

(3) the severe or acute symptom occurs while Your coverage is in force and during Your Trip.

11) **“Family Member”** means You or Your Traveling Companion’s legal or common law spouse, domestic partner, parent, legal guardian, step-parent, grandparent, parents-in-law, grandchild, natural or adopted child, foster child, ward, step-child, children-in-law, brother, sister, step-brother, step-sister, brother-in-law, sister-in-law, aunt, uncle, niece, or nephew.

12) **“Individual Coverage Term”** means the period of time during which insurance under the policy is in effect. Refer to the confirmation of benefits and Section 3, General Provisions.

13) **“Injury”** means Bodily Injury caused by an Accident occurring while this policy is in force, and resulting directly and independently of all other causes in loss covered by the policy. The Injury must be verified by a Physician.

14) **"Insured"** means a person who had enrolled for insurance, paid the premium and been accepted by the Company or its agent. You and Yours mean the Insured.

15) **“Medically Necessary”** means that a treatment, service, or supply: (1) is essential for diagnosis, treatment, or care of the Injury or Sickness for which it is prescribed or performed; (2) meets generally accepted standards of medical practice; and (3) is ordered by a Physician and performed under his or her care, supervision, or order.

16) **“Physician”** means a licensed practitioner of medical, surgical, or dental services acting within the scope of his/her license. The treating Physician may not be Yourself, a Traveling Companion, or a Family Member.

17) **“Scheduled Departure Date”** means the date on which You are originally scheduled to leave on the Trip.

18) **“Scheduled Return Date”** means the date on which You are originally scheduled to return to the point of origin or to a different final destination.

19) **“Sickness”** means illness or disease which is diagnosed and treated by a Physician on or after the effective date of the protection plan and while You are covered under this plan.

20) **“Transportation”** - means any land, sea or air conveyance required to transport You during an Emergency Evacuation. Transportation includes, but is not limited to, Common Carrier, air ambulances, land ambulances and private motor vehicles.

21) **“Traveling Companion”** means a person who is sharing travel arrangements with You.

22) **“Trip”** means any trip taken during the Individual Coverage Term. Travel must be more than 100 miles from the Insured’s legal residence.

#### GENERAL PROVISIONS

**Subrogation.** To the extent the Company pays for a loss suffered by an Insured, the Company will take over the rights and remedies the Insured had relating to the loss. This is known as subrogation. The Insured must help the Company to preserve its rights against those responsible for the loss.

This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured’s rights, the Insured must sign an appropriate subrogation form supplied by the Company.

**Assignment.** This policy is not assignable but benefits may be assigned.

**When an Insured’s Coverage Begins.** All coverage will take effect at 12:01 A.M. local time, at Your primary residence on the Scheduled Departure Date of a covered Trip. In no event will coverage be effective if all premiums due have not been received prior to the Scheduled Departure Date.

**When an insured’s Coverage Ends.** An Insured’s coverage will end at 11:59 local time on the date which is the earliest of the following: (a) the Scheduled Return Date as stated on the travel tickets; (b) the date the Insured returns to his/her origination point if prior to the Scheduled Return Date; (c) The date the Insured cancels their covered Trip; (d) Any Trip that exceeds 365 days.

**Arbitration.** Notwithstanding anything in this policy to the contrary, any claim arising out of or relating to this contract, or its breach, may be settled by arbitration administered by the American Arbitration Association in accordance with its Commercial rules except to the extent provided otherwise in this clause. Arbitration is by mutual consent by all parties and Oregon courts will have jurisdiction over such arbitration. All fees and expenses of the arbitration shall be borne by the parties equally. However, each party will bear the expense of its own counsel, experts, witnesses, and preparation and presentation of proofs. The arbitrators are precluded from awarding punitive, treble or exemplary damages, however so denominated. If more than one covered person is involved in the same dispute arising out of the same policy and relating to the same loss or claim, all such covered persons will constitute and act as one party for the purposes of the arbitration. Nothing in this clause will be construed to impair the rights of the covered persons to assert several, rather than joint, claims or defenses.

**Notice of Claim.** Written notice of claim must be given to the claimant (either You or someone acting on Your behalf) to the Company or its designated representative within fifteen (15) days after a covered loss first begins or as soon as reasonably possible. Notice should include the Insured’s name and the plan number. Notice should be sent to the Company’s designated representative.

**Proof of Loss.** The claimant must send the Company, or its designated representative, proof of loss within ninety (90) days after a covered loss occurs or as soon as reasonably possible.

**Payment of Claims.** The Company, or its designated representative, will pay a claim after receipt of acceptable proof of loss. All claims will be paid to the Insured. In the event the Insured is a minor, incompetent, or otherwise unable to give a valid release for the claim, the Company may make arrangement to pay claims to the Insured’s legal guardian, committee, or other qualified representative. All or a portion of all other benefits provided by this 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 Insured. Any payment made in good faith will discharge the Company’s liability to the extent of the claim. The applicable benefit amount will be reduced by the amount of benefits, if any, previously paid by other Insurance policies. In no event will the Company reimburse the Insured for an amount greater than the amount paid by the Insured.

**Physical Examination and Autopsy.** The Company, or its designated representative, at their own expense, have the right to have the Insured examined as often as reasonably necessary while a claim is pending.

The Company, or its designated representative, also has the right to have an autopsy made unless prohibited by law.

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Plan is designed by MEDEX

This Insurance, under policy AIC-TRVL-P (12/05) OR is underwritten by: Arch Insurance Company, with its principal place of business in New York, NY.

Policy terms and conditions are briefly outlined in this Description of Coverage. Complete provisions pertaining to this insurance are contained in the master policy. In the event of any conflict between this description of coverage and the master policy, the policy will govern.