

# Travelex Travelite Protection Program

## PROTECTION PLAN OUTLINE

This brochure describes the highlights of our protection plan. Plan details and confirmation will be mailed to you once you have purchased the coverage. These details provide complete information regarding the benefits, exclusions and limits of the protection plan. Please read it carefully.

Note: Certain terms are defined in the Evidence of Coverage that will be mailed to you with your confirmation.

We Accept Pre-Existing Medical Conditions... when you follow these 3 simple steps:

- 1) Purchase Travelite within 10 days from the date your initial trip deposit is made.
- 2) Purchase coverage for the Full cost of your trip.
- 3) To meet the 10 day requirement, purchase by mail with the attached enrollment form, or call our Toll-Free Number at: 1-800-228-9792 or enroll via the Internet at: [www.travelex-insurance.com](http://www.travelex-insurance.com) or fax your enrollment form to: 1-800-867-9531

You May Purchase This Coverage Up To Your Date of Departure, however pre-existing conditions are applicable if coverage is purchased more than 10 days after the initial deposit is made. (See Pg. 3-WHEN "PRE-EXISTING" APPLIES)

Travelex Provides You With...

- 10 Day Review Period
- Ability to Waive Pre-existing Medical Conditions
- No Additional Charge for Children Under 16 (Package Plan Benefits Only)
- Primary Coverage - You File With Us First
- No Deductibles
- Worldwide Rental Vehicle Damage Protection (optional)

## DESCRIPTION OF BENEFITS

### Trip Cancellation / Interruption

**Trip Cancellation:** You are covered for the amount purchased for published penalties and unused non-refundable prepaid expenses for travel arrangements, whenever you are prevented from taking a trip for any of the following reasons that occur after the effective date of your protection plan:

- Covered sickness, injury or death of you, your traveling companion, business partner or family member of either you or your traveling companion which results in medically imposed restrictions as certified by a legally qualified physician at the time of loss preventing your continued participation in the trip.
- Bankruptcy or financial default of an airline, cruise line, tour operator or travel supplier (other than the travel agency where you purchased your travel arrangements)

which stops service more than 10 days following your protection plan effective date or after your departure.

- Strike that causes complete cessation of services of your common carrier for at least 48 consecutive hours.
- Weather which causes complete cessation of services of your common carrier for at least 48 consecutive hours.
- Employer termination or layoff affecting you or a person sharing the same room. Employment must have been with the same employer for at least 3 continuous years. This benefit is not available in Oregon.
- Terrorism in a country which is part of your covered trip which causes the United States Department of State to issue a travel warning that you should not travel within that country for a period of time that would include your trip.
- Hijack, quarantine, jury duty or court ordered appearance as a witness in a legal action in which you or your traveling companion are not a party (except law enforcement officers).
- Residence of you or your traveling companion is rendered uninhabitable due to unforeseen circumstances.
- Burglary of your or your traveling companion's residence within 10 days of departure or during your trip.
- Felonious assault of you or your traveling companion within 10 days of departure or during your trip.
- You or your traveling companion are called to emergency military duty for a national disaster other than war.
- Traffic accident directly involving either you or your traveling companion, substantiated by a police report, while en route to a scheduled departure point.
- If your travel supplier cancels your trip, you are covered up to \$150 for the reissue fee charged by the airline for your tickets. You must cover the full cost of the trip.
- Single supplement upgrade -you are covered when your traveling companion cancels or interrupts a trip for a covered reason and you do not.

**Trip Interruption:** If you are prevented from completing a trip for any of the reasons listed under Trip Cancellation that occur after the departure date of your protection plan and during your trip, you are covered up to the amount purchased for:

- Any unused non-refundable prepaid expenses for travel arrangements.
- One way economy fare to return to your original destination or rejoin your trip less the value of the unused return travel ticket.
- Accommodations and transportation expenses for up to \$150/day for 10 additional days when a traveling companion must remain hospitalized or a covered injury or sickness not requiring hospitalization prevents you from continuing travel and you must extend your trip

with additional hotel nights due to medically imposed restrictions as certified by a legally qualified physician.

**Trip Delay:** You are covered for additional transportation costs to join the covered trip or return home, including up to \$150 per day for reasonable accommodations and meals, if your delay requires an unplanned overnight stay; and/or for unused non-refundable expenses for your covered trip. Delay must be 3 hours or more and certified due to the following reasons:

- Delay of a common carrier;
- A traffic accident in which you were not directly involved;
- Inclement weather;
- Quarantine, hijacking, strike, natural disaster, terrorism or riot.
- Lost or stolen passports, travel documents or money.

**Itinerary Change:** You are covered for the unused non-refundable pre-paid expenses if the travel supplier makes a change in your itinerary after your scheduled departure date which prevents you from participating in that event/activity.

**Medical Expense:** You are covered for an accidental injury or a sickness which manifests itself during your trip. Medical treatment must be received within 30 days and expenses are covered for 52 weeks from the date of injury or onset of sickness. Benefits will include expenses for emergency dental treatments, up to \$750 and advance payment to a hospital if needed to secure your admission.

**Medical Evacuation/Repatriation:** You are covered, if an injury or sickness first occurs during your trip up to the plan limit, for medical evacuation when your condition is acute or life threatening and adequate treatment is not available at a local hospital or medical repatriation for you to return to your home or a hospital near your home for continued treatment.

Coverage also provides transportation for the return trip home for your dependent children under age 18 who are accompanying you and are left unattended if you are confined to a hospital for more than 7 consecutive days.

Transportation will be provided for a person of your choice to visit you if you are traveling alone and are confined to a hospital for more than 7 consecutive days.

Any use of this benefit must be pre-approved and arranged by the authorized Assistance Company.

**Note: Pre-existing condition limitations are waived for medical evacuation/repatriation.**

**Baggage & Baggage Delay:** You are covered for lost, stolen or damaged luggage and personal items and lost or stolen passport, visa and credit cards. You also have coverage for checked luggage which is delayed or misdirected by a common carrier for more than 24 hours from your arrival time at a destination, other than your residence, during your trip. Benefits are payable on property not specifically scheduled under other insurance.

**Accidental Death & Dismemberment:** You are covered for loss of life, limbs or sight due to an accidental injury while on your trip.

**Flight Accident Plan (optional):** You are covered, up to the amount purchased, for accidental death, dismemberment or loss of sight as a result of an accident while a passenger on a regularly scheduled air flight, a land or water conveyance provided by the airline as a substitute for an aircraft, a common carrier while en route to or from the airport, or at the airport immediately before boarding or after disembarking from an aircraft.

**Rental Vehicle Damage Protection (optional):** When a vehicle is rented through your travel agent for your covered trip, you are covered for up to 31 days for:

- Physical damage to a rental car which occurs while you are driving or while the rental car is left unattended during the rental period. (for this benefit, "you" refers to insured and licensed drivers who are designated as drivers on the rental car agreement);
- Reasonable and customary rental charges which may be imposed by the rental company while the car is being repaired; and
- Any loss of or damage to the rental car resulting from collision, hail, earthquake, fire, storm, theft or vandalism. See Evidence of Coverage for complete details. This benefit is not available in Oregon.

**10 Day Review Period:** If you are not completely satisfied within 10 days of purchasing this protection plan, Travelex will refund your plan cost, as long as you have not departed on your trip or filed a claim.

## TRAVEL ASSISTANCE SERVICE

Travel Assistance provides a variety of travel related services. Services offered include:

- Medical evacuation/repatriation
- Repatriation of remains
- Medical or legal referral
- Hospital admission guarantee
- Emergency cash transfer\*
- Translation service
- Prescription drug/eyeglass replacement\*
- Passport/visa information
- Bail bond\*
- Lost baggage retrieval
- Inoculation information.

\*Payment reimbursement to the Assistance Company is your responsibility.

For 24 HOUR Emergency Assistance While On Your Trip:

CALL TOLL FREE (800) 231-5857 - (within the U.S. and Canada) - OR CALL COLLECT (905) 523-7066 (from all other locations)

For Questions Regarding Claims Only,  
Call (888) 322-6776.

## WHEN YOU ARE COVERED

"Effective Date" is 12:01 a.m. following: 1) the postmark of your enrollment form or 2) the date you phone, fax or transmit your enrollment via the Internet with the proper payment.

**Trip Cancellation and Assistance Services:** Begin on your effective date.

**Trip Delay/Missed Connection:** While you are enroute to and from your covered trip.

**Flight Accident Plan:** Begins on the departure date or the date your completed enrollment form and fees are postmarked, faxed, phoned in or transmitted via the internet. Ends when the trip is completed or after 180 days, whichever comes first.

**Rental Vehicle Damage Protection:** Begins at the latter of the scheduled or actual pickup date and time.

**All Other Coverages (Includes Trip Interruption):** Begin at 12:01a.m. on your scheduled departure date or your effective date whichever is later, and end at the point and time of return on the scheduled return date.

## WHEN YOU ARE NOT COVERED

Benefits are not payable for sickness, injuries or losses of you or your traveling companion: resulting from suicide, attempted suicide, or intentionally self-inflicted injury while sane or insane (in Missouri, sane only); resulting from an act of declared or undeclared war; while participating in maneuvers or training exercises of an armed service; while riding, driving or participating in races, or speed or endurance contests; while mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes or other special equipment); while participating as a member of a team in an organized sporting competition; while participating in skydiving, hang gliding, bungee cord jumping, scuba diving or deep sea diving; while piloting or learning to pilot or acting as a member of the crew of any aircraft; received as a result or consequence of being intoxicated or under the influence of any controlled substance unless administered on the advice of a legally qualified physician; to which a contributory cause was the commission of or attempt to commit a felony or being engaged in an illegal occupation; due to normal childbirth, normal pregnancy (except complications of pregnancy) or voluntarily induced abortion; for dental treatment (except as coverage is otherwise specifically provided herein); or due to a pre-existing condition. Benefits under any coverage will not be paid for expenses reimbursed or services provided by any other source. In California, benefits are not payable if during the 60 days prior to the insured's effective date, a legally qualified physician advised the insured or his/her traveling companion not to travel due to a sickness or injury.

## WHEN "PRE-EXISTING" APPLIES

Pre-existing medical conditions will apply (see above) if you enroll in the protection plan more than 10 days after making your initial trip deposit. "Pre-existing Condition" means any injury, sickness or condition (including any condition from which death ensues) of you or your traveling companion, you and/or your traveling companion's family member or your business partner which within the sixty (60) day period prior to the effective date of your trip cancellation coverage under this protection plan: a) manifested itself, became acute or exhibited symptoms which would have caused one to seek diagnosis, care or treatment; b) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription;

or c) required medical treatment or treatment was recommended by a legally qualified physician.

This product is underwritten by either Old Republic Insurance Company or American National Insurance Company (a member of National Accident Insurance Group) dependent upon state. See your Confirmation of Coverage for underwriter details.

Note: This plan contains disability insurance benefits or health insurance benefits, or both, that only apply during the covered trip. You may have coverage from other sources that already provides you with these benefits. You should review your existing policies. If you have any question about your current coverage, call your insurer or health plan provider.

## ENROLLING IS EASY

**By phone or to answer questions:** Call Toll-Free (800) 228-9792 Monday - Friday 8:00 am – 8:00 pm CST. Please have a major credit card ready and the location number: **32-6376**.

**By Internet:** Enroll or see plan details on our secure website at: [www.travelex-insurance.com](http://www.travelex-insurance.com) – type the location number above in the Quick Enrollment box.

**By Fax (credit card sales only):** Sign, date and complete the attached enrollment form. Please include the "Location #" above on the appropriate line and fax the completed form to 1-800-867-9531.

**By Mail (credit card or check sales only):** Sign, date and complete the attached enrollment form. If paying by credit card, please complete the requested credit card information, otherwise enclose a check or money order payable to Travelex Insurance Services and send to:

### TRAVELEX INSURANCE SERVICES

PO BOX 641070

OMAHA, NE 68164-7070

*(Do Not Send Cash)*

For Claim Questions or to Receive A Claim Form, call (888) 322-6776. If you are filing a claim, you will be asked to provide proof of your loss. Be sure to obtain detailed medical records, receipts, and verification of loss, damage or delay. Refer to your Evidence of Coverage for complete details.

## OPTIONAL FLIGHT ACCIDENT PLAN

Adults and children may purchase with package plan or separately.

\$300,000 of Coverage.....\$11/person

\$500,000 of Coverage.....\$18/person

Maximum flight accident coverage is \$500,000 per person per covered trip.

**PACKAGE PLAN BENEFITS – PER PERSON**

Trip Cancellation/Interruption.....	Trip Cost (\$25,000 limit)
Bankruptcy/Default.....	Trip Cost (\$25,000 limit)
Trip Delay/Missed Connection .....	\$500
Itinerary Change .....	\$150
Accident Medical Expense .....	\$5,000
Sickness Medical Expense .....	\$5,000
Medical Evacuation/Repatriation .....	\$25,000
Baggage.....	\$1,000
Baggage Delay.....	\$200
Common Carrier AD&D.....	\$10,000
24-Hour AD&D .....	\$10,000
Travel Assistance Services.....	Included

TRIP COST Use full cost per person	PLAN RATE per person			
	Age 0-55	Age 56-70	Age 71-80	Age 81+
\$ 0.....	\$26.....	\$29.....	\$41.....	\$59
\$ 1-\$ 1,000 .....	\$34.....	\$73.....	\$88.....	\$115
\$1,001-\$ 2,000 .....	\$79.....	\$125.....	\$157.....	\$192
\$2,001-\$ 3,000 .....	\$115.....	\$168.....	\$227.....	\$271
\$3,001-\$ 4,000 .....	\$151.....	\$232.....	\$298.....	\$401
\$4,001-\$ 5,000 .....	\$190.....	\$287.....	\$362.....	\$524
\$5,001-\$ 6,000 .....	\$222.....	\$345.....	\$442.....	\$639
\$6,001-\$ 7,000 .....	\$280.....	\$401.....	\$529.....	\$765
\$7,001-\$ 8,000 .....	\$315.....	\$449.....	\$621.....	\$899
\$8,001-\$ 9,000 .....	\$360.....	\$503.....	\$704.....	\$1,018
\$9,001-\$10,000 .....	\$420.....	\$561.....	\$787.....	\$1,138

The rates above are for trips from 1-31 days long. Daily rate for trips from 32-180 days, add \$4.00/day. \$0 band excludes Trip Cancellation/Interruption and Bankruptcy/Default protection. Rates are subject to change. For trips over \$10,000, please call (800) 228-9792.

**RENTAL VEHICLE DAMAGE PROTECTION**

Can only be purchased with package plan  
\$50,000 of Coverage.....\$5/day  
Maximum 31 days of coverage

**You have invested a great deal of time and money on**

**your trip. Protect that investment today with a Travelex Protection Plan!**

**Here are some commonly asked questions about travel insurance:**

**Q: What is "Travel Protection" and why do I need it?**

A: Travel Protection is a combination of insurance coverages and travel assistance service; when combined into a comprehensive package protects you and your family before and during your trip. Remember, no matter how well planned your trip is, the unexpected can and often does occur. No one can predict the future, but Travelex Protection Plans give you peace of mind so you can enjoy your trip.

**Q: Why do I need Trip Cancellation or Trip Interruption protection?**

A: Every travel supplier (Tour Operators, Hotels, Travel Agencies, Cruise lines or Airlines) has cancellation penalties. You pay a deposit or final payment toward a trip or vacation and these suppliers will apply their published penalties to your trip. You will find the published penalties more severe as your scheduled departure date gets closer. These published penalties inform you that if you cancel, the supplier will hold all or a large percentage of your monies placed as down payment, deposit or final payment. You will lose this money. Trip Cancellation and Interruption is designed to reimburse you for your loss if you cancel or interrupt for a covered reason.

**Q: Does Travelex accept pre-existing conditions?**

A: Yes - when you follow these three simple steps:  
1. Purchase the protection plan within 10 days from the date your initial trip deposit is made.  
2. Purchase coverage for the full cost of your trip.  
3. To meet the 10-day requirement, fill out and submit the enrollment form on this web site along with proper payment or call our toll-free number at 1-888-457-4602

**Q: I have Homeowner's and Medical Insurance; won't these policies provide protection during my trip?**

A: It is best to review your current insurance programs and the coverage they offer when you are traveling. Many HMO's and PPO's offer limited coverage when traveling outside your networks. Medicare supplement benefits also need to be reviewed to determine their exact benefits or lack of benefits when traveling. Travelex Protection Plans offer primary medical coverage because of the varying degree of limitations offered by many medical plans. Homeowner's and rental policies usually have large deductibles in the event of lost or stolen baggage when traveling. You file with Travelex first and there are no deductibles.

**Q: May I purchase this coverage up to the date of departure?**

A: Yes, however pre-existing conditions will apply if coverage is purchased more than 10 days after the initial deposit is made.

Location Number (Mandatory): 32-6376

Travel Agency Name: \_\_\_\_\_

Travel Agent's Name: \_\_\_\_\_

Agency Fax Number: \_\_\_\_\_

Agency Phone Number: \_\_\_\_\_

To: **Fax Enrollment Department**

**Fax: 1-800-867-9531**

Phone: 1-800-228-9792

# Travelite

Travel Protection

## Fax Enrollment Form

(Credit Card Sales Only)

CONFIRMATION # \_\_\_\_\_

(For TIS Use Only)

Note: All individuals using the same enrollment form must be Family Members as defined in our definition of Family Member. When all accompanying adults purchase a package plan, all children under 16 receive Plan benefits at no additional charge. Please list covered children. Please print and sign below.



<b>Traveler #1:</b>	/ /	\$	\$
Name: (first-last)	DOB	Trip Cost	Plan Cost
<b>Traveler #2:</b>	/ /	\$	\$
Name: (first-last)	DOB	Trip Cost	Plan Cost
<b>Traveler #3:</b>	/ /	\$	\$
Name: (first-last)	DOB	Trip Cost	Plan Cost
<b>Traveler #4:</b>	/ /	\$	\$
Name: (first-last)	DOB	Trip Cost	Plan Cost

**For Trips 32-180 days long:** (include departure & return dates in calculation)

\$4 x \_\_\_\_\_ (# of days over 31) x \_\_\_\_\_ (# of adult participants) = \$ \_\_\_\_\_

**Optional Flight Coverage:** (Maximum \$500,000/person)

**CHOOSE \$300,000 Protection for \$11 x \_\_\_\_\_ (# of travelers) = \$ \_\_\_\_\_**

**OR \$500,000 Protection for \$18 x \_\_\_\_\_ (# of travelers) = \$ \_\_\_\_\_**

**Rental Vehicle Damage Protection: \$5 x \_\_\_\_\_ (# of days up to 31) = \$ \_\_\_\_\_**

Pickup date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Return date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Non-refundable processing fee = \$ 3.00**

**Total Amount Due** and authorized as payment below = \$ \_\_\_\_\_

**Departure Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Return Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Destination:** \_\_\_\_\_  
(Mo/Day/Yr) (Mo/Day/Yr)

**Name of Cruise Line/Tour Operator:** \_\_\_\_\_ **Cruise Tour**

**Your address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Day Phone:** \_\_\_\_\_

**Beneficiary:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**ACCOUNT NUMBER:** Visa  MasterCard  Discover  American Express  **Expiration Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_



Plan costs are non-refundable after the 10 Day Review Period. \_\_\_\_\_ **Print Full Name** \_\_\_\_\_ **Signature**

Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an Insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud. \_\_\_\_\_ **Date**