MULTINATIONAL CHOICE - BUSINESS TRAVEL ACCIDENT COVERAGE FORM

SECTION I - COVERAGES

A. COVERAGE A - BUSINESS TRAVEL ACCIDENTAL DEATH AND DISMEMBERMENT

1. We will pay the applicable percentage shown in the schedule below of the Benefit Amount stated in the Declarations for a "covered loss" that a "covered person" sustains as a result of an "accident" that occurs in the "coverage territory" while on a "business trip".

2. The "accident" must occur during the policy period. The "covered loss" must be sustained within one year of the date of the "accident".

3. If the "covered person" sustains more than one "covered loss" as a result of one "accident", we will not pay more than 100% of the Benefit Amount.

"Covered Loss"	Benefit Amount
Life	**100%**
Both Hands or Both Feet	**100%**
Sight of Both Eyes	**100%**
One Hand and One Foot	**100%**
Speech and Hearing	**100%**
Either Hand or Foot and also Sight of One Eye	**100%**
Movement of Both Upper and Lower Limbs (Quadriplegia)	**100%**
Movement of Both Lower Limbs (Paraplegia)	**100%**
Movement of Both Upper and Lower Limbs of One Side of the Body (Hemiplegia)	**100%**
Either Hand or Foot	**50%**
Sight of One Eye	**50%**
Speech or Hearing	**50%**
Thumb and Index Finger of Either Hand	**25%**

4. "Covered loss" means a Covered Loss described in the schedule above. With regard to:

a. Hands and feet, there must be actual severance through or above wrist or ankle joints.

b. Sight, speech or hearing, there must be entire and irrecoverable loss thereof.

c. Thumb and index finger, there must be actual severance through or above the metacarpophalangeal joints.

d. Movement of limbs, there must be complete and irreversible paralysis of such limbs.

5. "Covered person" will be presumed to have suffered loss of life if:

a. His or her body has not been found within one year after the disappearance of a watercraft or aircraft in which he or she was an occupant at the time of its disappearance;

b. The disappearance of the watercraft or aircraft was due to its accidental forced landing, stranding, sinking or wrecking; and

c. This policy would have covered injury resulting from the "accident".

6. Age Reduction Schedule

If a "covered person" is age 70 or older on the date of the "accident" causing the "covered loss", the amount payable for the "covered loss" will be a percentage of the amount that would otherwise be payable, as shown below:

Age on date of "Accident"	Percentage of Benefit Amount Otherwise Payable
70-74	**65%**
75-79	**45%**
80-84	**30%**
85 & older	**25%**

7. The most we will pay under **COVERAGE A** if two or more "covered persons" are involved in the same "accident" is the Accident Aggregate Limit stated in the Declarations, and the amount payable for each "covered person" will be proportionately reduced so that the total will equal the Aggregate Accident Limit.

8. The most we will pay under **COVERAGE A** for all "accidents" occurring during the policy period is the Accident Annual Aggregate Limit stated in the Declarations, regardless of the number of "covered persons" or "accidents" that occur during the policy period.

9. This **COVERAGE A** will be primary and will not be reduced due to the existence of other available insurance.

B. COVERAGE B - ACCIDENT MEDICAL EXPENSE BENEFIT

1. We will pay the "medical expenses" that a "covered person" sustains as a result of "bodily injury" from an "accident" that occurs in the "coverage territory" while on a "business trip".

2. We will only pay the "medical expenses" that are in excess of the deductible amount, if applicable, as shown in the Declarations. The deductible amount will be applied separately to each "accident".

3. The first "medical expense" must be incurred within 26 weeks after the "accident". "Medical expenses" are considered incurred on the date service is rendered.

4. We will not pay for "medical expenses":

a. Incurred more than 5 years after the "accident";

b. Incurred in the country of the "covered person's" primary workplace or residence;

c. For any "bodily injury" arising out of and in the course of the "covered person's" employment; or

d. If the original or ancillary purpose of the "covered person's" trip is to obtain the medical treatment.

5. Additional Definitions

a. "Medical expenses" means "reasonable expenses" incurred for necessary:

(1) Medical or surgical treatment, services and supplies; and

(2) Hospital, nursing and ambulance services;

that are prescribed by a legally qualified physician for the sole purpose of treating the injury.

b. "Medical expenses" does not include:

(1) Chiropractic expenses on an inpatient or outpatient basis;

(2) Organ transplants and related services;

(3) Artificial limbs or eyes, including replacement of these items;

(4) Treatment or service provided by a residential or private duty nurse;

(5) Routine eye care, dental care, medical care and other routine care;

(6) Any elective or experimental treatment; or

(7) Services provided for which no charge is normally made.

c. "Reasonable expenses" means fees and prices which do not exceed those generally charged for similar medical care in the local area where received by the "covered person".

6. The most we will pay under **COVERAGE B** for all expenses incurred by a "covered person" as a result of any one "accident" is the Medical Expense Accident Limit shown in the Declarations.

7. The most we will pay under **COVERAGE B** for all "accidents" occurring during the policy period is the is the Medical Expense Annual Aggregate Limit stated in the Declarations regardless of the number of "covered persons" or "accidents" that occur during the policy period.

C. BUSINESS TRAVEL ACCIDENT ANNUAL AGGREGATE LIMIT OF INSURANCE

The most we will pay under **COVERAGES A** and **B** for all "accidents" is the Business Travel Accident Annual Aggregate Limit of Insurance stated in the Declarations, regardless of the number of "covered persons" or "accidents" that occur during the policy period.

D. EXCLUSIONS

These exclusions apply to **COVERAGES A** and **B** unless otherwise indicated. We will not pay for a "covered loss", or "medical expenses" for "bodily injury":

1. That are intentionally self-inflicted, including suicide or attempted suicide;

2. Intentionally caused or aggravated by you;

3. Arising out of "war";

4. Sustained while in the armed forces of any country or multinational authority;

5. Arising out of the following activities: skiing, skydiving, scuba diving, hangliding, parachuting, bungicord jumping, parasailing, zip lining, mountain or rock climbing, spelunking, cave tubing, motor cycle riding, or racing any vehicle or watercraft;

6. Sustained while committing or attempting to commit an unlawful or criminal act;

7. Sustained while voluntarily participating in any civil disturbance, insurrection, or riot;

8. Sustained while intoxicated, or while voluntarily taking drugs which applicable law prohibits dispensing without a prescription;

9. Due to alcoholism or drug addiction;

10. Due to mental anguish, mental injury, mental illness, or emotional distress;

11. Arising out of nuclear explosion, reaction, or radiation;

12. Sustained while riding as a passenger, pilot, or member of the crew, or boarding or alighting from any aircraft except as:

    a. A passenger on a regularly-scheduled commercial or chartered airline flight; or

    b. A passenger in a United States military aircraft.

E. OTHER INSURANCE FOR MEDICAL EXPENSES

1. Excess

If you have other insurance, including any self-insurance, providing coverage against a loss covered by this insurance, or the "covered person" is covered by any statutory plan or program of social security or other government benefit program, the insurance under this Coverage Part shall be excess insurance over such insurance, plan, and program.

2. Other Insurance Issued by Us

If there is other insurance covering the same loss, damage or expense under this policy or under another policy issued by us or any of our affiliated insurance companies, the most we will pay for the covered loss, damage, or expense is the highest limit of insurance that applies under this policy or any other policy issued by us or any of our affiliated insurance companies.

3. Maintaining Local Insurance

You must maintain and renew throughout the policy period without reduction or restrictions all:

a. "compulsory insurance", and

b. "local insurance" in effect, or represented to be in effect, at the inception of or during the policy period.

If any such policies are not so maintained, we will not be liable under this Coverage Part for more than we would have been had such policies been so maintained. Any coverage provided in such policies that are not provided in this coverage Part are not intended to, and do not serve to, extend to this Coverage Part.

4. Government Benefits

This insurance will not take the place of any obligation of any government to pay benefits or damages, whether or not such obligation becomes invalid, suspended, unenforceable or uncollectible for any reason, including bankruptcy or insolvency.

SECTION II - CLAIMS

A. NOTICE OF CLAIMS

1. You or the "covered person" must give us written notice of a claim within 90 days after an "accident" that may result in a "covered loss" or "medical expenses" covered by this Coverage Part. If notice cannot be given within that time, it must be given as soon as reasonably possible.

2. The notice should include the policy number, "covered person's" name, time and place of the "accident", circumstances of the "accident", names and addresses of any witnesses and any other persons or organizations that may be involved in the "accident", and the nature of any injuries caused by the "accident".

B. CLAIM COOPERATION

You and any "covered person" must cooperate with us in the investigation and administration of any claim under this Coverage Part. Such cooperation includes but is not limited to:

1. Providing any information or documents we request;

2. Allowing us to examine or perform an autopsy of any "covered person" by a physician of our choice; and

3. Allowing us to examine all records and medical reports relating to the "covered person", allowing us to examine you and any "covered person" under oath, and assisting us in the enforcement of any right against any person or organization which may be liable to you or the "covered person" for loss to which this insurance applies.

C. PAYMENT OF CLAIMS

We, at our election, may pay amounts due hereunder to the first Named Insured, another Named Insured, a "covered person", or a "covered person's" estate in the case of death. Accidental "medical expense" benefits may be paid directly to any medical provider.

In the event of our overpayment of any amounts under this Coverage Part, you, the Named Insured, the "covered person", or the "covered person's" estate shall reimburse us.

SECTION III. GENERAL CONDITIONS

A. TRANSFER TO US OF YOUR RIGHTS OF RECOVERY AGAINST OTHERS

If any insured person or entity has rights to recover all or Part any payment we make under this policy, those rights are transferred to us to the extent of our payment. At our request, such person or entity will bring suit or transfer those rights to us and help us enforce them. Such person or entity must do nothing after loss to impair any recovery right.

B. LEGAL ACTION AGAINST US

No person or entity has a right to sue us under this Coverage Part unless all of its terms and conditions have been fully complied with. Any suit to recover "covered loss" or "medical expenses" must be brought within 3 years of the date of the "accident" which caused them.

C. CHANGES

No agent has authority to change or waive any Part of this policy. To be valid, any change or waiver must be in writing, approved by one of our officers, and made a Part of this policy.

D. NOT IN LIEU OF WORKERS COMPENSATION

This policy does not satisfy requirements under any "workers compensation law".

SECTION IV. DEFINITIONS

A. **"**Accident" means a sudden, unexpected, specific, external, and abrupt event that occurs by chance at an identifiable time and place during the policy period.

B. "Bodily injury" means any physical harm to the physical health of the "covered person" caused by an "accident". "Bodily injury" does not include sickness, illness, disease, or condition of the "covered person" that causes a loss for which the "covered person" incurs medical expenses, except for a bacterial infection arising out of covered physical harm to the "covered person".

C. "Business trip" means a bona fide trip to a destination in the "coverage territory" for duration of up to 180 days:

1. While on assignment or at the direction of the Named Insured for the purpose of furthering the business of the Named Insured;

2. Which begins when a person leaves the territorial limits of his or her country of residence and country of primary workplace, whichever last occurs, for the purpose of beginning the trip;

3. Which ends when he or she returns to the territorial limits of his or her country of residence or country of primary workplace, whichever first occurs;

4. Excluding commuting to and from work; and

5. Including personal trips, not exceeding 14 days, taken by the "covered person" while on the "business trip".

D. "Compulsory insurance" means "local insurance" that is required in any "jurisdiction" by law, regulation, or other governmental authority.

E. "Covered person" means an "employee" in the class of "employees" listed as covered in the Declarations.

F. "Coverage territory" means anywhere in the world except:

1. The United States (including its territories and possessions), Puerto Rico, and Canada.

2. Any country, nation, sovereignty, republic, province, or state while any applicable trade or economic sanctions, or other laws or regulations, prohibit us from providing insurance or transacting business in that place.

G. "Employee" means an individual hired by you who works thirty (30) hours or more per week for you.

H. "Jurisdiction" means a state, province, territory, or country.

I. "Local insurance" means insurance issued by a governmental entity or an insurer licensed or permitted by law to do business in the "jurisdiction" in the "coverage territory" where the insurance is intended to apply.

J. "Local nationals" means "employees" hired by you to work primarily in a country in the "coverage territory" of which the "employee" is a citizen or permanent resident. "Local nationals" do not include "U.S./Canadians".

K. "Third country nationals" means "employees" who are hired by you to work primarily in a country in the "coverage territory" which is not their country of citizenship or permanent residence.

L. "U.S./Canadians" means "employees" hired by you to work primarily in the Unites States (including its territories and possessions), Puerto Rico, or Canada, and who are citizens or permanent residents of such workplace.

M. "War" means:

1. "War", including undeclared or civil war;

2. Warlike action by a military force, including action in hindering or defending against an actual or expected attack, by any government, sovereign, or other authority using military personnel or other agents; or

3. Insurrection, rebellion, revolution, usurped power or action taken by governmental authority in hindering or defending against any of these.

N. "Workers compensation law" means a workers compensation, occupational disease, social security, or government benefit law of any "jurisdiction" that provides, or requires an employer to pay benefits for an injury that arises out of and in the course of employment.