

Certificate Document Modification Overview

Patriot Multi-Trip America (PATEA) (PEGAI)

Product Review

Effective Date: October 21, 2020

Summary of Notable Changes

Various formatting changes have been made to your certificate to make the most frequently needed information easier to find. To improve our service, we have also made various language modifications to increase consistency across our portfolio; these changes help us help you!

Please note the following benefit enhancements and changes:

- Reference to Home and Host Country have been changed to Country of Residence and Destination Country throughout the entire Certificate of Insurance
- United States In-Network Coinsurance changed to 100% and \$0 Out-of-Pocket Maximum
- Emergency Room Illness Deductible removed for International only
- Interfacility Ambulance Transfer added:
 - Transfer must result in an Inpatient Hospital admission
- Traumatic Dental Injury added:
 - Treatment at a Hospital Facility due to an Accident
 - Additional Treatment for the same Injury rendered by a Dental Provider will be paid at 100%

Detailed Changes

The following details are provided to assist you in identifying the changes to your Certificate. Please refer to your previous and new Certificates for actual language. Please note that the Provision order of the contract language may have changed in certain areas and are noted in the detailed changes.

Section	Modification
Cover pages	Added cover page and table of contents
Benefit Summary	<ul style="list-style-type: none"> • Benefit Summary has been moved to fall before the provisions • Language updates for grammar and consistency • Items previously listed in the ELIGIBLE MEDICAL EXPENSES provision only have been added to the BENEFIT SUMMARY
A. Benefit Summary	<ul style="list-style-type: none"> • Provision previously titled "SCHEDULE OF BENEFITS/LIMITS" • Provision previously listed after the CONDITIONS AND GENERAL PROVISIONS • Provision deleted in its entirety and replaced with updated language for grammar and consistency

Section	Modification
B. Agreement	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Changed reference from Sirius International to Sirius Specialty • Master Policy effective date changed to October 21, 2020
C. Conditions and General Provisions	Language updates for grammar and consistency
(1) Entire Agreement	Language updates for grammar and consistency
(2) Premium	<ul style="list-style-type: none"> • Changed item (a) from “on or before the Effective Date of Coverage” to “on or before the Due Date(s) as specified on the Declaration • Added item (b) for “on or before any renewal date subject to the CONDITIONS AND GENERAL PROVISIONS, RENEWAL; AMENDMENTS provision”
(3) Claims Notification	<p>Provision deleted in its entirety and replaced with the following:</p> <p>(1) CLAIMS NOTIFICATION: All claims and related claim information should be filed with the Company through the Plan Administrator at the contact information below, or online at www.imglobal.com/member as soon as possible:</p> <p>International Medical Group Attn: Claims Department PO Box 9162 Farmington Hills, MI 48333-9162 USA</p> <p>Proof of Claim: When the Insured Person receives Treatment or the Company receives notice of a claim for benefits under this insurance, the Insured Person shall submit an International Medical Group (IMG) Claim Form as a necessary component of the Proof of Claim. An IMG Claim Form may be obtained from the form’s library on IMG’s website at www.imglobal.com or completed online via the MyIMG customer portal.</p> <p>(a) A Proof of Claim shall not be effective and will not satisfy the Terms of this insurance unless it includes all the following:</p> <p style="padding-left: 40px;">a duly completed, timely submitted and signed IMG Claim Form for each new Illness, diagnosis or Injury unless the Company waives such requirement in writing</p>

Section	Modification
<p>Claims Notification continued</p>	<ul style="list-style-type: none"> (i) an Authorization for Release of Medical Information when specifically requested by IMG (ii) all original Universal Billing Forms, Superbill and statements of service rendered from Physicians, Hospitals, and other healthcare or medical service providers involved with respect to the claim (iii) all original receipts for any costs, prescription medications, fees or expenses that have been incurred or paid by, or on behalf of, the Insured Person with respect to the claims, including without limitation all original receipts for any cash and/or credit card payments. The provider of service’s full name, address, telephone number (including area/country code), date of service, description of service (applicable procedure codes), and diagnosis codes must be included on the receipts. (iv) If the claims are submitted electronically, copies of the above items are acceptable; however, the Company reserves the right to request the original documents. <p>(b) The Insured Person and/or Physician, Hospital and other healthcare and medical service providers and suppliers shall have one hundred eighty (180) days from the date a claim is incurred to submit a complete Proof of Claim. The Company at its option may pend resolution and adjudication of submitted claims and/or may deny coverage due to any of the following:</p> <ul style="list-style-type: none"> (i) IMG’s receipt of an incomplete Proof of Claim (ii) failure to submit any Proof of Claim (iii) Insured Person’s, Physician’s or Hospital’s failure to submit a timely Proof of Claim <p>The Company may require the Insured Person to sign an Authorization for Release of Medical Information to</p>

Section	Modification
<p>Claims Notification continued</p>	<p>request medical records on their behalf or supply us with additional documentation if we are unable to make a benefit determination based on the submitted Proof of Claim. The Insured Person and/or Physician, Hospital and other healthcare and medical service providers and suppliers shall have sixty (60) days from the date of the request to submit the requested information. If the information is not received within the designated time period, previously submitted and subsequent claims will be denied.</p>
<p>(4) Appealing a Claim</p>	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Changed from 90 days from notice of denial was mailed to submit an appeal to 60 days • Added to first paragraph “The Insured Person must file an appeal prior to bringing any legal action under the contract of insurance. The Insured Person should submit a written request for an appeal along with comments, all relevant, pertinent or related documents, medical records and other information relating to the claim.” • Added address for appeal submission
<p>(5) Assignment, Change or Waiver</p>	<p>Language updates for grammar and consistency</p>
<p>(6) Service of Suit; Venue; Choice of Law; Trial by Court</p>	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added to first paragraph “No action at law or in equity can be brought by an Insured Person to recover on the contract of insurance prior to the later of (a) expiration of sixty (60) days after written Proof of Claim has been furnished in accordance with the contract of insurance or (b) exhaustion of one (1) appeal under the CONDITIONS AND GENERAL PROVISIONS, APPEALING A CLAIM provision above. No action at law or in equity can be brought after the expiration of three (3) years after the time written Proof of Claim is required to be furnished under the contract of insurance. “ • Changed attorney-in-fact address in second to last paragraph
<p>(7) Economic Sanctions</p>	<p>New provision:</p> <p>The Company will not cover any person as an Insured Person if such cover would result in the Company being exposed to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions,</p>

Section	Modification
Economic Sanctions continued	laws, or regulations of the European Union, United Kingdom or the United States of America.
(8) Misrepresentation	Language updates for grammar and consistency
(9) Insolvency	No changes
(10) Subrogation Clause	Provision deleted in its entirety and replaced with updated language
(11) Other Insurance	Language updates for grammar and consistency
(12) Cancellation by Insured Person	Language updates for grammar and consistency
(13) Applicable Currency	Language updates for grammar and consistency
(14) Cooperation	Language updates for grammar and consistency
(15) Claim Settlement	Language updates for grammar and consistency
(16) Fraudulent Claims	Language updates for grammar and consistency
(17) Arbitration	No changes
(18) Termination of Master Policy	No changes
(19) Termination of Coverage for Insured Persons	<ul style="list-style-type: none"> • Items re-numbered for consistency across IMG’s product portfolio • Language updates for grammar and consistency • Added items (d) and items (f) through (i)
(20) Renewal; Amendments	Language updates for grammar and consistency
(21) Patient Advocacy	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Changed reference of Family members to Relatives
(22) Right of Recovery	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Changed reference of Family members to Relatives
(23) Explanation or Verification of Benefits	Language updates for grammar and consistency
D. Eligibility	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Items re-numbered for consistency across IMG’s product portfolio • Item (1) changed Dependent Child to Child and Grandchild • Item (3) added for “receive written acceptance of his/her Application or renewal from the Company” • Item (4) changed from at least 15 days old to 14 days old • Item (6) added “including any applicable Benefit Period” • Item (7) added for “not be Pregnant, Hospitalized or Disabled on the Initial Effective Date”

Section	Modification
Eligibility continued	<ul style="list-style-type: none"> • Item (8) added for “not be HIV + on the Initial Effective Date” • Item (9) added for “not have established a permanent residency in the Destination Country” • Added last paragraph for “Once the Insured Person and/or Spouse reaches the ages of seventy (70) and at the time of their renewal, the Period of Coverage limit will be reflective of their new age range as listed in the BENEFIT SUMMARY.” • Item previously listed as item (4) deleted for “not be a citizen of the Host Country”
E. Pre-certification Requirements	Language updates for grammar and consistency
(1) Specific Requirements	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Items have been reordered • Items removed: <ul style="list-style-type: none"> ○ Durable Medical Equipment ○ Artificial Limbs ○ Computerized Axial Tomography (CAT Scan) ○ Magnetic Resonance Imaging (MRI) • Items added: <ul style="list-style-type: none"> ○ Chemotherapy ○ Interfacility Ambulance Transfer ○ Radiation Therapy
(2) General Requirements	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Changed website to: www.imglobal.com/member/precertification
(3) Loss of Coverage / Benefits for Non-compliance of Pre-certification Requirements	Language updates for grammar and consistency
(4) Emergency Pre-certification	No changes
(5) Concurrent Review	No changes
(6) Appeal Process	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added contact information for pre-certification appeals
F. United States Preferred Provider Organization (PPO)	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added item (1) for Special Benefits • Changed Plan Administrator’s website in last paragraph where PPO directory can be obtained in last paragraph to www.implobal.com/member

Section	Modification
<p>G. Eligible Medical Expenses</p>	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Items re-numbered for consistency across IMG’s product portfolio • Item (1)(a) added “...and Ancillary Services...” and “A private room will be considered when no semi-private room is available or if medical necessity warrants this type of room. The private room rate is not to exceed the average private room rate.” • Item (1)(b) added “...and Ancillary Services...” • Item (4)(b) removed “...(psychometric, behavioral and educational testing are not included);...” and added “Laboratory services billed for professional component fees are covered if the pathologist has direct involvement in providing a written report or verbal consultation for specimen-specific pathology services” • Item (4)(e) added “reconstructive Surgery when the Surgery is incidental to and follows Surgery that was covered hereunder” • Item (4)(f) added “radiation therapy or Treatment, and chemotherapy” • Item (4)(g) removed “...including the cost of the actual blood or blood components...” • Item (4)(n) added for “Interfacility Ambulance Transfer must be a result of an Inpatient Hospital Admission, Medically Necessary and from one licensed health care Facility to another licensed health care Facility via air or land ambulance” • Item (4)(o) added for “chiropractic services prescribed by a Physician and performed by a professional chiropractor and necessarily incurred to continue recovery from a covered Injury or covered Illness; services include manipulations, x-rays and laboratory tests ordered by the chiropractor” • Item (4)(q) (previously listed as item (4)(o)) deleted in its entirety and replaced with “Durable Medical Equipment, as defined herein, deemed to be Medically Necessary • Added item (5) for “Changes incurred for Treatment at an Urgent Care Clinic” • Added item (6) for “Charges incurred for Treatment at a Walk-in Clinic” • Added item (7) for “Charges for Treatment of an Injury to the foot due to an Accident covered hereunder” • Added item (8) for “Charges for Treatment of an Illness for which foot Surgery is Medically Necessary and

Section	Modification
Eligible Medical Expenses continued	<p>determined to be the only appropriate method of Treatment”</p> <ul style="list-style-type: none"> • Item (9) (a) added for “Charges for Treatment following Traumatic Dental Injury from a covered Accident that resulted in physical Injury to the Insured Person” • Item (9)(b) (previously listed as item (4)(m)) deleted entirely and replaced with “Charges for necessary Dental Treatment of Unexpected pain to sound natural teeth • Item (9)(c) previously listed under a separate provision for EMERGENCY DENTAL • Item (10) for “Charges incurred for Treatment of an Injury sustained while participating in athletic or sporting activities that are non-contact, non-professional, and engaged in by the Insured Person solely for recreational, entertainment or fitness purposes” (previously listed in the EXCLUSIONS provision • Item (11) for “Charges for value-added tax (VAT) or like tax incurred on Eligible Medical Expenses.” (previously listed in the EXCLUSIONS provision)
H. Accidental Death and Dismemberment	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added second paragraph under item (1) for “The Insured Person’s death must occur within ninety (90) days of the Accident and result, directly and independently of all other causes, from an accidental bodily Injury that is unintended, unexpected and unforeseen. The bodily Injury must be evidenced by a visible contusion or wound, except in the case of accidental drowning. The bodily Injury must be the sole cause of death. The bodily Injury must be the sole cause of death. The Company will pay the benefit owed upon proper application therefor, in the following order: <ul style="list-style-type: none"> (a) to the beneficiary designated in writing by the Insured Person (b) to the Insured Person’s closest surviving Relative (c) the Insured Person’s estate (d) to a claimant entitled to payment under applicable small estate affidavit laws.” • Added to first paragraph of item (2) “...within ninety (90) days from the date of the Accident...”

Section	Modification
Accidental Death and Dismemberment continued	<ul style="list-style-type: none"> • Dismemberment benefit schedule previously listed under item (2) moved to the BENEFIT SUMMARY Added last paragraph of item (2) “The loss of a hand or foot means the complete severance at or above the wrist or ankle joint. The loss of sight means the entire and irrecoverable loss of sight. The Insured Person’s dismemberment must result, directly and independently of all other causes, from an accidental bodily Injury which is unintended, unexpected, and unforeseen. The bodily Injury must be evidenced by a visible contusion or wound. The bodily Injury must be the sole cause of dismemberment.”
I. Benefit Period	<ul style="list-style-type: none"> • New provision (previously listed under the DEFINITIONS provision) • Language has been deleted in its entirety and replaced with updated language
J. Common Carrier Accidental Death	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added items (1)(b) and (d)
K. Emergency Medical Evacuation	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Item (2)(b) added “...within twenty-four (24) hours • Item (2)(e) added “...provided by designated, licensed, qualified, professional emergency personnel acting within the scope of such license and...” • Item (f)(i) added “...outside the Insured Person’s Country of Residence...”
L. Emergency Reunion	Language updates for grammar and consistency
M. Identity Theft	Language updates for grammar and consistency
N. Lost Luggage	Language updates for grammar and consistency
O. Political Evacuation	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added “...Emergency Travel Advisory...” to last paragraph
P. Public Health Emergency	<p>New provision:</p> <p>PUBLIC HEALTH EMERGENCY: Subject to all other Terms of this insurance, in the event of a Public Health Emergency of International Concern, Epidemic, Pandemic, other disease outbreak, or Natural Disaster, that may affect an Insured Person’s health, the Company will cover an Illness or Injury incurred during the Period of Coverage and caused by the Public Health Emergency of International Concern, Epidemic, Pandemic, other</p>

Section	Modification
Public Health Emergency continued	<p>disease outbreak, or Natural Disaster when, prior to the issuance of a Travel Warning for the Host Country or a Global Travel Warning:</p> <p>(1) the Effective Date of Coverage has occurred; and</p> <p>(2) the Insured Person has arrived in the Host Country or Affected Area.</p> <p>In the event that the applicable Travel Warning is removed for the Host Country or Affected Area, coverage for an Illness or Injury incurred during the Period of Coverage after the Travel Warning is removed, which was caused by the Public Health Emergency of International Concern, Epidemic, Pandemic, other disease outbreak, or Natural Disaster will be considered by the Company the same as any other Illness or Injury, subject to all other Terms and conditions of this insurance.</p>
Q. Return of Minor Children	Language updates for grammar and consistency
R. Return of Mortal Remains	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added "...authorized representative..." to first sentence • Added to end of paragraph "...; or up to the amount shown in the BENEFIT SUMMARY for preparation, local burial or cremation of the Insured Person’s Mortal Remains at the place of death in accordance with the commonly accepted cultural and religious beliefs practiced by the Insured Person. Coverage is not provided for burial and cremation costs incurred for religious practitioners, flowers, music, food or beverages."
S. Sudden and Unexpected Reoccurrence of Pre-existing Conditions	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added "...known or unknown..." to item (1) • Added to item (2)(c) "...and no new, changed, or modified Treatment program or medication will be recommended in the foreseeable future..."
T. Trip Interruption	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Added to item (2) "...and was not caused by, due to, or a result of negligence or willful misconduct by the Insured Person..." • Changed item (2)(e) (previously item (5)) to "The Insured Person must be traveling outside the United States."
U. Exclusions	<ul style="list-style-type: none"> • Language updates for grammar and consistency

Section	Modification
Exclusions continued	<ul style="list-style-type: none"> • Items re-numbered for consistency across IMG’s product portfolio • Added item (1): ECONOMIC SANCTIONS: The Company will not cover any person as an Insured Person if such cover would result in the Company being exposed to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws, or regulations of the European Union, United Kingdom or the United States of America. • Item (2) added to first paragraph “...death and dismemberment...” • Item (3)(b) and (c) added “...Emergency Travel Advisory...” • Item (8)(b) changed from 90 days to 180 days • Item (8) (d) updated to “not Medically Necessary for the diagnosis, care or Treatment of the physical condition involved. This also applies when and if they are prescribed, recommended or approved by the attending Physician” • Item (8)(g) added for “related to Hospice Care” • Added item (13) for “Charges incurred for testing that attempts to measure aspects of an Insured Person’s mental ability, intelligence, aptitude, personality and stress management. Such testing may include but is not limited to psychometric, behavioral and educational testing” • Deleted from item (14) (previously item (10)) “...Educational or Rehabilitative Care” • Item (15) added for “Charges incurred for Educational or Rehabilitative Care that specifically relates to training or retraining an Insured Person to function in a normal or near-normal manner. Such care may include but is not limited to job or vocational training, counseling, occupational therapy and speech therapy” • Item previously listed as (11)(e) for “any Illness or Injury sustained while taking part in: Amateur Athletics, Professional Athletics and adventure sports and activities, including, without limitation the following (including any combination or derivative of the following): abseiling; mountaineering activities where specialised climbing equipment, ropes or guides are normally or reasonably should have been used; athletic or sporting activities (except for activities that are non-contact, non-professional, and engaged in by You solely

Section	Modification
<p>Exclusions continued</p>	<p>for recreational, entertainment or fitness purposes); aviation (except when travelling solely as a passenger in a commercial aircraft); motocross (MOTO-X); BMX; BASE jumping; bobsledding; bungee jumping; canyoning,, caving; hang gliding; heli-skiing; high diving; hot air ballooning; inline skating; jet skiing; jungle zip lining; kiteboarding; kayaking; luge; mountain biking; parachuting; paragliding; parascending; rappelling; racing of any kind including by horse, motor vehicle (of any type) or motorcycle; rock climbing; any rodeo activity; ski jumping; sky diving; snow skiing except for recreational downhill and/or cross country snowskiing (no cover provided whilst skiing in violation of applicable laws, rules or regulations; away from prepared and marked in-bound territories; and/or against the advice of the local ski school or local authoritative body; snowboarding; snowmobiling; spelunking; surfing; trekking; whitewater rafting; windsurfing; wildlife safaris; and subaqua pursuits involving underwater breathing apparatus below a depth of 10 meters. Practice or training in preparation for any excluded activity which results in Injury will be considered as activity while taking part in such activity and/or” deleted in its entirety and replaced with the following:</p> <p>(22)any Illness or Injury sustained while taking part in, practicing or training for: Amateur Athletics; Professional Athletics; or athletic activities that are sponsored by any Governing Body or Authority, including the National Collegiate Athletic Association, any other collegiate sanctioning or Governing Body or the International Olympic Committee</p> <p>(23)any Illness or Injury sustained while taking part in activities designated as Adventure Sports, which are limited to the following: abseiling; BMX; bobsledding; bungee jumping; canyoning; caving; hot air ballooning; jungle zip lining; parachuting; paragliding; parascending; rappelling;</p>

Section	Modification
<p>Exclusions continued</p>	<p>(22)skydiving; spelunking; wildlife safaris; and windsurfing</p> <p>(23)any Illness or Injury sustained while taking part in activities designated as Extreme Sports, which include but are in no way limited to the following (and include any combination or derivative of the following): BASE jumping; cave diving; cliff diving; downhill mountain biking and racing; extreme skiing; freediving; free flying; free running; free skiing; freestyle scootering; gliding; heli-skiing; ice canoeing; ice climbing; kitesurfing; mixed martial arts; motocross; motorcycle racing; motor rally; mountaineering above elevation of 4500 meters from ground level; parkour; piloting a commercial or non-commercial aircraft; powerbocking; scuba diving or sub aqua pursuits below a depth of 50 meters; snowmobile racing; truck racing; whitewater kayaking or whitewater rafting Class VI and higher difficulty; and wingsuit flying</p> <p>(24)any Illness or Injury sustained while taking part in snow skiing, snowboarding or snowmobiling where the Insured Person is in violation of applicable laws, rules or regulations of a ski resort, out of bounds or in unmarked or unpatrolled areas</p> <p>(25)any Illness or Injury sustained while taking part in backcountry skiing</p> <p>(26)any Illness or Injury sustained while taking part in skiing off-piste</p> <p>(27)any Illness or Injury sustained while taking part in Collision Sports</p> <p>(28)any Illness or Injury sustained while taking part in athletic or recreational activities where the Insured Person is not physically or medically fit or does not hold the necessary qualifications to engage in said activities</p> <ul style="list-style-type: none"> • Item (32) added "...substance, narcotics..." • Item (33) added "...in excess of the applicable blood/alcohol legal limit..." • Item (35) added "...sexually transmitted or..."

Section	Modification
<p>Exclusions continued</p>	<ul style="list-style-type: none"> • Item (36) added “...when not Medically Necessary” • Item (41) added “...non-surgical...” and deleted (moved to ELIGIBLE MEDICAL EXPENSES provision) “...provided, however, that claims for Treatment or supplies for the feet may be eligible for coverage under this insurance at the sole option of the Company and subject to all other Terms of this insurance when related to: <ul style="list-style-type: none"> (a) an Injury to the foot arising from an Accident covered hereunder; and/or (b) an Illness for which foot Surgery is Medically Necessary and determined to be the only appropriate method of Treatment.” • Item (49) added “any Illness or Injury incurred in the Destination Country, Affected Area or Country of Residence as a result of a Public Health Emergency of International Concern, Epidemic, Pandemic, other disease outbreak, or Natural Disaster, that may affect an Insured Person’s health, unless coverage is expressly provided under the PUBLIC HEALTH EMERGENCY provision of this insurance” • Item (52) added “...(TMJ) including but not limited to TMJ syndrome, craniomandibular syndrome, chronic TMJ pain, orthognathic Surgery, Le-Fort Surgery or splints” • Item (56) added for “any infection of the urinary tract (including, without limitation, infection of the kidney, ureter, bladder, prostate or urethra) and any complication, medical condition or other Illness directly or indirectly arising therefrom, that occurs within ninety (90) days of the Effective Date of this Insurance and that requires Treatment of the Insured Person in a Hospital as an Inpatient” • Item (59) added for “Wear and tear of teeth due to cavities and chewing or biting down on hard objects, such as but not limited to pencils, ice cubes, nuts, popcorn, and hard candies” • Item (60) added for “Dental Injury without associated face, skull, neck and/or jaws Injury or that can be evaluated and treated in a dental office” • Item (61) added for “Dental Treatment for services which provide oral care maintenance including tooth repair by fillings, root canals, tooth removal and x-rays” • Item (62) added for “Charges for Treatment of an Illness or Injury for which payment is made or

Section	Modification
<p>Exclusions continued</p>	<p>available through a workers' compensation law or a similar law</p> <ul style="list-style-type: none"> • Item (63) added for “Charges incurred for massage therapy” • Item (65) added for “Accidental Death or Dismemberment when the Insured Person’s death or dismemberment is caused directly or indirectly by, results from, or where there is a contribution from, any of the following: <ul style="list-style-type: none"> (a) bodily or mental infirmity, illness or disease (b) infection, other than infection occurring simultaneously with, and as a direct result of, the accidental injury. • Moved item previously listed as (20) to the ELIGIBLE MEDICAL EXPENSES provision for “Any taxes, involuntary or forced contributions, assessments, charges, fees or surcharges imposed by any governmental agency or authority: <ul style="list-style-type: none"> (a) arising out of or as a result of any Treatment or supplies received by the Insured Person, or (b) based upon the Company’s election hereunder, if any, to pay benefits directly to providers as an accommodation to the Insured Person, or (c) for any other reason; and
<p>V. Definitions</p>	<ul style="list-style-type: none"> • Language updates for grammar and consistency • Definitions added: <ul style="list-style-type: none"> ○ Adventure Sports ○ Affected Area(s) ○ Ancillary Services ○ Authorization for Release of Medical Information ○ Charges ○ Checked Luggage ○ Child; Children ○ Class VI ○ Collision Sports ○ Convalescent ○ Country of Residence ○ Dental Provider; Dentist ○ Destination Country ○ Epidemic

Section	Modification
<p>Definitions continued</p>	<ul style="list-style-type: none"> • Definitions added continued: <ul style="list-style-type: none"> ○ Extreme Sports ○ Facility ○ Global Travel Warning ○ Governing Body or Authority ○ Grandchild; Grandchildren ○ IMG Claim Form ○ Implant ○ Initial Effective Date ○ Interfacility Ambulance Transfer ○ Luggage ○ Natural Disaster ○ Pandemic ○ Proof of Claim ○ Public Health Emergency of International Concern ○ Radiology ○ Reasonable and Customary ○ Spouse ○ Sudden and Unexpected Reoccurrence of Pre-existing Conditions ○ Superbill ○ Traumatic Dental Injury ○ Universal Billing Form ○ Urgent Care Clinic ○ Walk-in Clinic • Definitions revised beyond grammar and consistency: <ul style="list-style-type: none"> ○ Amateur Athletics ○ Company ○ Congenital Disorder ○ Deductible ○ Effective Date; Effective Date of Coverage ○ Emergency ○ Family ○ Hospice Care ○ Inpatient ○ Intensive Care Unit ○ Outpatient

Section	Modification
<p>Definitions continued</p>	<ul style="list-style-type: none"> • Definitions revised beyond grammar and consistency continued: <ul style="list-style-type: none"> ○ Physician ○ Relative ○ Terms ○ Travel Warning; Emergency Travel Advisory ○ Treated; Treatment ○ Usual, Reasonable and Customary ○ Definitions deleted: <ul style="list-style-type: none"> ○ Benefit Period (moved to BENEFIT PERIOD provision) ○ Dependent Child ○ Eligible Medical Expenses ○ Home Country ○ Host Country ○ Other Coverage ○ Schedule of Benefits/Limits