



SEVEN CORNERS
The Right Way to Travel

Explore North AmericaSM

Coverage for 5 Days to 364 days

Travel to the United States, Mexico, Canada, and Certain Caribbean Countries



For more than 25 years, Seven Corners has protected travelers all over the world. We deliver health, safety, and security to you when you are away from home. Take us on your next trip!



Why do I need visitor health insurance?

Your health insurance at home may not cover you when you travel internationally. That means you could be responsible for the bill if you get sick or hurt on your trip. Also, medical providers in some foreign countries may require you to pay money upfront before they will treat you.

No matter where you go, Explore North America follows you with comprehensive medical coverage, an extensive network of providers, and 24-hour travel assistance. Make sure you receive the same level of care abroad that you receive at home, and let us take the worry out of your travel!

WHO CAN BUY AN EXPLORE NORTH AMERICA PLAN?

If you are a non-U.S. resident and non-U.S. citizen, you may buy coverage for yourself, your spouse, your children, and your traveling companions (including children).

WHERE CAN I TRAVEL?

You must travel outside of your home country, which is the country where you have your permanent residence. Also, your trip destination must include the United States, Canada, Mexico, or unrestricted Caribbean countries.*

United States citizens, including those with dual citizenship that includes the United States, cannot buy an Explore North America plan.

**The unrestricted Caribbean countries include: Anguilla, Antigua and Barbuda, Aruba, Bahamas, Barbados, Belize, British Virgin Islands, Caribbean Netherlands, Cayman Islands, Curaçao, Dominica, Dominican Republic, Grenada, Guadeloupe, Guyana, Haiti, Jamaica, Martinique, Montserrat, Saint Barthélemy, Saint Kitts and Nevis, Saint Lucia, Saint Martin, Saint Vincent and the Grenadines, Sint Maarten, Suriname, Trinidad and Tobago, Turks and Caicos.*

Coverholder at **LLOYD'S**

Underwriter

You can feel confident with Explore North America's strong financial backing through Certain Underwriters at Lloyd's, London¹ an established organization with an AM Best rating of A (Excellent). Your coverage will be there when you need it.



Administrator

Seven Corners will handle your insurance needs from start to finish. We will process your purchase, provide all documents, and handle any claims. In addition, our own 24/7 in-house travel assistance team, Seven Corners Assist, will handle your emergency or travel needs.

¹In specific scenarios, coverage is provided by Tramont Insurance Company Limited. For details regarding Tramont, visit tramontinsurance.com.

Length of Coverage

Coverage Length — This may vary from 5 days to 364 days.

Effective Date — This is the start date of your plan, on the later of the following: 1) 12 a.m. the day after we receive your application and correct payment if you buy online or by fax; 2) 12 a.m. the day after the postmark date of your application and correct payment if you buy by mail; 3) The moment you depart your home country; 4) 12 a.m. on the date you request on your application.

Expiration Date — This is the date coverage ends, which is the earliest of the following: 1) The moment you return to your home country (except for coverage for Incidental Trips to Home Country); 2) 11:59 p.m. on the date of attainment of the maximum period of coverage; 3) 11:59 p.m. on the date shown on your ID card; 4) 11:59 p.m. on the date that is the end of the period for which you paid; or 5) The moment you fail to be eligible. *All times above refer to United States Eastern Time.*

EXTENDING YOUR COVERAGE

You may extend your coverage by a minimum of 5 days and up to 364 days. You may not exceed 364 total days of coverage.

When you extend coverage, your original effective date will continue to be used to determine if maximum coverage amounts have been reached and to determine pre-existing conditions. Your medical maximum does not begin again when you extend coverage.

We will email you an extension (renewal) notice before your coverage ends, giving you the option to extend your plan.

Refund of Premium/Cancellation

We will refund your payment if we receive your written request for a refund before your effective date of coverage. If your request is received after your effective date, the unused portion of the plan cost may be refunded minus a \$25 cancellation fee, if you have not submitted any claims to Seven Corners.

Filing a Claim

If you paid the medical provider for treatment you received, send your itemized bill and proof of payment to Seven Corners within 90 days of service, along with a completed claim form.

If you were treated by a medical provider in the plan's network, submit a completed claim form within 90 days of service. Your medical provider will send the bill directly to Seven Corners.

You are responsible for your deductible and coinsurance and any non-eligible expenses. Visit sevendcorners.com/claims to find appropriate claims forms online.

Geographic Restrictions

State Restrictions — We cannot accept an address in Maryland, Washington, New York, South Dakota, and Colorado.

Country Restrictions — We cannot accept an address in Cuba, Islamic Republic of Iran, Syrian Arab Republic, United States Virgin Islands, Gambia, Ghana, Nigeria, and Sierra Leone.

Destination Restrictions — This plan covers travel to the United States, Mexico, Canada, and unrestricted Caribbean countries.

Unrestricted Caribbean countries include: Anguilla, Antigua and Barbuda, Aruba, Bahamas, Barbados, Belize, British Virgin Islands, Caribbean Netherlands, Cayman Islands, Curaçao, Dominica, Dominican Republic, Grenada, Guadeloupe, Guyana, Haiti, Jamaica, Martinique, Montserrat, Saint Barthélemy, Saint Kitts and Nevis, Saint Lucia, Saint Martin, Saint Vincent and the Grenadines, Sint Maarten, Suriname, Trinidad and Tobago, Turks and Caicos. The plan does not cover trips to Cuba.



SEVEN CORNERS ASSIST

What happens if you are sick in an area without appropriate medical care?

If medically necessary, we will arrange and pay to evacuate you to the nearest appropriate medical facility.

24/7 Travel Assistance — We can provide local weather details, currency rates, embassy contact information, interpreter referrals, help with lost passport recovery, and pre-trip information including inoculation and visa requirements.

24/7 Medical Assistance — We can help you locate appropriate medical care and arrange second opinions, emergency medical evacuations, medical transportation home after treatment, escorts and transportation for unaccompanied children, and medical record transfers.

Contact information for Seven Corners Customer Service is provided on your ID card.

CUSTOMER SERVICE

Claim and benefit questions

Mon - Fri, 8 a.m. – 8 p.m. ET

TOLL FREE
1-800-335-0477

WORLDWIDE
317-575-2656

COLLECT CALLS
317-818-2809

customerservice@sevendcorners.com



Pre-Certification Requirements

The following expenses must always be pre-certified in the United States:

1. Outpatient surgeries or procedures;
2. Inpatient surgeries, procedures, or stays including those for rehabilitation;
3. Diagnostic procedures including MRI, MRA, CT, and PET Scans;
4. Chemotherapy;
5. Radiation therapy;
6. Physical and occupational therapies;
7. Home infusion therapy; or
8. Home Health Care.

To obtain pre-certification, you must:

1. Contact Seven Corners Assist before the expense is incurred; and
2. Comply with Seven Corners Assist's instructions and submit any information or documents required; and
3. Notify all medical providers of the pre-certification requirements and ask them to cooperate with Seven Corners Assist.

Once we pre-certify your expenses, we will review them to determine if they are covered by the plan.

If you do not comply with the pre-certification requirements or if the expenses are not pre-certified, we will review the expenses to determine if they are covered by the plan. If covered:

1. Covered expenses will be reduced by 25%; and
2. The deductible will be subtracted from the remaining 75%; and
3. Coinsurance will be applied.

Pre-certification does not guarantee coverage, payment, or reimbursement.

WellCard™ Discounts & Services

Lower your cost for these products and services and receive cash rewards:

- Prescription drugs — save up to 50%
- Dental services — save up to 45%
- Vision services — save up to 50%
- Hearing aids
- Diabetic care & supplies
- Mail order vitamins
- Daily living products — discounted rates for medical supplies and equipment

Share your free card with friends and family and use it even after your coverage ends. Visit sevendcorners.com/well-card to learn more, locate participating providers and determine the available discounts. Information about WellCard will be included with your purchase documents.

This card is not insurance and does not replace our existing networks.

Finding Medical Providers

Network providers can be located at: sevendcorners.com/help/find-a-doctor or by contacting Seven Corners Assist.

Inside the United States — We offer an extensive network of providers with special network pricing and potential savings for you.

Outside of the United States — Seven Corners has a large international network of providers, and many of them have agreed to bill us direct for treatment they provide. We recommend you contact us for a referral, but you may seek treatment at any facility.

Utilizing the network does not guarantee benefits or that the treating facility will bill Seven Corners direct. We do not guarantee payment to a facility or individual until we determine the expense is covered by the plan.

Important Information Regarding Your Coverage

Please be aware this coverage is not a general health insurance plan but an interim, limited benefit period, travel medical program intended for use while away from your home country or country of residence.

This brochure is a brief summary of benefits and services. It is not your plan document. If there is any difference between this brochure and your plan document, the provisions of the plan document will prevail. Benefits and premiums are subject to change.

It is your responsibility to maintain all records regarding travel history and age and provide necessary documents to Seven Corners to verify your eligibility for coverage.

PPACA Disclaimer

Patient Protection and Affordable Care Act: THIS IS NOT QUALIFYING HEALTH COVERAGE ("MINIMUM ESSENTIAL COVERAGE") THAT SATISFIES THE HEALTH CARE COVERAGE REQUIREMENT OF THE AFFORDABLE CARE ACT. IF YOU DON'T HAVE MINIMUM ESSENTIAL COVERAGE, YOU MAY OWE AN ADDITIONAL PAYMENT WITH YOUR TAXES.

Excess Coverage

All coverages except Accidental Death & Dismemberment are in excess of other insurance or similar benefit programs and apply only when such benefits are exhausted. This plan is secondary coverage to other insurance. Such other insurance or similar benefit programs may include, but are not limited to, membership benefits; workers' compensation benefits/programs; government programs; group or blanket coverage; prepayment coverage; union, labor, or employee plans; socialized insurance programs or program otherwise required by law or statute; automobile insurance; or third-party liability insurance.

Schedule of Benefits

All coverages and plan costs are shown in United States dollar amounts and are per person and period of coverage unless otherwise noted.

		Explore North America Health Insurance for Visitors
PLAN OPTIONS		
Benefit Period		180 days (6 months)
Coverage Length		5 days to 364 days
Extend Coverage		Extendable for a total of up to 364 days
Covered Countries		U.S., Canada, Mexico, and Unrestricted Caribbean Countries
Medical Maximum Options	AGES 14 days to 69 years old: 70 to 79 years old: 80+ years old: <i>(per period of coverage)</i>	BENEFIT MAXIMUMS \$50,000, \$100,000, \$500,000, \$1,000,000 \$50,000, \$100,000 \$15,000
Deductible Options (You pay)		\$0, \$100, \$250, \$500, \$1,000 <i>(per period of coverage)</i>
Urgent Care Copay (You pay)		\$20 copay per visit, not subject to deductible
Coinsurance Options (The plan pays)		We pay 100% of covered expenses up to the medical maximum, after deductible or copay
MEDICAL		
Hospital Room & Board, Inpatient Hospital Services, Outpatient Hospital / Clinical Services, Emergency Room Services, Doctor's Office Visits, Initial Orthopedic Prosthesis/Brace, Doctor's Office Visits, Initial Orthopedic Prosthesis/Brace, Chemotherapy and/or Radiation Therapy, Nursing Services, Prescription Drugs, Home Healthcare, Extended Care Facility, Local Ambulance Benefit		URC up to medical maximum
Physio/Physical Therapy		INPATIENT: URC up to medical maximum OUTPATIENT: \$50 maximum per day, if referred by a physician
Hospital Indemnity (Canada, Mexico, & Unrestricted Caribbean Countries)		\$150/night (30 days maximum)
Coma Benefit		\$25,000 (separate from the medical maximum)
Pre-certification – 25% penalty		Required inside the United States. Penalty does not apply to an emergency, see section 3.7 in the plan document.
Incidental Trips to Home Country		Up to \$10,000 (available for purchases of 30 days or more)
Acute Onset of a Pre-existing Condition(s): Non-United States Residents traveling to U.S., Canada, Mexico, and Unrestricted Caribbean Countries	AGES 14 days to 69 years old: 70 & over:	AMOUNT \$50,000 \$5,000
DENTAL		
Dental - Sudden Relief of Pain		Up to \$200
Dental - Accident		Up to \$5,000
EMERGENCY SERVICES AND ASSISTANCE		
Emergency Medical Evacuation & Repatriation		Up to \$500,000 (separate from the medical maximum) Services must be coordinated by Seven Corners Assist.
Emergency Medical Reunion		Up to \$200 per day, 10-day limit / \$50,000 maximum limit Services must be coordinated by Seven Corners Assist.
Return of Child(ren)		Up to \$50,000 — Services must be coordinated by Seven Corners Assist.
Return of Mortal Remains		Up to \$50,000 — Services must be coordinated by Seven Corners Assist.
Local Burial / Cremation		Up to \$5,000 — Services must be coordinated by Seven Corners Assist.
Natural Disaster Evacuation and Repatriation		Up to \$50,000 — Services must be coordinated by Seven Corners Assist.
Natural Disaster Daily Benefit		Up to \$150 per day, 5-day limit
Political Evacuation & Repatriation		Up to \$10,000 — Services must be coordinated by Seven Corners Assist.

(Schedule continues on next page.)

Schedule of Benefits *(continued)*

All coverages and plan costs are shown in United States dollar amounts and are per person and period of coverage unless otherwise noted.

Explore North America		
Health Insurance for Visitors		
EMERGENCY SERVICES AND ASSISTANCE (CONTINUED)		
Felonious Assault	Up to \$10,000 (separate from the medical maximum)	
Terrorism	Up to \$50,000	
24/7 Travel Assistance Services	Included	
AD&D		
Accidental Death and Dismemberment (AD&D)	WHO Primary Insured or Eligible Spouse	PRINCIPAL SUM \$25,000
	Eligible Dependent Child(ren)	\$5,000
<i>(aggregate limit of \$250,000 for total number of insureds on the plan)</i>		
Common Carrier Accidental Death	WHO Primary Insured or Eligible Spouse	PRINCIPAL SUM \$50,000
	Eligible Dependent Child(ren)	\$10,000
<i>(aggregate limit of \$250,000 for total number of insureds on the plan)</i>		
LUGGAGE, TRIP INTERRUPTION, DOCUMENTS, & PERSONAL LIABILITY		
Loss of Checked Baggage	Up to \$50 per article \$500 per occurrence maximum	
Trip Interruption	Up to \$5,000	
Lost or Stolen Travel Documents	Up to \$100, not subject to the deductible	
Personal Liability	Up to \$50,000	
OPTIONAL COVERAGE		
Hazardous Activities	Up to medical maximum	

Benefit Highlights

Each benefit amount is covered up to the limit shown in the Schedule of Benefits.

Benefit Period – You have 180 days from the date of your injury or illness to receive treatment. If your coverage ends during your benefit period, you can still receive treatment if you are outside your home country.

Medical Coverage – We cover injuries and illnesses that occur during your period of coverage. Benefits are paid in excess of your deductible and coinsurance up to your medical maximum. You must receive initial treatment for an injury or illness within 30 days of the date of injury or onset of illness.

Hospital Daily Indemnity – We will pay you for each night you are hospitalized up to 30 days. The benefit applies while you are traveling outside of the United States to Canada, Mexico, or the unrestricted Caribbean countries. The benefit is in addition to other covered expenses, and you may use the incidental funds as you wish.

Incidental Trips to Home Country – Covers a new illness/injury that begins on an incidental trip home. Pre-existing conditions are not covered. You receive 5 days of coverage for each month of coverage you purchased, to a maximum of 60 days for each 364-day period. Unused days do not carry over from one 364-day coverage period to the next.

Coma Benefit – Pays benefits if you become comatose due to an accident.

Emergency Medical Evacuation and Repatriation – If medically necessary, we will:

1. Transport you to the nearest adequate medical facilities.
2. Transport you to your home country for treatment or to recover after an emergency medical evacuation.

Emergency Medical Reunion – We will send one person of your choice to the hospital where you are located when an emergency medical evacuation is occurring or has occurred or when an emergency medical repatriation is to occur.

Return of Child(ren) – If you are traveling alone with children and are hospitalized because of a covered illness/injury, we will arrange and pay for: 1) One-way economy airfare to return the children to their home country and 2) Attendant/escort services to ensure the children's safety.

Return of Mortal Remains – We will pay and arrange to return your remains to your home country if you die while outside your home country. This benefit applies regardless of whether your death is related to a pre-existing condition. If this benefit is utilized, the Local Burial/Cremation benefit will not apply.

Local Burial or Cremation – We will pay and arrange for either your local burial or cremation if you die outside your home country. This benefit applies regardless of whether your death is related to a pre-existing condition. If this benefit is utilized, the Return of Mortal Remains benefit will not apply.

(Highlights continue on next page.)

Benefit Highlights *(continued)*

Natural Disaster Evacuation and Repatriation – If you need an emergency evacuation due to a natural disaster as defined in the plan, we will arrange and pay for evacuation from a safe departure point in your host country to the nearest safe location and/or to your home country. Seven Corners' security personnel will determine the need for the evacuation in consultation with local governments and security analysts. (This benefit does not apply while you are in the United States.)

We will pay reasonable and necessary expenses incurred for: 1) Your natural disaster evacuation; (2) Reasonable lodging up to 10 days if you are delayed at the safe location; (3) Your repatriation (one-way economy airfare).

Natural Disaster Daily Benefit – We will pay for replacement accommodations needed because of a natural disaster. You must provide proof of payment for the accommodations from which you were displaced.

Political Evacuation and Repatriation – If a formal recommendation is made from appropriate authorities for you to leave your host country or you are expelled or declared persona nongrata by the host country, we will arrange and pay one-way economy airfare to transport you to a place of safety or your home country. Political evacuation must occur within 10 days of the events that cause the need for the benefit.

Benefits are not covered if you do not heed a Level 3 Terrorism, Level 3 Civil Unrest, or any Level 4 Travel Advisory from the U.S. Department of State or similar warnings from your host country's or home country's appropriate authorities recommending travelers avoid countries, regions, or specific areas or locations within a country.

Felonious Assault – Pays benefits if you are injured as the result of a felonious assault while traveling.

Terrorism – The plan pays for covered expenses if you are injured as a result of terrorist activity if:

1. You have no direct or indirect involvement in the terrorist activity.
2. The terrorist activity is not in a country or location where the U.S. government has issued a Level 3 Terrorism, Level 3 Civil Unrest, or any Level 4 Travel Advisory or where the appropriate authorities of your host country or your home country have issued similar warnings 6 months before your arrival.
3. You departed the location after the date a warning to leave was issued by the U.S. government or the appropriate authorities of your host country or home country.

Accidental Death & Dismemberment (AD&D) – Pays benefits for death or loss of limbs due to an accident occurring on your trip. Death benefits will not be paid under this benefit if paid under Common Carrier AD&D.

Common Carrier AD&D – Pays benefits for death that occurs while riding as a passenger on a public air conveyance that transports passengers for hire.

Loss of Checked Baggage – Reimburses you for lost bags and personal items owned by you and checked with a common carrier, if you took reasonable measures to protect, save, and recover the property.

Trip Interruption – We will reimburse you for the cost of economy travel to your home if you cannot continue your trip due to the death of an immediate family member (parent, spouse, sibling or child) or due to serious damage to your principal residence from fire, flood, or similar natural disaster (tornado, earthquake, hurricane, etc.).

Personal Liability – We will pay for eligible court-entered judgments or settlements approved by us that are related to the personal liability you incur for acts, omissions, and other occurrences for losses or damages caused by your negligent acts or omissions that result in: 1) injury to a third person; 2) damage or loss to a third person's personal property; 3) damage or loss to a relative's personal property. *Review the plan document for conditions, restrictions, and exclusions for this benefit.*

Optional Coverage – Hazardous Activities

We cover typical vacation activities. If you plan to participate in more adventurous activities when you travel, consider buying this optional coverage.

It covers: bungee jumping; caving; hang gliding; jet skiing; motorcycle or motor scooter riding whether as a passenger or a driver; parachuting; parasailing; scuba diving only to a depth of 10 meters with a breathing apparatus provided that you are SSI, PADI or NAUI certified; snowmobiling; spelunking; wakeboard riding; water skiing; windsurfing; or zip lining. **You must purchase this optional coverage if you wish to be covered while riding a motorcycle, motor scooter, or similar transportation when such transportation is an established and accepted routine means of public transportation for hire in the specific geographic area where you are located in the host country.**

Pre-existing Conditions

What is a pre-existing condition?

It is any medical condition, sickness, injury, illness, disease, mental illness or mental or nervous disorder, including congenital, chronic, subsequent, or recurring complications or related consequences or resulting consequences that existed with reasonable medical certainty when you bought the plan or any time in the 36 months before your coverage on this plan began, whether or not previously manifested, symptomatic, known, diagnosed, treated, or disclosed.

This includes, but is not limited to, any medical condition, sickness, injury, illness, disease, mental illness, or mental or nervous disorder for which medical advice, diagnosis, care, or treatment was recommended or received or for which a reasonably prudent person would have sought treatment during the 36 months immediately preceding the start date of this plan.

Acute Onset of a Pre-existing Condition

Pre-existing conditions are often not covered by travel insurance. We provide coverage for them through the Acute Onset of a Pre-existing Condition benefit.

What is an Acute Onset of a Pre-existing Condition?

It is a sudden and unexpected outbreak or recurrence of a pre-existing condition that occurs spontaneously and without advance warning in the form of physician recommendations or symptoms and requires urgent care.

To be covered by this benefit, the following are required:

- (1) The acute onset must occur after the plan's effective date.
- (2) Covered expenses must be incurred in the U.S., Mexico, Canada, and the unrestricted Caribbean countries.

There is no coverage for known, scheduled, required, or expected medical care, drugs, or treatments existent or necessary before your arrival in the U.S., Mexico, Canada, and the unrestricted Caribbean countries and before your plan begins.

There is no coverage for treatment for which you have traveled or conditions for which travel was undertaken after your physician limited or restricted travel.

There is no coverage for an acute onset that occurs during an incidental trip to your home country.

Coverage begins 168 hours (7 days) after your plan begins and ends on the earlier of: (1) the condition no longer being considered acute or (2) Your discharge from the hospital.

See the Schedule of Benefits for additional details.

Exclusions

The exclusions below apply to these benefits: Medical Covered Expenses, Local Ambulance, Hospital Daily Indemnity, Coma, Incidental Trips to Home Country, Acute Onset of Pre-Existing Condition(s), Dental Emergency – Sudden Relief of Pain, Dental Emergency – Accident Coverage, Accidental Death & Dismemberment, Common Carrier Accidental Death and Dismemberment, Trip Interruption, Optional Coverage — Hazardous Activities Coverage.

These exclusions exclude expenses that are for, resulting from, related to, or incurred for the following:

- Pre-Existing Condition(s) except as waived under Sections 3.9 (Acute Onset of Pre-existing Condition(s)) of the plan document;
- Claims not received by the Company or Administrator within ninety (90) days of the date of service;
- Treatment that (i) exceeds Usual, Reasonable, and Customary Expenses; (ii) is Investigational, Experimental, or for research purposes; or (iii) received in a Hospital emergency room visit that is not a Medical Emergency;
- Treatment, services, or supplies that are not administered by or under the supervision of a Physician or Surgeon and products that can be purchased without a Physician's or Surgeon's prescription;
- Routine physicals, inoculations, or other examinations or tests conducted when there is no objective indications or impairments in normal health;
- Chiropractic care or acupuncture;
- Services, supplies, medications, testing, or Treatment prescribed, performed, or provided by a Relative or Immediate Family Member;
- Durable medical equipment;
- False teeth, dentures, dental appliances, dental expenses, normal ear or hearing tests, hearing aids, hearing implants, eye refractions, eye examinations for prescribing corrective lenses or eye-glasses unless caused by Accidental Injury, eyeglasses, contact lenses, or eye surgery when the primary purpose is to correct nearsightedness, farsightedness, or astigmatism;
- Replacement of artificial limbs, eyes, larynx, and orthotic appliances;
- Custodial Care, Educational or Rehabilitative Care, or any Treatment in any establishment for the care of the aged;
- Vocational, occupational, sleep, speech, recreational, or music therapy;
- Pregnancy, illness or complications from Pregnancy, childbirth, abortion, miscarriage including that resulting from an Accident, postnatal care, preventing conception or childbirth, artificial insemination, infertility, impotency, sexual dysfunction, or sterilization or reversal thereof;
- Sleep apnea or other sleep disorders;
- Mental and Nervous Disorder, Rest Cures, learning disabilities, attitudinal disorders, or disciplinary problems;
- Congenital abnormalities and conditions arising out of or resulting therefrom;
- Temporomandibular joint;
- Occupational Diseases;
- Exposure to non-medical nuclear radiation or radioactive materials;
- Sexually-transmitted diseases, venereal diseases, and conditions and any consequences thereof;
- Acquired Immune Deficiency Syndrome (AIDS), AIDS-Related Complex (ARC), or the Human Immunodeficiency Virus (HIV);
- Human organ or tissue transplants;
- Exercise programs whether prescribed or recommended by a Physician or therapist;
- Weight reduction programs or the surgical Treatment of obesity including, but not limited to, wiring of the teeth and all forms of intestinal bypass Surgery;
- Cosmetic or plastic Surgery including deviated nasal septum; modifications of Your physical body intended to improve Your psychological, mental, or emotional well-being including, but not limited to, sex-change Surgery;
- Acne, moles, skin tags, disease of sebaceous glands, seborrhea, sebaceous cyst, unspecified disease of the sebaceous glands, hypertrophic and atrophic conditions of skin, nevus;
- Hazardous Activities unless You purchase optional hazardous activities coverage and then only for the activities covered under that option under Section 7 (Optional Coverage — Hazardous Activities) of the plan document;
- Injuries sustained while participating in professional Athletics, amateur Athletics, or interscholastic Athletics including, but not limited to, events, games, matches, practice, training camps, sport camps, conditioning, and any other activity related thereto but excluding non-competitive, recreational, or intramural activities;
- Abuse, misuse, illegal use, overuse, dependency upon, or being under the influence of alcohol, drugs, chemicals, or narcotic agents unless administered under the advice of a Physician and taken in accordance with the proper dosing as directed by the Physician;
- Suicide or any attempt thereof; self-destruction or any attempt thereof; or any intentionally self-inflicted Injury or Illness;
- Terrorist Activity except as provided under Section 5.10 (Terrorist Activity) of the plan document War, Hostilities, or War-Like Operations;
- Commission of a criminal offense or any other criminal or illegal activity as defined by the local governing body;
- You unreasonably fail or refuse to depart a country or location following the date a warning to leave that country or location is issued by the United States government or similar warnings issued by other appropriate authorities of either Your Host Country or Your Home Country;
- Service in the military, naval, coast guard, or air service of any country or while on duty as a member of a police force or unit;
- Treatment paid for or furnished under any other individual, government, or group policy or Expenses incurred at no cost to You;
- Conditions for which travel was undertaken to seek Treatment after Your Physician has limited or restricted travel;
- Travel accommodations;
- Injury sustained while You are riding as a pilot, student pilot, operator, or crew member, in or on, boarding or alighting, from any type of aircraft;
- Injury sustained while You are riding as a passenger in any aircraft (i) not having a current and valid Airworthy Certificate and (i) not piloted by a person who holds a valid and current certificate of competency for piloting such aircraft;
- Flying in any aircraft being used for acrobatic or stunt flying, racing, endurance tests, rocket-propelled aircraft, crop dusting or seeding or spraying, firefighting, exploration, pipe or power line inspection, any form of hunting or herding, aerial photography, banner towing, or any experimental purpose; and
- Participating in contests of speed or riding or driving in any type of competition;
- Loss of life;
- Long-term disability; or
- Financial guarantee, financial default, bankruptcy, or insolvency risks.



Explore North America

Coverage Outside Your Home Country from 5 Days to 364 days

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www.sevencorners.com

v.09.19.2019