

## Table of benefits

| BENEFITS (USD) |   | Essential          |
|----------------|---|--------------------|
| 1.             | <b>I. Emergency Evacuation and Repatriation</b>   | <b>Unlimited</b>   |
| 2.             | Emergency Evacuation: Emergency Evacuation to the nearest facility capable of providing adequate Medical Care   | Unlimited          |
| 3.             | Repatriation: Repatriation to the country of origin when the Company and attending physician determine that it is necessary   | Unlimited          |
| 4.             | <b>II. EMERGENCY MEDICAL EXPENSES (Pre-approval required for all inpatient treatments) : Covers the cost of medical treatment arising from sudden and unforeseen illness or accident injury for both Inpatient and Outpatient.</b>  | <b>USD 200,000</b> |
| 5.             | Medical Expenses: Fees for hospitalization, surgery, ambulance, medicine and tests with a maximum of 261 USD per day for hospital room and board  | Up to Limit        |
| 6.             | Follow-up Care: Medical expenses reasonably incurred immediately following discharge from hospital within 90 days of return to home country   | Not covered        |
| 7.             | Hospital Cash Allowance: 40 USD for each complete day the Insured Person is hospitalized over 24 hours as a result of a covered disability  | Not covered        |
| 8.             | Additional Costs of Travel & Accommodation: Additional travelling costs of the Insured Person for returning to the country of origin and additional costs of accommodation incurred by the Insured Person or an insured immediate family member or traveling companion when such costs arise from hospitalization due to a covered disability necessitating medical treatment of the Insured Person | Not covered        |
| 9.             | Family Member Visit: Travelling costs for 1 immediate family member to join the Insured Person who is confined in hospital for more than 5 days or is dead abroad   | Not covered        |
| 10.            | Return of Children: Reasonable additional accommodation and travelling expenses for unattended insured children (age below 16) return to the country of origin  | Not covered        |
| 11.            | Mortal Remains: Transportation charges for repatriation of the mortal remains to the country of origin  | USD 2,000          |
| 12.            | <b>III. PERSONAL ACCIDENT: Accidental death or permanent disability including loss of one or more limbs or loss of sight in one or both eyes. The limit of cover for children under 18 is 2,000 USD</b>   | <b>USD 2,000</b>   |
| 13.            | <b>IV. TRAVEL BENEFITS: Covers incidents during the trip</b>  |                    |
| 14.            | Baggage and Personal Effects: Loss or damage directly resulting from accident, theft, burglary, robbery or mishandling by carriers to the Insured Person's baggage or personal items carried. The limit is 217 USD per item and 435 USD per pair or set. Loss of laptop is limited to 435 USD   | Not covered        |
| 15.            | Baggage Delay: Emergency purchases of essential items of toiletries and clothing up to a maximum of 57 USD per article when the checked baggage is delayed for at least 6 hours from the time of arrival in the eligible countries within the zone of coverage  | Not covered        |

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| 16. | Loss of Travel Document: Cost of obtaining replacements of passport, air tickets; travel expenses and accommodation incurred to obtain such replacement arising from theft, burglary, robbery and accidental loss. Maximum limit per day for travel and accommodation expenses is USD130 for plan Adventurer and USD174 for plan Pioneer   | Not covered |
| 17. | Personal Money: Loss of cash, bank notes and travelers checks arising from theft, burglary or robbery  | Not covered |
| 18. | Travel Delay Cash Allowance: If the Insured Person need not pay additional travelling cost in the event of travel delay, the Insured Person will be indemnified at 22 USD for each full 6 hours delay.   | Not covered |
| 19. | Curtailment of Trip or Cancellation Charges: Reimbursement of irrecoverable prepaid travel arrangement deposits or any increased cost of travel in the event of death, serious injury or illness of the Insured Person, immediate family members, close business partner or travel companion of the Insured Person; witness summons, jury service, natural disasters at the planned destination or complete destruction of the Insured Person's principal residence. | Not covered |
| 20. | Personal Liability: Indemnity against legal liability to a third party as a result of accidental injury or loss or damage to property during the Period of Insurance. (This benefit does not apply to the use or hire of motorized vehicles)   | Not covered |
| 21. | Rental Car Excess Cover: Reimbursement of excess which the Insured Person is liable to pay for accidental loss or damage to a rental car.  | Not covered |

Benefits shown in USD for informative purpose only. Actual amounts are in VND (USD/VND = 25,500).

## Important Notices

- The policy must be bought before your trip starts. Events that were anticipated at the point of purchase will not be covered. The earliest policy start date shall be the purchase date, not before.
- The maximum period of insurance for this Policy shall be 180 consecutive calendar days. In case the Insured would like to purchase another policy after first policy expires, there shall be no gap in coverage and total duration of coverage of all policies combined shall not exceed 180 days. Coverage automatically expires after 180 consecutive days. Policy holders reaching 76 years old during the policy are not eligible to purchase a new policy. Any event or condition that occurred before the new policy start date is considered pre-existing and the Insured is not able to claim for any of these conditions under the new policy. Should the Insured be actively treated or under the supervision of a Physician or Surgeon, the Insured is not eligible to purchase another policy.
- Policy holders shall submit claims within 6 months after occurred date of the claims.
- This policy does not cover preexisting conditions, general exclusions nor medical expenses exclusions as stated in the Policy Wording.
- This policy covers multiple trips within countries included in the zone of coverage during the effective period of coverage.
- This policy is only valid for leisure travel or business travel (limited to administrative and non-manual works only) and NOT cover for travel to any of the countries within the zone of coverage to seek for medical treatment.
- This policy does not cover for any claim costs occurred in the country of residence/origin of the insurer if the country is part of the zone of coverage of this policy.
- This Policy is non-cancelable by the Company or by the Policyholder unless the cancellation request following a reasonable reason is made prior the start date of the policy and except in the circumstances of non-receipt of premium by the Company and no refund of premium will be made once this Policy has been issued.
- Trekking at an altitude limit greater than 5,000 meters above sea level or scuba diving. Any trekking or mountain climbing activities in Nepal.
- This policy does not cover any claims arising from services provided by the following healthcare providers:
  - KUTA Emergency Clinic, Lombok, Indonesia

## Notable Exclusions (Full list in Policy Wording)

- Pre-existing Illness or Injury, congenital conditions or birth defects.
- The following Disabilities whether occurring prior to or during the Period of Insurance (either diagnosed or undiagnosed): hemorrhoids, hernia, diseased tonsils requiring surgery, pathological abnormalities of nasal septum or turbinate, hyperthyroidism, cataracts, sinus conditions requiring surgery, endometriosis, tuberculosis, anal fistulae, cholecystitis, calculi of all kinds, urethra or bladder abnormalities or disease, gastric or duodenal ulcer, hallux valgus, all forms of tumors or cancer, malignancies, disorders of blood or bone marrow, diabetes mellitus and HIV (human immunodeficiency virus) and HIV related illness including AIDS (Acquired Immunity Deficiency Syndrome) and AIDS related conditions, prostate conditions, thyroid conditions, hydrocele, cardiovascular conditions, sexually transmitted diseases, metabolic disorders, gout, osteoporosis, hypertension, Gynecological conditions, treatment and diagnostics for preventive purposes such as routine medical checkups and vaccinations and the alike, home-visit treatments, conditions related to existing prosthesis or implants.
- For a complete list of exclusions, please refer to the policy wording.