

FAQs for University of South Florida Travelers

How long am I covered?

A: The plan covers you for the period of international travel required by your academic plans and for which you are enrolled.

What are my coverage start and end dates?

A: This coverage will start at the actual start of the covered trip. It does not matter whether the trip starts at the Covered Person's: home; place of work; or other place. It will end on the first of the following dates to occur:

1. the date a Covered Person returns to his or her home;
2. the date a Covered Person returns to his or her place of work.

Please check your ID card to ensure your coverage dates match you the travel dates of your program. If you would like to extend your trip for personal reasons, you may do so by calling our enrollment center at 1.800.732.5309.

What if I lose my ID card?

A: Please call the enrollment center at 1.800.732.5309 to request a copy of your ID card. If you have an emergency, please proceed to the nearest facility for treatment and call the UHCG Emergency Response Center. A copy of your ID card is on file internally and can be accessed by the Emergency Response Center.

What is covered by the plan?

A: 100% of reasonable expenses for medically necessary physician office visits, inpatient hospital services, physician and hospital outpatient services, and emergency hospital services up to a \$250,000 maximum for outbound U.S. participants. Additional benefits for medically necessary services are also payable at 100% of reasonable expenses, subject to certain limitations or maximums (see the coverage overview grid below).

COVERAGE OVERVIEW

COVERAGE	LIMITS – ELIGIBLE PARTICIPANT
Medical Benefits	
Period of Coverage Maximum Benefits	\$250,000 for Outbound U.S. Participants
Deductible	\$0 for Outbound U.S. Participants
Physician Office Visits	100% of Reasonable Expenses
Inpatient Hospital Services	100% of Reasonable Expenses
Hospital and Physician Outpatient Services	100% of Reasonable Expenses
Emergency Hospital Services	100% of Reasonable Expenses
Medical Benefit Limitations	
Emergency medical treatment of pregnancy or Therapeutic termination of pregnancy	Reasonable Expenses up to Covered Limit.
Inpatient treatment of mental and nervous disorders including drug or alcohol abuse	Reasonable Expenses up to Covered Limit.
Outpatient treatment of mental and nervous disorders including drug or alcohol abuse	Reasonable Expenses up to Covered Limit.
Chiropractic Care	Reasonable Expenses up \$1,000 Maximum.
Routine nursery care of a newborn child	Reasonable Expenses up to Covered Limit.

COVERAGE	LIMITS – ELIGIBLE PARTICIPANT
Repairs to sound, natural teeth required due to an Injury	100% of Reasonable Expenses; \$100 per tooth up to \$500 Maximum
Outpatient prescription drugs	100% of actual charge
OTHER COVERAGES	
Accidental Death & Dismemberment	Maximum Benefit: Principal Sum up to \$25,000 for Eligible Participant
Repatriation of Remains	100% coverage under separate plan with UHCG
Medical Evacuation	100% coverage under separate plan with UHCG
Bedside Visit	Covered under separate plan with UHCG
OTHER INCLUDED SERVICES	
Emergency Response Center	Emergency Medical and Travel Assistance services provided, including coordination of all evacuations and repatriations if needed

Covered Medical Expenses

1. Hospital room and board expenses: the daily room rate when a Covered Person is Hospital confined; and general nursing care is provided and charged for by the Hospital. In computing the number of days payable under this benefit, the date of admission will be counted but not the date of discharge.
2. Ancillary hospital expenses: services and supplies including: operating room; laboratory tests; anesthesia; and medicines (excluding take home drugs) when Hospital confined. This does not include personal services of a non-medical nature.
3. Daily intensive care unit expenses: the daily room rate when a Covered Person is Hospital confined in a bed in the intensive care unit; and nursing services other than private duty nursing services.
4. Medical emergency care (room and supplies) expenses: incurred within 72 hours of an Accident and including: the attending Doctor's charges; X-rays; laboratory procedures; use of the emergency room; and supplies.
5. Outpatient surgical room and supply expenses for use of the surgical facility.
6. Outpatient: diagnostic x-rays; laboratory procedures; and tests.
7. Doctor non-surgical treatment/examination expenses (excluding medicines) including: the Doctor's initial visit; each Medically Necessary follow-up visit; and consultation visits when referred by the attending Doctor.
8. Doctor's surgical expenses
9. Outpatient laboratory test expenses.
10. Chiropractic expenses on an outpatient basis limited to one visit per day.
11. Dental expenses including dental x-rays for the repair or treatment of each injured tooth that is: whole; sound; and a natural tooth at the time of the Accident; and emergency alleviation of dental pain.

12. Air Ambulance expenses for transportation from the emergency site to the Hospital.
13. Prescription Drug Expenses including: dressings; drugs; and medicines prescribed by a Doctor.
14. Medical services and supplies: expenses for blood and blood transfusions; oxygen and its administration.
15. Expenses due to an aggravation or re-Injury of a Pre-Existing Condition.
16. Emergency medical treatment of pregnancy.
17. Physical Therapy.
18. MRI/Cat scan and all other diagnostic imaging services.

How do I find a covered provider/make an appointment?

A: Contact UHCG's Emergency Response Center to schedule an appointment for you and arrange for direct payment to one of their doctors. The UHCG Emergency Response Center is available 24/7 by phone (call collect) +1.410.453-6330 or e-mail assistance@uhcglobal.com to assist you with everything from routine requests to medical emergencies.

If you make your own appointment, contact the Emergency Response Center at least 24 hours prior to your appointment so UHCG can provide the doctor's office with a "guarantee of payment". In many countries providers require this at the time of the visit. If this is not arranged prior to the visit, the doctor may require payment up front from you.

What if I need a follow-up appointment?

A: If the physician recommends a follow-up consultation, please provide this information to the UHCG Emergency Response Center in order to coordinate this appointment and arrange payment. To request these services, contact the Emergency Response Center by phone (call collect) +1.410.453-6330 or e-mail assistance@uhcglobal.com.

What should I do in the event of a medical emergency?

A: Go immediately to the nearest physician or hospital and then contact UHCG's Emergency Response Center by phone (call collect) +1.410.453.6330 or e-mail assistance@uhcglobal.com. UHCG coordinates emergency services with the coordination of our clinical team and a worldwide network of Physician Advisors. UHCG members in need of life-saving medical intervention are treated in Centers of Excellence around the world.

If your location is not listed below or the call will not go through, call the 24-hour Emergency Response Center collect (reverse charges accepted)

Australia	1 800 127 907	Japan	00531 11 4065
Brazil	0800 891 2734	Mexico	001 800 101 0061
China (northern)	108888*800 527 0218	Philippines	1 800 1 111 0503
China (southern)	10811*800527 0218	Singapore	800 1100 452
Dominican Republic	1888 567 0977	South Africa	0800 9 92379
France	0800 90 8505	Spain	900 98 4467
Germany	0800 1 811401	Switzerland	0800 55 6029
Hong Kong	800 96 4421	Thailand	001 800 11 471 0661
Israel	1 809 41 0172	U.K.	0800 252 074
Italy	800 877 204	U.S. & Canada	1 800 527 0218

Are there any exclusions?

A: Yes.

We will not pay benefits for any loss or Injury that is caused by, or results from:

1. war or any act of war, whether declared or not.
2. piloting or serving as a crewmember.
3. commission of, or attempt to commit: a felony; an assault; or other illegal activity.
4. active participation in a riot, or insurrection.
5. flight in; boarding; or alighting from an aircraft or any craft designed to fly above the Earth's surface, except as:
 - a) a fare-paying passenger on a regularly scheduled commercial or charter airline;
 - b) a passenger in a non-scheduled, private aircraft used for pleasure purposes with no commercial intent during the flight;
 - c) a passenger in a military aircraft flown by the Air Mobility Command or its foreign equivalent.
6. travel in or on any on-road or off-road motorized vehicle not requiring licensing as a motor vehicle.
7. Injury or Sickness covered by: Workers' Compensation; Employer's Liability Laws; or benefits or while engaging in activity for monetary gain from sources other than the Policyholder.
8. an Accident that occurs while on active duty service in the: military; naval; or air force of any country or international organization. Upon Our receipt of proof of service, We will

refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days.

9. Injury or Sickness where the Covered Person's Trip to the host country is undertaken for treatment or advice for such Injury or Sickness, except as provided in the Policy.
10. participation in any sports activity listed below not specifically authorized, sponsored and supervised by the Policyholder;
 - rugby; or cave diving; or rock climbing; or ice climbing; or mountain climbing; or base jumping; or bull riding; or heli-skiing; or surfing; or motorcycle racing; or climbing above 20,000 feet; including: bungee jumping; or parachuting; or skydiving; or parasailing; or hang-gliding; or caving or spelunking; or extreme skiing; or heli-skiing; or skiing outside marked trails; or mountain climbing; or ice climbing; or scuba diving; or professional or semi-professional sports; or extreme sports; or body contact sports; or hot-air ballooning; or base jumping; or sail gliding; or parakiting; or parkour; or racing including stunt show or speed test of any motorized or non-motorized vehicle; or rodeo activities

This insurance does not apply to the extent that trade or economic sanctions or regulations prohibit Us from providing insurance, including, but not limited to, the payment of claims.

In addition to the exclusions above, We will not pay Medical Expense Benefits for any loss, treatment or services resulting from or contributed to by:

1. treatment by persons employed or retained by a Policyholder, or by any Immediate Family Member or member of the Covered Person's household.
2. treatment of: sickness; disease; or infections; except pyogenic infections or bacterial infections that result from the accidental ingestion of contaminated substances.
3. Injury or death to which a contributing cause is: the Covered Person's violation or attempt to violate any duly-enacted law; or the commission or attempt to commit an assault or a felony; or that occurs while the Covered Person is engaged in an illegal occupation.
4. Injury or death caused while: riding in or on; entering into or alighting from; or being struck by a 2 or 3-wheeled motor vehicle or a motor vehicle not designed primarily for use on public streets and highways.
5. cosmetic surgery, except for reconstructive surgery needed as the result of an Injury or Sickness.
6. Any: elective treatment; surgery; health treatment; or examination; including any: service; treatment; or supplies that: (a) are deemed by Us to be experimental; and (b) are not recognized and generally accepted medical practices in the United States.
7. treatment or service provided by a private duty nurse.
8. replacement of: artificial limbs; eyes; and larynx.
9. eye refractions or eye examinations for the purpose of prescribing corrective lenses or for the fitting thereof, unless caused by an Injury incurred while covered under the Policy.
10. conditions that are not caused by a Covered Accident or Sickness.
11. participation in any activity or hazard not specifically covered by the Policy.
12. Any: treatment; service; or supply not specifically covered by the Policy.
13. Any: treatment; services; or supplies received by the Covered Person that are incurred or received while he or she is in his or her Home Country.

14. personal comfort or convenience items. These include but are not limited to: Hospital telephone charges; television rental; or guest meals.
15. pregnancy or childbirth. This does not apply if treatment is required as a result of a Covered Accident.
16. routine nursery care.
17. routine physicals.
18. cosmetic or plastic surgery, except as a result of Injury.
19. elective surgery.
20. birth defects and congenital anomalies; or complications which arise from such conditions.
21. new eye glasses or contact lenses; eye examinations related to the correction of vision or related to the fitting of glasses or contact lenses; or repair or replacement of existing eye glasses or contact lenses.
22. routine dental care and treatment.
23. rest cures or custodial care.
24. organ or tissue transplants and related services.
25. Injury sustained while participating in professional; or semiprofessional sports.
26. confinement or institutional care.
27. maternity and routine nursery care.
28. any expenses covered by any other employer or government sponsored plan for which, and to the extent that the Covered Person is eligible for reimbursement.
29. Services; supplies; or treatment including any period of Hospital confinement which were not: recommended; approved; and certified as necessary and reasonable by a Doctor; or expenses which are non-medical in nature.
30. treatment relating to: birth defects; and congenital conditions; or complications arising from those conditions.
31. sexually transmitted diseases or immune deficiency disorders and related conditions. This exclusion does not apply to the care or treatments of: Acquired Immune Deficiency Syndrome (AIDS); AIDS Related Complex (ARC); or Human Immunodeficiency Virus (HIV) infection, or any illness or disease arising from these medical conditions.
32. expenses incurred for services related to the diagnostic treatment of infertility or other problems related to the inability to conceive a child, unless such infertility is a result of a covered Injury or Sickness.
33. expenses incurred for birth control including surgical procedures and devices.
34. nasal or sinus surgery, except surgery made necessary as the result of a covered Injury a deviated nasal septum including sub mucous resection and surgical correction thereof.
35. treatment of acne.
36. expenses incurred for Trips taken for the purpose of seeking medical care.
37. expenses incurred while traveling against the advice of a medical professional.

How will I get my membership ID card?

A: When you are enrolled into the UHCG program you will receive an ID card delivered to the e-mail address provided.

In addition, you may login to www.uhcglobal.com and set up a member center account to view important information. You can access UHCG's comprehensive online resources through this site, including:

- View plan benefits
- Search for local facilities and use the medical drug, term and phrase translation guides
- Access printable health and security intelligence and profiles for cities and countries worldwide

Can I cancel my coverage after submitting my enrollment information but before my travel or the coverage period begins?

A: Yes, if your plans change and you cannot travel, please contact your University of Florida program administrator.

How do I extend my medical insurance coverage beyond my program date?

A: If you would like to extend your trip for personal reasons, you may do so by calling our enrollment center at 1.800.732.5309.

How do I file a claim?

A: Download and complete the claim form that can be found in the Documents section of the UHCG Member Portal. Include all paid receipts with the completed claim form and mail to the address on the claim form.



MEDICAL & SECURITY ASSISTANCE AND EVACUATION

MEDICAL & SECURITY SERVICE

UNIVERSITY OF SOUTH FLORIDA

PROGRAM DESCRIPTION

A comprehensive program providing 24/7 emergency medical and travel assistance services when You when You are outside Your Home Country or 100 or more miles away from Your primary residence in Your Home Country. The program also provides emergency security assistance services when you are outside of Your Home Country. Expatriates are eligible for Medical services while in Your Host Country, while traveling outside of Your Home Country, or while traveling within Your Home Country 100 or more miles away from Your primary residence. Expatriates are eligible for Security services while in Your Host Country or when traveling outside of Your Home Country.

How To Use UnitedHealthcare Global Assistance Services

24 hours a day, 7 days a week, 365 days a year

If You have a medical, personal safety or travel problem, simply call Us for assistance. Our toll-free and collect-call telephone numbers are printed on Your ID card. Either call the toll-free number of the country You are in, call the Emergency Response Center collect, or email the Emergency Response Center at:

Baltimore, MD, USA +1-410-453-6330

Assistance@uhcglobal.com

A multilingual case manager will ask for Your name, Your company or group name, the group number shown on Your ID card, and a description of Your situation. We will immediately begin assisting You. A full listing of services follows.

If the condition is a medical emergency, You should go immediately to the nearest physician or hospital without delay and then contact the 24-hour Emergency Response Center.

In the event of emergency security situation, You should immediately get to a safe location and then contact the Emergency Response Center. We will then take the appropriate action to assist You and monitor Your care until the situation is resolved.

Your program provides You with Medical Evacuation & Repatriation Services, Medical Assistance Services, Security & Political Evacuation Services, Destination Intelligence, and Travel Assistance Services as described below. These services are subject to certain Conditions and Limitations also described below.

UnitedHealthcare Global
8501 LaSalle Road, Suite 200
Baltimore, MD USA 21286
www.uhcglobal.com

MEDICAL ASSISTANCE SERVICES

Worldwide Medical and Dental Referrals: We will provide referrals to help You locate appropriate treatment and quality care.

Monitoring of Treatment: Our case managers will continually monitor Your case. In addition, UnitedHealthcare Global Physician Advisors provide Us consultative and advisory services, including review and analysis of the quality of medical care You are receiving.

Facilitation of Hospital Payment: Upon securing payment or a guarantee to reimburse, We will either wire or guarantee funds needed for hospital admittance costs. You are ultimately responsible for the payment of the cost of medical care and treatment, including hospital expenses or wiring fees.

Transfer of Insurance Information to Medical Providers: We will relay insurance benefit information to help prevent delays or denials of medical care. We will also assist with hospital admission and discharge planning.

Transfer of Medical Records: Upon Your consent, We will assist with the transfer of medical information and records to You or the treating physician.

24-Hour Health Information*: We will provide access to registered nurses who are available 24 hours a day, 365 days a year, to deliver symptom decision support, evidence-based health information and education, and medication information. They can help you understand treatment options to discuss with your doctor and answer medication questions.

Medication and Vaccine Transfers: In the event medication or vaccines are not available locally, or a prescription medication is lost or stolen, We will make commercially reasonable efforts to coordinate their transfer to You upon the prescribing physician's authorization, if it is legally permissible. You will be responsible for the cost of the medication or vaccine and any delivery costs.

Updates to Family, Employer, and Home Physician: With Your approval, We will provide periodic case updates to appropriate individuals You designate in order to keep them informed.

Hotel Arrangements: We will assist You with the arrangement of hotel stays and room requirements before or after hospitalization or for ongoing care. You are responsible for costs of lodging and incidental expenses. .

Replacement of Corrective Lenses and Medical Devices: We will coordinate the replacement of corrective lenses or medical devices if they are lost, stolen, or broken during travel. You will be responsible for the cost of the item and any delivery costs.

MEDICAL EVACUATION & REPATRIATION SERVICES

The following services are available if the Participant suffers an Injury or a sudden and unexpected Illness:

Emergency Medical Evacuation: If You sustain an Injury or Illness that, in the opinion of UnitedHealthcare Global and the treating health care provider, requires urgent medical attention and adequate medical treatment is not available at Your initial medical facility, We will arrange and pay for a medically supervised evacuation to the nearest medical facility We determine to be capable of providing appropriate medical treatment. Your medical condition and situation must be such that, in the professional opinion of the health care provider and UnitedHealthcare Global, You require immediate emergency medical treatment, without which there would be a significant risk of death or serious impairment. All such arrangements must be coordinated and approved in advance by Us.

Dispatch of Doctors/Specialists: In an emergency where We determine that You cannot adequately be assessed by telephone for possible evacuation from Your initial medical facility, or You cannot be moved and local treatment is unavailable, We will endeavor to send an appropriate medical practitioner to You when We deem it appropriate for medical management of a case. We will pay for transportation and related expenses of the medical practitioner. You are responsible for the payment of the cost of medical care and treatment.

Medical Repatriation: Following stabilization of Your condition and discharge from the hospital, We will coordinate and pay for transportation to Your Home Country or Host Country if We determine that You should return for continuing medical care. Medical escorts and mobile medical equipment will be arranged and paid if UnitedHealthcare Global determines either is warranted during the transportation. We will also arrange and pay for a change to Your existing return travel arrangements if the change is required as a direct result of Your medical condition or treatment. All travel arrangements will be as necessitated by Your medical condition as determined by Your treating physician and UnitedHealthcare Global. All such arrangements must be coordinated and approved in advance by Us.

Transportation After Stabilization: When Medical Repatriation is not required following stabilization of Your condition and discharge from the hospital, We will coordinate and pay for economy transportation (or upgraded transportation to match Your originally booked travel) to Your point of origin, Your Home Country, or your Host Country. All such arrangements must be coordinated and approved by Us in advance.

Transportation to Join a Hospitalized Participant: If You are traveling alone and are or will be hospitalized for more than three (3) days due to an Illness or Injury, or the victim of a felonious assault, We will coordinate and pay for economy round-trip airfare for a person of Your choice to join You. We will also assist with the arrangement of their hotel stay during Your hospitalization. Costs of lodging, meals, and incidental expenses are the responsibility of the traveler.

Return of Minor Children: If Your minor child(ren) age 18 or under are present but left unattended as a result of Your Injury or Illness, We will coordinate and pay for one-way economy airfare (or upgraded transportation to match Your originally booked travel) to send them back to Your Home Country. We will also arrange and pay for the services, transportation expenses, and required accommodations of a non-medical escort, if required and as determined by UnitedHealthcare Global.

Repatriation of Mortal Remains: In the event of Your death, We will assist in obtaining the necessary clearances for Your cremation or the return of Your mortal remains. We will coordinate and pay for commercially reasonable efforts for the expenses of the preparation and transportation of Your mortal remains to Your Home Country or place of primary residence, as well as obtain and pay for the number of certified death certificates required by the Host Country and Home Country to release and receive the remains.

DESTINATION INTELLIGENCE & SUPPORT

Global Intelligence Center: You will have online access to information about Your program including information about UnitedHealthcare Global services, an electronic version of this program description as well as Your ID card, a listing of telephone numbers for contacting UnitedHealthcare Global, and any online intelligence tools included in this program.

Medical Intelligence Reports: You will have online access to continuous updates on health information pertinent to Your destination(s) of travel such as immunizations, vaccinations, regional health concerns, entry and exit requirements, and transportation information. You can also review certain preferred facilities for Your travel destinations. Risk Ratings are provided for each country and rank the severity of risk concerning disease, quality of care, access to care, and cultural challenges.

World Watch® Global Security Intelligence: You will have online access to the latest authoritative information and security guidance for over 170 countries and 280 cities. Information includes the latest news, alerts, risk ratings, and a broad array of destination information including crime, terrorism, local hospitals, emergency phone numbers, culture, weather, transportation information, entry and exit requirements, and currency. Our global security and medical databases are continuously updated and includes intelligence from thousands of worldwide sources.

Pre-Travel Reports: Using information from the Medical Intelligence Reports and World Watch® online intelligence tools, You can create customized, printable health and security profiles for your destination.

Evacuation Support Notification: Our intelligence team monitors global events and tracks those that may trigger a need to evacuate a location. We will contact Your program administrator via email to alert him/her to such situations to ensure Your security and safety are not compromised. In addition, We will keep Your program administrator updated on any escalation or downgrade in the status of the situation. These Support Notifications are staged between Warning, Alert, and Evacuate as the risk level of the situation increases or eases.

Security Analysts: Your program administrator will have 24/7 direct access to Our in-house security and intelligence experts to provide consultation, discuss issues, or answer questions during an Emergency Security Situation.

SECURITY AND POLITICAL EVACUATION SERVICES

Transportation to Departure Point: As part of a Security or Political Evacuation, UnitedHealthcare Global will, to the extent commercially reasonable, arrange and pay for ground transportation to the designated international airport or other safe departure point. We will also arrange and pay for the cost of services to protect Your safety while assembled or during evacuation if required and as determined by UnitedHealthcare Global.

Security Evacuation: In the event of an Emergency Security Situation, We will, to the extent commercially reasonable, arrange and pay for Your evacuation from an international airport or other safe departure point We designate to the nearest safe haven. Evacuation must be requested within 5 days (120 hours) from the time of issuance of the UnitedHealthcare Global Evacuate stage support notification. If evacuation becomes impractical due to hostile or dangerous conditions, We will maintain contact with You and advise You until evacuation becomes viable or the Emergency Security Situation has passed.

Political Evacuation: In the event the officials of Your Home Country issue a written order that You leave Your Host Country for non-medical reasons, or if You are expelled or declared “persona non grata” on the written authority of Your Host Country, We will, to the extent commercially reasonable, arrange and pay for Your evacuation from an international airport or other safe departure point We designate to the nearest safe haven. Evacuation must be requested within 5 days (120 hours) from the time of ordered departure notice given by the recognized government of Your Home Country or Host Country.

Transportation After Security or Political Evacuation: Following a Security or Political Evacuation and when safety allows, We will coordinate and pay for one-way economy airfare to return You to either Your Host Country or Your Home Country.

TRAVEL ASSISTANCE SERVICES

Replacement of Lost or Stolen Travel Documents: We will assist You in taking the necessary steps to replace passports, tickets, and other important travel documents.

Emergency Travel Arrangements: We will make new reservations for airlines, hotels, and other travel services in the event of an Illness or Injury or Emergency Security Situation.

Transfer of Funds: We will provide You with an emergency cash advance subject to Us first securing funds from You or Your family. You are responsible for any fees for the wiring of these funds.

Legal Referrals: Should You require legal assistance, We will direct You to an attorney.

Language Services: Our multilingual case managers are available to provide immediate interpretation assistance in a variety of languages in an emergency; otherwise We will provide You with referrals to interpreter services. Written translations and other custom requests, including an on-site interpreter will be subject to an additional fee.

Message Transmittals: You may send and receive emergency messages toll-free, 24-hours a day, through Our Emergency Response Center.

PROGRAM DEFINITIONS

The following definitions apply:

“Emergency Security Situation” means a civil and/or military uprising, insurrection, war, revolution, or other violent disturbance in a Host Country, which results in UnitedHealthcare Global issuing an Evacuate stage alert through the Evacuation Notification service included in this program. At a minimum, Our program will adhere to any announcement made by Your Home or Host Country ordering the departure of personnel in the event a UnitedHealthcare Global Evacuate stage alert has not been issued. Emergency Security Situation does not include Natural Disasters.

“Enrollment Period” means the period of time for which You are validly enrolled for your UnitedHealthcare Global program and for which We have received the appropriate enrollment fee.

“Expatriate” means individual traveler whose trips exceed 90 consecutive days or whose travel exceeds 180 days in a 12-month period.

“Home Country” means the country or territory as shown on Your passport or the country where You have Your primary residence.

“Host Country” means a country or territory You are visiting or in which You are living which is not Your Home Country.

“Illness” means a sudden and unexpected sickness that manifests itself during Your Enrollment Period.

“Injury” means an identifiable accidental injury caused by a sudden, unexpected, unusual, specific event that occurs during Your Enrollment Period.

“UnitedHealthcare Global Physician Advisors” means physicians, retained by UnitedHealthcare Global to provide Us with consultative and advisory services, including the review and analysis of the quality of medical care You are receiving.

“Natural Disaster” means an unforeseen event occurring directly from natural cause, including but not limited to, earthquake, flood, storm (wind, rain, snow, sleet, hail, lightning, dust or sand), tsunami, volcanic eruption, wildfire or other similar event that results in such severe and widespread damage that results in a Natural Disaster evacuation notification being issued by UnitedHealthcare Global, AND the participant’s location is Uninhabitable.

In no event, shall a Natural Disaster be deemed to apply to a marine vessel, ship or watercraft of any kind.

“Participant” means a person validly enrolled for a UnitedHealthcare Global program and for whom We have received the appropriate enrollment fee.

“Uninhabitable” means the Participant’s Host Country location is deemed unfit for residence, as determined by Our security personnel in accordance with Home Country and Host Country authorities, due to lack of habitable shelter, food, heat, and/or potable water AND no suitable supplemental housing is available within 100 miles of the disaster site.

“We,” “Us,” and “Our,” means UnitedHealthcare Global.

“You” and “Your” means the Participant.

CONDITIONS AND LIMITATIONS

The services described are available to You only during Your Enrollment Period. Medical services are available to You only when You are outside Your Home Country or 100 or more miles away from Your primary residence in Your Home Country. Security services are available to You only when You are outside of Your Home Country. Expatriates are eligible for Medical services while in Your Host Country, while traveling outside of Your Home Country, or while traveling within Your Home Country 100 or more miles away from Your primary residence.

Expatriates are eligible for Security services while in Your Host Country or when traveling outside of Your Home Country.

We will only cover transportation costs if We have given Our prior approval or if those services are coordinated by Us.

We have sole discretion in making the determination as to whether We will cover the cost of Emergency Medical Evacuations. Our decision will be based on medical considerations, including the opinions of the treating physicians, UnitedHealthcare Global Physician Advisors and Our medical director with respect to Your condition and ability to travel. We will determine the appropriate method, destination, and timing of any evacuation. The destination will be the nearest facility capable of providing appropriate care, as determined by Us.

We have sole discretion in making the coverage determination for Medical Repatriation. Our determination will be based on Your need for continuing medical care. We may limit Medical Evacuation, Repatriation and related services upon reasonable notice to Client in the event of an epidemic. Limitations may involve geographies, covered services, etc. In the event of any limitation, UHCG shall provide as much advanced written notice as possible.

We reserve the right to determine, at Our sole discretion, the need for a security evacuation and the means, method, timing, and destination of that security evacuation. Our security personnel will consult with relevant governments, security analysts, and the sponsor of Your UnitedHealthcare Global program. At a minimum, Our program will adhere to any announcement made by Your Home or Host Country ordering the departure of personnel in the event a UnitedHealthcare Global Evacuation stage support notification has not been issued. The decision to travel is the sole responsibility of the traveler. If the Participant refuses a Security or Political Evacuation, We will not be liable for expenses incurred for evacuation occurring after the date for which the original Security or Political Evacuation is scheduled by UnitedHealthcare Global.

Our obligation to pay for Your Security and/or Political Evacuation will be limited to a maximum of \$100,000 USD per person per Emergency Security Situation. Eligible expenses include Transportation to Departure Point to a maximum limit of \$1,500 per person per Security or Political Evacuation, reasonable costs for food and accommodations at the assembly point, and, if required, costs to protect Your safety while assembled or during evacuation. You will be responsible for all transportation and living expenses while at the safe haven.

In the event We are arranging transportation by commercial air and You hold an original return airline ticket, We may use that ticket and are only responsible for any applicable change fees.

We are not responsible for the availability, timing, quality, results of, or failure to provide any medical, security, legal or other care or service caused by conditions beyond Our control. This includes Your failure to obtain care or service or where the rendering of such care or service is prohibited by U.S. law, local laws, or regulatory agencies.

Your legal representative shall have the right to act for You and on Your behalf if You are incapacitated or deceased.

We shall not be responsible for any assistance, costs, or expenses arising from:

1. Hospital or medical expenses of any kind or nature unless those expenses are part of the Emergency Medical Evacuation or Medical Repatriation.
2. Your traveling against the advice of a physician or traveling for the purpose of obtaining medical treatment.
3. Taking part in military or police service operations.
4. The commission of, or attempt to commit, an unlawful act.
5. Pregnancies except in the case of a major, vital complication during the first two trimesters of pregnancy which presents a clear and significant risk of death or imminent serious injury or harm to the mother or fetus.
6. Initial transportation to local facilities, including ground ambulance fees.
7. Mountaineering or rock climbing necessitating the use of guides or ropes, spelunking, skydiving, parachuting, ballooning, hang gliding, deep sea diving utilizing hard helmet with air hose attachment, racing of any kind other than on foot, bungee jumping, operating a vehicle when not properly licensed, or

- participating in organized sports undertaken on a professional or sponsored basis unless otherwise agreed in writing by Us prior to Your Enrollment Period.
8. Incidental expenses, including but not limited to accommodations, local transportation, meals, and telecommunication charges.
 9. Subsequent Medical Evacuations for the same or related medical condition, regardless of location.
 10. Failure to properly procure or maintain immigration, work, residence or similar type visas, permits or documents.
 11. Security or Political Evacuations from Your Home Country.
 12. Security or Political Evacuations when the Emergency Security Situation precedes Your arrival in the Host Country, or when the Evacuate stage support notification issued by UnitedHealthcare Global has been posted for a period of more than 5 days (120 hours).
 13. Security or Political Evacuation assistance directly or indirectly related to a Natural Disaster.
 14. Medical Evacuation assistance directly or indirectly related to a Natural Disaster that precedes Your arrival.
 15. Any Evacuation or Repatriation that requires a Participant to be transported in a biohazard-isolation unit.
 16. The actual or threatened use or release of any nuclear, chemical or biological weapon or device, or exposure to nuclear reaction or radiation, regardless of contributory cause.

REIMBURSEMENT TO UNITEDHEALTHCARE GLOBAL AND RIGHTS OF SUBROGATION

You or a responsible party on Your behalf shall either pay the cost of medical care and treatment, including hospital expenses directly or shall reimburse Us upon demand for all such costs and expenses which may be imposed upon Us by health care providers for the cost of medical care and treatment, including hospital expenses, or related assistance services either authorized by You or deemed to be advisable and necessary by Us under urgent medical circumstances, to the extent that such expenses are not Our responsibility. Such reimbursement shall be without regard to the specific terms, conditions, or limitations of any insurance policies or benefits available to You.

We shall be fully and completely subrogated to Your rights against parties who may be liable for the payment of, or a contribution toward the payment of, the costs and expenses of assistance services provided by Us or medical care and treatment, including hospital expenses, in the event that We pay or contribute to the payment of them. You must assign to Us any and all rights of recovery under any such insurance plans, including any occupational benefit plan, health insurance, or other insurance plan or public assistance program, up to the sum of any payments by Us.

* 24-Hour Health Information may be provided by Optum® NurseLine.

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ASSISTANCE AND EVACUATION UNIVERSITY OF SOUTH FLORIDA NATURAL DISASTER SERVICE AMENDMENT

When included as a part of your UnitedHealthcare Global Security Service assistance program, this amendment changes certain terms and conditions of the UnitedHealthcare Global program description. Changed terms and conditions are listed below. All other conditions will remain in effect as indicated in Your original UnitedHealthcare Global program description.

NATURAL DISASTER EVACUATION SERVICES

Transportation to Departure Point: As part of a Natural Disaster Evacuation, We will, to the extent commercially reasonable, arrange and pay for ground transportation to the designated international airport or other safe departure point. We will also arrange and pay for the cost of services to protect Your safety while assembled or during evacuation if required and as determined by UnitedHealthcare Global.

Natural Disaster Evacuation: In the event of a Natural Disaster, We will, to the extent commercially reasonable, arrange and pay for Your evacuation from an international airport or other safe departure point We designate to the nearest safe haven. Evacuation must be requested within 5 days (120 hours) from the time of issuance of the UnitedHealthcare Global Natural Disaster evacuation support notification. If evacuation becomes impractical due to hostile or dangerous conditions, We will maintain contact with and advise You until evacuation becomes viable or the Natural Disaster has passed.

Transportation After Natural Disaster Evacuation: Following a Natural Disaster Evacuation and when safety allows, We will coordinate and pay for one-way economy airfare to return You to either Your Host Country or Your Home Country.

PROGRAM DEFINITIONS

“Natural Disaster” means an unforeseen event occurring directly from natural cause, including but not limited to, earthquake, flood, storm (wind, rain, snow, sleet, hail, lightning, dust or sand), tsunami, volcanic eruption, wildfire or other similar event that results in such severe and widespread damage that results in a Natural Disaster evacuation notification being issued by UnitedHealthcare Global, AND the participant’s location is Uninhabitable.

In no event, shall a Natural Disaster be deemed to apply to a marine vessel, ship or watercraft of any kind.

“Uninhabitable” means the Participant’s Host Country location is deemed unfit for residence, as determined by Our security personnel in accordance with Home Country and Host Country authorities, due to lack of habitable shelter, food, heat, and/or potable water AND no suitable supplemental housing is available within 100 miles of the disaster site.

CONDITIONS & LIMITATIONS

The Natural Disaster services described are available to You only during Your Enrollment Period. Natural Disaster services are available to You only when You are outside of Your Home Country.

We reserve the right to determine, at Our sole discretion, the need for a natural disaster evacuation and the means, method, timing, and destination of that evacuation. Our security personnel will consult with relevant governments, analysts, and the sponsor of Your UnitedHealthcare Global program. At a minimum, Our program will adhere to any announcement made by Your Home or Host Country ordering the departure of personnel in the event a UnitedHealthcare Global Natural Disaster evacuation notification has not been issued. The decision to travel is the sole responsibility of the traveller. If the Participant refuses a Natural Disaster Evacuation, We will not be liable for

expenses incurred for an evacuation occurring after the date for which the original Natural Disaster Evacuation is scheduled by UnitedHealthcare Global.

Our obligation to pay for Your Natural Disaster Evacuation will be limited to a maximum of \$100,000 USD per person per Natural Disaster. Eligible expenses shall include Transportation to Departure Point to a maximum of \$1,500 USD per person per Natural Disaster Evacuation, reasonable costs for food and accommodations at the assembly point, and, if required, costs to protect Your safety while assembled or during evacuation. You will be responsible for all transportation and living expenses while at the safe haven.

We are not responsible for the availability, timing, quality, results of, or failure to provide any medical, security, legal or other care or service caused by conditions beyond Our control. This includes Your failure to obtain care or service or where the rendering of such care or service is prohibited by U.S. law, local laws, or regulatory agencies.

We shall not be responsible for any assistance, costs, or expenses arising from:

1. Travel arrangements that were neither coordinated nor approved by Us in advance.
2. Natural Disaster Evacuations from Your Home Country.
3. Natural Disaster Evacuations when the Natural Disaster or the event directly giving rise to it precedes Your arrival, or when the Natural Disaster evacuation notification issued by UnitedHealthcare Global has been posted for a period of more than 5 days (120 hours).



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