Important

This program is valid only if the appropriate plan cost has been received by Expedia, Inc. Please keep this document as your record of coverage.
Important: Benefits under Section I are provided by Expedia Inc. Details regarding cancellation penalties, terms and conditions are outlined here.

Change or Cancel for Any Reason
The Expedia Vacation Waiver helps protect you against life’s unexpected occurrences. Your group is allowed to change or cancel your trip for any reason one (1) time prior to the scheduled start time* of your trip without being charged any change or cancellation fees. If canceling, any monies paid will be returned to the customer who booked the travel except the cost of published airfare, which may be made available as a credit for future travel.**

Note: The waiver is valid once you have paid the appropriate waiver cost and your booking is confirmed.

*Scheduled Start Time is defined as the originally scheduled departure time of your flight or, if you haven’t booked a flight as part of your package, the scheduled check-in time of your hotel at the time of booking. Other terms and conditions apply. Please see Terms and Conditions below.

**For a published air ticket, credit may be issued per applicable airline policies less airline change fees and Expedia, Inc. will absorb the change fees. The actual airfare could be higher at the time of rebooking; in that event the price differential would be your responsibility. You are allowed to change or cancel your trip for any reason one (1) time prior to the start of your trip.

Refund Instructions
When your group purchases an Expedia Vacation Waiver you will be asked to print your voucher. Please keep your voucher handy as a reference. You do not need to redeem your voucher at any time. You will also be able to access your information from the voucher in your online itinerary once your booking is confirmed. The Expedia Vacation Waiver is valid for redemption only by the person(s) named on the voucher. The waiver is not transferable, has no cash value, and may be redeemed only once. The Expedia Vacation Waiver must be purchased at the time of booking; waivers cannot be purchased after booking.

You must call Expedia Customer Service at 1-800-EXPEDIA (1-800-397-3342) to cancel or change your vacation package.

Terms & Conditions
The Expedia Vacation Waiver is valid for redemption only by the person(s) named on the voucher. It is not transferable, has no cash value, and may be redeemed only once. The Expedia Vacation Waiver must be purchased at the time of booking; waivers cannot be purchased after booking. The redemption excludes the price of the Expedia Vacation Waiver.

If you change or cancel your trip for ANY REASON prior to the scheduled start time* of your trip, all package cancellation fees imposed by the Booking Agent will be waived, except the cost of Published Air.
## Description of Coverage

### Part A. Travel Arrangement Protection
- **Trip Cancellation**: Up to Total Vacation Cost
- **Trip Interruption**: Up to Total Vacation Cost
- **Trip Delay**: $500, Up to $100/day

### Part B. Medical Protection
- **Emergency Evacuation/Repatriation of Remains**: $15,000
- **Accident Medical Expense**: $5,000
- **Sickness Medical Expense**: $5,000

### Part C. Baggage Protection
- **Baggage/Personal Effects**: $1,000
- **Baggage Delay**: $500

### Part D. Travel Accident Protection
- **Accidental Death & Dismemberment**
  - **Air Common Carrier**: $50,000

### Part E. Worldwide Emergency Assistance (On Call International)
- **CareFree™ Travel Assistance**: 24/7
- **Medical Assistance**: 24/7
- **Emergency Services**: 24/7

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**Summary of Coverages**

**Part A. Travel Arrangement Protection**

**Trip Cancellation and Trip Interruption Benefits**

We will pay a Pre-Departure Trip Cancellation Benefit, up to the amount in the Schedule for non-refundable cancellation charges imposed by Expedia, Inc. if you are prevented from taking your Covered Vacation due to your, an Immediate Family Member’s, Traveling Companion’s, or Business Partner’s Sickness, Injury or death or Other Covered Events as defined, that occur(s) before departure on your Covered Vacation. The Sickness or Injury must:

a) commence while your coverage is in effect under the plan;
b) require the examination and treatment by a Physician at the time the Covered Vacation is canceled; and c) in the written opinion of the treating Physician, be so disabling as to prevent you from taking your Covered Vacation.

**Pre-Departure Trip Cancellation Benefits**

We will reimburse you, up to the amount in the Schedule for the amount of prepaid, non-refundable, and unused Payments or Deposits that you paid for your Covered Vacation. We will pay your additional cost as a result of a change in the per person occupancy rate for prepaid travel arrangements if a Traveling Companion’s Covered Vacation is canceled and your Covered Vacation is not canceled.

**Note:** As respects air cancellation penalties, you will be covered only for air arrangements booked through the Policyholder and flights connecting to such air arrangements booked through the Policyholder. We will not pay benefits for cancellation charges imposed on any other air arrangements you may book on your own.

**Post-Departure Trip Interruption**

We will pay a Post-Departure Trip Interruption Benefit, up to the amount in the Schedule, if due to your, an Immediate Family Member’s, Traveling Companion’s, or Business Partner’s, Sickness, Injury or death or Other Covered Events as defined: 1) your arrival on your Covered Vacation is delayed; or 2) you are unable to continue on your Covered Vacation after you have departed on your Covered Vacation. For item 1) above, the Sickness or Injury must: a) commence while your coverage is in effect under the plan; b) for item 2) above, commence while you are on your Covered Vacation and your coverage is in effect under the plan; and c) for both items 1) and 2) above, require the examination and treatment by a Physician at the time the Covered Vacation is interrupted or delayed; and d) in the written opinion of the treating Physician, be so disabling as to delay your arrival on your Covered Vacation or to prevent you from continuing your Covered Vacation.

**Post-Departure Trip Interruption Benefits**

We will reimburse you, less any refund paid or payable, for unused land or water travel arrangements, and/or the following:

1. the additional transportation expenses by the most direct route from the point you interrupted your Covered Vacation: a) to the next scheduled destination where you can catch up to your Covered Vacation; or (b) to the final destination of your Covered Vacation;

2. the additional transportation expenses incurred by you by the most direct route to reach your original Covered Vacation destination if you are delayed and leave after the Scheduled Departure Date. However, the benefit payable under (1) and (2) above will not exceed the cost of a one-way economy air fare by the most direct route less any refunds paid or payable for your unused original tickets.

3. reasonable additional accommodation and transportation expenses (up to $100 per day) incurred to remain near a covered traveling Immediate Family Member or Traveling Companion who is hospitalized during your Vacation.

In no event shall the amount reimbursed under Trip Cancellation or Trip Interruption exceed the amount you prepaid for your Vacation.
Important: You, your Traveling Companion and/or your Immediate Family Member booked to travel with you must be medically capable of travel on the day you purchase this coverage. The covered reason for cancellation or interruption of your Vacation must occur after your effective date of Trip Cancellation coverage.

Other Covered Events means only the following unforeseeable events or their consequences which occur while coverage is in effect under this Policy: a change in plans by you, an Immediate Family Member traveling with you, or Traveling Companion resulting from one of the following events which occurs while coverage is in effect under this Policy:

(a) being directly involved in a documented traffic accident while en route to departure;
(b) being hijacked, Quarantined, required to serve on a jury, or required by a court order to appear as a witness in a legal action, provided you, an Immediate Family Member traveling with you or a Traveling Companion is not: 1) a party to the legal action, or 2) appearing as a law enforcement officer;
(c) having your Home made uninhabitable by fire, flood, volcano, earthquake, hurricane or other natural disaster;
(d) Your involuntary termination of employment or layoff which occurs after your effective date of coverage and was not under your control. You must have been continuously employed with the same employer for 1 year prior to the termination or layoff. This provision is not applicable to temporary employment, independent contractors or self-employed persons.

Trip Delay
If your Covered Vacation is delayed for 12 hours or more, we will reimburse you, up to the amount shown in the Schedule for unused land or water travel arrangements, less any refund paid or payable and reasonable additional expenses incurred by you for hotel accommodations, meals, telephone calls and economy transportation to catch up to your Vacation, or to return Home. We will not pay benefits for expenses incurred after travel becomes possible.

Trip Delay must be caused by or result from:
1. Air Common Carrier delay;
2. loss or theft of your passport(s), travel documents or money;
3. being Quarantined;
4. hijacking;
5. natural disaster;
6. a documented traffic accident while you are en route to departure;
7. unannounced strike;
8. a civil disorder.

Part B. Medical Protection
Medical Expense/Emergency Assistance Benefits
We will pay this benefit, up to the amount on the Schedule for the following Covered Expenses incurred by you, subject to the
Covered Expenses:

**Accident Medical Expense/Sickness Medical Expense:**
1. expenses for the following Physician-ordered medical services: services of legally qualified Physicians and graduate nurses, charges for Hospital confinement and services, local ambulance services, prescription drugs and medicines, and therapeutic services, incurred by you within one year from the date of your Sickness or Injury;
2. expenses for emergency dental treatment incurred by you during a Covered Vacation;

**Emergency Evacuation:**
3. expenses incurred by you for Physician-ordered emergency medical evacuation, including medically appropriate transportation and necessary medical care en route, to the nearest suitable Hospital, when you are critically ill or injured and no suitable local care is available, subject to the Program Medical Advisors prior approval;
4. expenses incurred for non-emergency medical evacuation, including medically appropriate transportation and medical care en route, to a Hospital or to your place of residence, when deemed medically necessary by the attending Physician, subject to the Program Medical Advisors prior approval;
5. expenses for transportation not to exceed the cost of one round-trip economy class air fare to the place of hospitalization for one person chosen by you, provided that you are traveling alone and are hospitalized for more than 7 days;
6. expenses for transportation not to exceed the cost of one-way economy class air fare to your place of residence, including escort expenses if you are 25 years of age or younger and left unattended due to the death or hospitalization of an accompanying adult(s), subject to the Program Medical Advisors prior approval;
7. expenses for one-way economy class air fare to your place of residence, from a medical facility to which you were previously evacuated, less any refunds paid or payable from your unused transportation tickets, if these expenses are not covered elsewhere in the plan;

**Repatriation:**
8. repatriation expenses for preparation and air transportation of your remains to your place of residence, or up to an
equivalent amount for a local burial in the country where
death occurred, if you die while on your Covered Vacation.

**Losses Not Covered:**
We will not pay Medical Expense/Emergency Assistance Benefits if your Covered Vacation destination is traveling to your Home and the Covered Vacation is longer than 6 months.

**Please Note:** In no event will all benefits paid for Emergency Evacuation and Repatriation expenses exceed the coverage limit of $15,000.

**Please note:** Benefits under Parts A & B (except Emergency Evacuation and Repatriation) are subject to exclusions listed on Pages 11-12.

**Part C. Baggage Protection**

**Baggage and Personal Effects Benefit**
We will reimburse you, less any amount paid or payable from any other valid and collectible insurance or indemnity, up to the amount shown in the Schedule, for direct loss, theft, damage or destruction of your Baggage during your Covered Vacation.

**Valuation and Payment of Loss**
Payment of loss under the Baggage and Personal Effects Benefit will be calculated based upon an Actual Cash Value basis. For items without receipts, payment of loss will be calculated based upon 80% of the Actual Cash Value at the time of loss. At our option, we may elect to repair or replace your Baggage. We will notify you within 30 days after we receive your proof of loss. We may take all or part of a damaged Baggage as a condition for payment of loss. In the event of a loss to a pair or set of items, we will: 1) repair or replace any part to restore the pair or set to its value before the loss; or 2) pay the difference between the value of the property before and after the loss.

**Items Subject to Special Limitations**
We will not pay more than $1,000 (or the Baggage and Personal Effects limit, if less) on all losses to jewelry; watches; precious or semi-precious gems; decorative or personal articles consisting in whole or in part of silver, gold, or platinum; cameras, camera equipment; digital or electronic equipment and media; and articles consisting in whole or in part of fur. There is a $500 per article limit.

**Baggage Delay Benefit**
We will reimburse you, less any amount paid or payable from any other valid and collectible insurance or indemnity, up to the amount shown in the Schedule for the cost of reasonable additional clothing and personal articles purchased by you, if your Baggage is delayed by an Air Common Carrier for 24 hours or more during your Covered Vacation. You must be a ticketed passenger on an Air Common Carrier. This coverage terminates upon your arrival at the return destination of your Covered Vacation.
Part D. Travel Accident Protection

Accidental Death and Dismemberment

Air Common Carrier Benefits

We will pay this benefit, up to the amount on the Schedule, if you sustain a covered loss in an Accident which occurs: 1) while a passenger in or on, boarding or alighting from an Air Common Carrier or 2) being struck or run down by an Air Common Carrier of a regularly scheduled airline or an air charter company that is licensed to carry passengers for hire while you are on a Covered Vacation and covered under the plan, and you suffer one of the losses listed below within 365 days of the Accident. The Principal Sum is the benefit amount shown in the schedule.

Loss: ........................................................................................... Percentage of Principal Sum Payable:
Life.................................................................................................100%
Both Hands; Both Feet or Sight of Both Eyes...............................100%
One Hand and One Foot.................................................................100%
One Hand and Sight of One Eye......................................................100%
One Foot and Sight of One Eye.......................................................100%
One Hand; One Foot or Sight of One Eye.....................................50%

If you suffer more than one loss from one Accident, we will pay only for the loss with the larger benefit. Loss of a hand or foot means complete severance at or above the wrist or ankle joint. Loss of sight of an eye means complete and irrecoverable loss of sight.

Part E. Worldwide Emergency Assistance

(On Call International)

Not a care in the world… when you have our 24/7 global network to assist you

- CareFree™ Travel Assistance
- Medical Assistance
- Emergency Services

CareFree™ Travel Assistance

Travel Arrangements

- Arrangements for last-minute flight and hotel changes
- Luggage Locator (reporting/tracking of lost, stolen or delayed baggage)
- Hotel finder and reservations
- Airport transportation
- Rental car reservations and automobile return
- Coordination of travel for visitors to bedside
- Return travel for dependent/minor children
- Assistance locating the nearest embassy or consulate
- Cash transfers
- Assistance with bail bonds

Pre-trip Information

- Destination guides (hotels, restaurants, etc.)
- Weather updates and advisories
- Passport requirements
- Currency exchange
- Health and safety advisories
Documents and Communication
• Assistance with lost travel documents or passports
• Live email and phone messaging to family and friends
• Emergency message relay service
• Multilingual translation and interpretation services

Medical Assistance and Managed Care
• Medical case management, consultation and monitoring
• Medical Transportation
• Dispatch of a doctor or specialist
• Referrals to local medical and dental service providers
• Worldwide medical information, up-to-the-minute travel medical advisories, and immunization requirements
• Prescription drug replacement
• Replacement of eyeglasses, contact lenses and dental appliances

Emergency Services
• Emergency medical and dental assistance
• Emergency legal assistance
• Emergency family travel arrangements

CareFree™ Travel Assistance, Medical Assistance and Emergency Services can be accessed by calling On Call International at 1-855-258-5784 or, from outside the U.S. or Canada, call collect*: 1-603-952-2039.

*If you have any difficulty making this collect call, contact the local phone operator to connect you to a US-based long-distance service. In this case, please let the Assistance Provider answering the phone know the number you are calling from, so that he/she may call you back. Any charges for the call will be considered reimbursable benefits.

Note that the problems of distance, information, and communications make it impossible for Transamerica Casualty Insurance Company, Aon Affinity, the Policyholder, or On Call International to assume any responsibility for the availability, quality, use, or results of any emergency service. In all cases, you are still responsible for obtaining, using, and paying for your own required services of all types.

Definitions
In the Description of Coverage, “you”, “your” and “yours” refer to the Insured. “We”, “us” and “our” refer to the company providing the coverage. In addition certain words and phrases are defined as follows:

Accident means a sudden, unexpected, unintended and external event, which causes Injury.

Actual Cash Value means purchase price less depreciation.

Air Flight Common Carrier means any air conveyance operated under a license for the transportation of passengers for hire.

Baggage means luggage, personal possessions and travel documents taken by you on the Covered Vacation.
Business Partner means an individual who is involved, as a partner, with you in a legal general partnership and shares in the management of the business.

Common Carrier means any land, water or air conveyance operated under a license for the transportation of passengers for hire.

Covered Vacation means a period of travel away from Home to a destination outside your city of residence; the purpose of the Vacation is business or pleasure and is not to obtain health care or treatment of any kind; the Vacation has defined departure and return dates specified when the Insured enrolls; the Vacation does not exceed 6 months.

Domestic Partner means a person who is at least eighteen years of age and you can show: 1) evidence of financial interdependence, such as joint bank accounts or credit cards, jointly owned property, and mutual life insurance or pension beneficiary designations; 2) evidence of cohabitation for at least the previous 6 months; and 3) an affidavit of domestic partnership if recognized by the jurisdiction within which they reside.

Elective Treatment and Procedures means any medical treatment or surgical procedure that is not medically necessary including any service, treatment, or supplies that are deemed by the federal, or a state or local government authority, or by us to be research or experimental or that is not recognized as a generally accepted medical practice.

Home means your primary or secondary residence.

Hospital means an institution, which meets all of the following requirements:
1. it must be operated according to law;
2. it must give 24 hour medical care, diagnosis and treatment to the sick or injured on an inpatient basis;
3. it must provide diagnostic and surgical facilities supervised by Physicians;
4. registered nurses must be on 24 hour call or duty; and
5. the care must be given either on the hospital’s premises or in facilities available to the hospital on a pre-arranged basis.

A Hospital is not: a rest, convalescent, extended care, rehabilitation or other nursing facility; a facility which primarily treats mental illness, alcoholism, or drug addiction (or any ward, wing or other section of the hospital used for such purposes); or a facility which provides hospice care (or wing, ward or other section of a hospital used for such purposes).

Immediate Family Member includes your or the Traveling Companion’s spouse, child, spouse’s child, son-daughter-in-law, parent(s), sibling(s), grandparent(s), grandchild, step brother-sister, step-parent(s), parent(s)-in-law, brother-sister-in-law, aunt, uncle, niece, nephew, guardian, Domestic Partner, foster-child, or ward.

Injury means bodily harm caused by an accident which: 1) occurs while your coverage is in effect under the plan; and 2) requires examination and treatment by a Physician. The Injury must be the
direct cause of loss and must be independent of all other causes and must not be caused by, or result from, Sickness.

**Insured** means an eligible person who arranges a Covered Vacation and pays any required plan payment.

**Insurer** means Transamerica Casualty Insurance Company.

**Other Valid and Collectible Group Insurance** means any group policy or contract which provides for payment of medical expenses incurred because of Physician, nurse, dental or Hospital care or treatment; or the performance of surgery or administration of anesthesia. The policy or contract providing such benefits includes group or blanket insurance policies; service plan contracts; employee benefit plans; or any plan arranged through an employer, labor union, employee benefit association or trustee; or any group plan created or administered by the federal or a state or local government or its agencies. In the event any other group plan provides for benefits in the form of services in lieu of monetary payment, the usual and customary value of each service rendered will be considered a Covered Expense.

**Payments or Deposits** means the cash, check, or credit card amounts actually paid to the Policyholder for your Covered Vacation.

**Physician** means a person licensed as a medical doctor by the jurisdiction in which he/she is a resident to practice the healing arts. He/she must be practicing within the scope of his/her license for the service or treatment given and may not be you, a Traveling Companion, or an Immediate Family Member of yours.

**Policy** means the contract issued to the Policyholder providing the benefits specified herein.

**Policyholder** means the legal entity in whose name this Policy is issued, as shown on the benefit Schedule.

**Program Medical Advisors** means On Call International.

**Quarantined** means the isolation of a person afflicted with or exposed to a communicable disease, the purpose being to prevent the spread of disease.

**Schedule** means the benefit schedule shown on the Description of Coverage for each Insured.

**Scheduled Departure Date** means the date on which you are originally scheduled to leave on your Covered Vacation.

**Scheduled Return Date** means the date on which you are originally scheduled to return to the point where the Covered Vacation started or to a different final destination.

**Scheduled Vacation Departure City** means the city where the scheduled trip on which you are to participate originates.

**Sickness** means an illness or disease of the body which:
1) requires examination and treatment by a Physician, and
2) commences while the plan is in effect.

**Traveling Companion** means one person whose name appears with you on the same Vacation arrangement and who, during the Vacation, will accompany you.
Usual and Customary Charge means those charges for necessary treatment and services that are reasonable for the treatment of cases of comparable severity and nature. This will be derived from the mean charge based on the experience in a related area of the service delivered and the MDR (Medical Data Research) schedule of fees valued at the 90th percentile.

Vacation means a scheduled trip for which coverage has been elected and the plan payment paid, and all travel arrangements are arranged by the Policyholder prior to the Scheduled Departure Date of the trip.

General Plan Exclusions

In Parts A & B:
We will not pay for any loss caused by or incurred resulting from:

1. mental, nervous, or psychological disorders, except if hospitalized;
2. being under the influence of drugs or intoxicants, unless prescribed by a Physician;
3. normal pregnancy, except if hospitalized; or elective abortion;
4. riding or driving in any motor competition;
5. declared or undeclared war, or any act of war;
6. service in the armed forces of any country;
7. operating or learning to operate any aircraft, as pilot or crew;
8. any unlawful acts, committed by you or a Traveling Companion (whether insured or not);
9. any amount paid or payable under any Worker’s Compensation, Disability Benefit or similar law;
10. Elective Treatment and Procedures;
11. medical treatment during or arising from a Covered Vacation undertaken for the purpose or intent of securing medical treatment;
12. business, contractual or educational obligations of you, an Immediate Family Member or Traveling Companion;
13. failure of any tour operator, Common Carrier, or other travel supplier, person or agency to provide the bargained-for travel arrangements;
14. a loss that results from an illness, disease, or other condition, event or circumstance which occurs at a time when the plan is not in effect for you.

In Part C:
Items Not Covered
We will not pay for damage to or loss of:

1. a loss or damage caused by detention, confiscation or destruction by customs;
2. animals;
3. property used in trade, business or for the production of income, household furniture, musical instruments, brittle or fragile articles, or sporting equipment if the loss results from the use thereof;
4. artificial limbs or other prosthetic devices, artificial teeth,
dental bridges, dentures, dental braces, retainers or other orthodontic devices, hearing aids, any type of eyeglasses, sunglasses or contact lenses;
5. documents or tickets, except for administrative fees required to reissue tickets;
6. money, stamps, stocks and bonds, postal or money orders, securities, accounts, bills, deeds, food stamps or credit cards,
7. property shipped as freight or shipped prior to the Scheduled Departure Date.

Losses Not Covered
We will not pay for loss arising from:
1. theft or pilferage from an unattended vehicle;
2. mysterious disappearance.

In Part D:
The following exclusions apply to the Accidental Death and Dismemberment coverage:
1. We will not pay for loss caused by or resulting from Sickness of any kind.
2. You, your Traveling Companion’s, or Immediate Family Member’s booked to travel with you, suicide, attempted suicide, or intentionally self-inflicted injury, while sane or insane (while sane in CO & MO);
3. participation as a professional in athletics;
4. participation in organized amateur and interscholastic athletic or sports competition or events;
5. riding or driving in any motor competition;
6. nuclear reaction, radiation or radioactive contamination;
7. mountain climbing, bungee cord jumping, skin diving, scuba diving, snow skiing, skydiving, parachuting, hang gliding, parasailing or travel on any air supported device, other than on a regularly scheduled airline or air charter company.

Term of Coverage
When Coverage Begins
All coverages (except Pre-Departure Trip Cancellation and Post-Departure Trip Interruption) will take effect on the later of:
1) the date the plan payment has been received by the Policyholder; 2) the date and time you start your Covered Vacation; or 3) 12:01 A.M. Standard Time on the Scheduled Departure Date of your Covered Vacation.
Pre-Departure Trip Cancellation coverage will take effect at 12:01 A.M. Standard Time on the day your plan payment is received by the Policyholder. Post-Departure Trip Interruption coverage will take effect on the Scheduled Departure Date if the required plan payment is received.

When Coverage Ends
Your coverage automatically ends on the earlier of:
1. the date the Covered Vacation is completed;
2. the Scheduled Return Date;
3. your arrival at the return destination on a round-trip, or the
destination on a one-way trip;
4. cancellation of the Covered Vacation covered by the plan.

Claims Procedure

1. Emergencies Arising During Your Vacation: Please refer to Part E. Worldwide Emergency Assistance.
2. Trip Cancellation Claims: Contact the Policyholder and Aon Affinity IMMEDIATELY to notify them of your cancellation and to avoid any non-covered expenses due to late reporting. Aon Affinity will then forward the appropriate claim form which must be completed by you AND THE ATTENDING PHYSICIAN, if applicable. If you are cancelling due to a death, a death certificate will be required.
3. All Other Claims: Report your claim as soon as possible to Aon Affinity. Provide the policy number, your travel dates, and details describing the nature of your loss. Upon receipt of this information, Aon Affinity will promptly forward you the appropriate claim form to complete. If you are interrupting due to a death, a death certificate will be required.

Online: www.travelclaim.com
Phone: 1-(800) 453-4079 or 1-(516) 342-2720
Mail: Aon Affinity
300 Jericho Quadrangle, P.O. Box 9022,
Jericho, NY 11753
Office Hours: 8:00 AM - 10:00 PM ET, Monday - Friday;
9:00 AM - 5:00 PM ET, Saturday

Important: In order to facilitate prompt claims settlement upon your return, be sure to obtain as applicable:

Accident & Sickness Medical Claims: receipts from the treating Physicians, etc. stating the amounts paid and listing the diagnosis and treatment; submit these first to your other medical plans. Forward a copy of their final disposition of your claim to Aon Affinity.

Your duties in the event of a Medical or Dental Expense:
1. You must provide us with all bills and reports for medical and/or dental expenses claimed.
2. You must provide any requested information, including but not limited to, an explanation of benefits from any other applicable insurance.
3. You must sign a patient authorization to release any information required by us, to investigate your claim.
4. You must receive initial treatment within 90 days of the accident, which caused the Injury or the onset of the Sickness.

Your duties in the event of a Trip Interruption & Trip Delay Claims:
Medical statements from the Physicians in attendance in the country where the Sickness or Injury occurred. These statements should give complete diagnosis, stating that the Sickness or Injury prevented traveling on dates contracted. Or, verification of the Common Carrier’s mechanical or scheduling problems,
or verification of other covered reason causing delay. Provide all unused transportation tickets, official receipts, etc.

Your duties in the event of a Baggage Delay Claims:
Verification by the Air Common Carrier representative, who must certify the delay or misdirection, including dates of loss and return. Note that receipts for any additional covered expenses will be required, as well as verification of any delay.

Your duties in the Event of a Baggage/Personal Effects Loss:
In case of loss, theft or damage to Baggage and Personal Effects, you should: 1) immediately report the situation incident to the hotel manager, tour guide or representative, transportation official, local police or other local authorities and obtain their written report of your loss; and 2) take reasonable steps to protect your Baggage from further damage, and make necessary, reasonable and temporary repairs. We will reimburse you for these expenses. We will not pay for further damage if you fail to protect your Baggage. Submit claim first to party responsible, as well as your regular property insurer. Forward copies of the outcome of your claim to Aon Affinity with the appropriate documentation, including copies of receipts for the lost, stolen, or damaged articles, if available.

Enrollment Procedure
Simply select the Package Protection Plan option when booking your Vacation and pay the amount indicated on your travel invoice inclusive of the plan cost. You are enrolled upon the Policyholder’s receipt of payment for the applicable plan cost (in addition to the amount due for your Vacation deposit and/or final balance).

Please note: Payment for the plan may not be accepted after the Vacation cost has been paid in full.

You are not required to purchase the Expedia Package Protection Plan in order to purchase either the Expedia Cancellation Fee Waiver (Section I of this plan) or the insurance product (Section II of this plan). The Expedia Cancellation Fee Waiver may be purchased exclusively through Expedia (on the Billing and Delivery page of the Expedia website) when purchasing your vacation package. The insurance product may be purchased independently by calling Aon Affinity at 1-800-797-2293 after booking your Expedia vacation package.

This plan was designed and is administered by Aon Affinity.

Aon Affinity is the brand name for the brokerage and program administration operations of Affinity Insurance Services, Inc. (TX 13695); (AR 244489); in CA & MN, AIS Affinity Insurance Agency, Inc. (CA 0795465); in OK, AIS Affinity Insurance Services, Inc.; in CA, Aon Affinity Insurance Services, Inc. (CA 0G94493), Aon Direct Insurance Administrators and Berkely Insurance Agency and in NY, AIS Affinity Insurance Agency. Affinity Insurance Services is acting as a Managing General Agent as that term is defined in section 626.015(14) of the Florida Insurance Code. As an MGA we are acting on behalf of our carrier partner.
For additional information regarding the plan, call 1-800-453-4079 or 1-516-342-2720 or email: expedia@aon.com

Office hours: 8 AM – 10 PM ET, Monday – Friday, 9 AM – 5 PM ET, Saturday

General Provisions

Our Right To Recover From Others
We have the right to recover any payments we have made from anyone who may be responsible for the loss. You and anyone else we insure must sign any papers and do whatever is necessary to transfer this right to us. You and anyone else we insure will do nothing after the loss to affect our right.

Claims Provisions

Payment of Claims Claims for benefits provided by the plan will be paid as soon as written proof is received.
Benefits for loss of life will be paid to your estate, or if no estate, to your beneficiary. All other benefits are paid directly to you, unless otherwise directed. Any accrued benefits unpaid at your death will be paid to your estate, or if no estate, to your beneficiary. If you have assigned your benefits, we will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment.

Travel Insurance is underwritten by Transamerica Casualty Insurance Company, Columbus, Ohio; NAIC # 10952 (all states except as otherwise noted) under Policy/Certificate Form series TAHC5000. In CA, HI, NE, NH, PA, TN and TX Policy/Certificate Form series TAHC5100 and TAHC5200. In IL, IN, KS, LA, OH, OR, VT, WA and WY Policy Form #’s TAHC5100IPS and TAHC5200IPS. Certain coverages are under series TAHC6000 and TAHC7000.

This is a brief Description of Coverage which outlines benefits and amounts of coverage that may be available to you. If you are a resident of one of the following states (IL, IN, KS, LA, OH, OR, VT, WA or WY), your Policy is provided on an individual form. To obtain a copy of your Individual Policy or Group Certificate for all states based on your state of residence, or information regarding the insurance premium portion of your plan cost, visit http://www.affinitytravelcert.com or call 1-800-453-4090. Your Individual Policy or Group Certificate will govern the final interpretation of any provision or claim. For Maryland residents only, to file a complaint with the Maryland Department of Insurance, call 1-800-492-6116 or visit www.mdinsurance.state.md.us.

This plan provides cancellation coverage for your trip and other insurance coverages that apply only during the covered trip. You may have coverage from other sources that provides you with similar benefits but may be subject to different restrictions depending upon your other coverages. You may wish to compare the terms of this policy with your existing life, health, home and automobile policies. If you have any questions about your current coverage, call your insurer, insurance agent or broker. The purchase of this plan is not required in order to purchase any other travel product or service offered to you by your travel retailers. Unless individually licensed as an insurance agent, your travel agent is not qualified or authorized to answer your technical questions about the benefits, exclusions or conditions of this plan or to evaluate the adequacy of any
existing insurance coverage you may have. Questions should be directed to the plan administrator at the toll-free number provided.

**Ten Day Right To Examine**
If you are not satisfied for any reason, you may cancel the travel insurance portion of your coverage within 10 days of your receipt of this document. Your premium will be refunded, provided there has been no incurred covered expense and you have not departed on your Covered Vacation. When so returned, the coverage is void from the beginning. Request a refund in writing by providing your contact information as well as a copy of your plan description to our authorized agent, Aon Affinity, 300 Jericho Quadrangle, P.O. Box 9022, Jericho, NY 11753.