Sister Cities International General Exchange Insurance Plan

Eligibility: All SISTER CITIES INTERNATIONAL General Exchange participants may enroll in the plan on a group basis. A group may be as small as a single individual, but 100% of the group must be insured.

Period of Coverage: Coverage begins the latest of 12:01 A.M. Eastern Standard time on the home country departure date, the date requested on the enrollment form or the date the Enrollment Form and premium are received by Collegiate Risk Management. Coverage ends upon expiration of period for which premium has been paid or upon arrival in the Insured Person's home country.

How to enroll your group: Complete a Sister Cities International General Exchange Insurance Plan Enrollment Form and mail with payment. The printable enrollment form can be found at www.collegiaterisk.com under our products section. If you have an urgent enrollment, please call Collegiate Risk Management at 1-866-931-9560.

Synopsis of the Sister Cities Plan Benefits	
Medical Benefits	$50 deductible (All Cause), then 100% to $50,000
Emergency Medical Evacuation & Repatriation	Up to $25,000
Accidental Death	$10,000
Assistance Services	On Call 866-509-7715 in USA or collect 603-898-9159

Below is a *portion* of the Eligible Charges:

(Contact Collegiate Risk Management for policy specifics)

- **Hospital Expenses** for average semi-private room and board; and Reasonable and Customary (R&C) charges. Charges made by a hospital for room and board, floor nursing and other services inclusive of charges for professional services and with the exception of personal services of a non-medical nature provided that expenses do not exceed the hospital's average for semi-private room and board accommodations. Also, charges made for the diagnosis, treatment and surgery by a Physician; cost of administration of anesthetics; prescriptions and medication, x-ray services, laboratory tests and services, the use of radium and radioactive isotopes, oxygen, blood transfusion, iron lungs, and medical treatment.

- **Dental** Accidental Dental limit per policy period per insured $100 per tooth to a maximum of $250; Palliative Dental limit per policy period per insured person to a maximum of $100.

- **Charges for physiotherapy**, if recommended by a Physician for treatment of a specific disablement and administered by a licensed physiotherapist are included. Limit 10 visits per Injury or Illness.

- **Charges are included for dressings, prescription drugs and medicines**, are covered only if prescribed by a Physician in relation to a covered injury or Illness. Prescriptions must be paid for at the Pharmacy and then receipts must be submitted with a claim form, in order for you to be reimbursed.

- **Spinal Manipulation** Outpatient Limit per Policy Period Per Insured Person $1,000 up to $50 per Outpatient Visit to a Maximum of 20 visits.

- **Emergency Medical Evacuation** up to $25,000.00 (pre-approval required) for insured persons or covered dependent who becomes ill or injured during the period of coverage: If an Emergency Medical Evacuation is required to the nearest medical facility where appropriate medical treatment can be obtained or to the insured person's home country of country of residence all eligible expenses up to $*25,000.00* are covered. An Emergency Medical Evacuation must be recommended by a legally licensed Physician who certifies that the severity of the Injury or Illness necessitates such an Emergency Medical Evacuation, and approved in advance by The Insurance Company.

Eligible Charges (cont.)

- **Repatriation of Remains** if an Injury or Illness commencing during the period of coverage result in death, all reasonable expenses incurred for preparation and return to the insured person's Home Country are covered up to *$25,000.00.* (Pre-approval is required.)

- **Emergency Reunion** in the event of an Emergency Medical Evacuation due to a covered Injury or Illness, where the Physician feels that it would be beneficial for you to have a family member at your side during transport, you will be reimbursed for travel and lodging expenses, for that relative up to $10,000, provided that all travel arrangements are coordinated in advance by the assistance provider. Benefits payable include economy air ticket and other travel related expenses not to exceed
  $ 250.00 a day for a maximum of five days.

- **Accidental Death and Dismemberment** Insurance is afforded to an Insured Person which will apply only to Injury, as defined in Section III, Definitions, sustained by such Insured Person during the course of coverage. Such Insurance includes such Injury which occurs during the course of time the Insured Person is covered under the Policy; The Company will pay an indemnity determined from Section II Schedule of Benefits, Accidental Death and Dismemberment, Table of Losses, if an Insured Person sustains a Loss stated therein resulting from Injury, provided that: 1) such Loss occurs within 90 days after the date of Accident causing such Loss; and 2) the indemnity payable for any such Loss will be the Principal Sum stated in Section II, Schedule of Benefits, Accidental Death and Dismemberment, Principal Sum, as applicable to such Insured Person and this Insurance; and 3) if more than one Loss stated in said Table is sustained as the result of one Accident, only one of the amounts so stated in said Table, the largest, will be payable.

Definitions

Pre-existing condition: For the purposes of this Policy means Any Injury or Illness which meets the following criteria 1) A condition that would have caused a person to seek medical advice, diagnosis, care or treatment during the *6 month* prior to the Effective Date of coverage under this Policy; 2) a condition for which manifestation, medical advice, diagnosis, care or treatment was recommended, received or noticed during the *6 month* prior to the Effective Date of coverage under this Policy.

Home Country: the country where an Insured Person has his or her true, fixed and permanent home and principal establishment.

Hospital: as used in this Policy means except as may otherwise be provided, a Hospital (other than an institution for the aged, chronically ill or convalescent, resting or nursing homes) operated pursuant to law for the care and treatment of sick or Injured persons with organized facilities for diagnosis and Surgery and having 24-hour nursing service and medical supervision. Hospital does not mean: a convalescent, nursing, or rest home or facility, or a home for the aged; a place mainly providing custodial, educational, or rehabilitative care; or a facility mainly used for the treatment of drug addicts or alcoholics.

Illness: wherever used in this Policy means sickness or disease of any kind contracted and commencing after the Effective Date of this Policy and Disablement covered by this Policy.

Injury: wherever used in this Policy means Accidental bodily Injury or Injuries caused by an Accident. The Injury must be the direct cause of the Loss, independent of disease or bodily infirmity. Any Loss due to Injury must begin after the Effective Date of this Policy.

Physician: as used in this Policy means a doctor of medicine or a doctor of osteopathy licensed to render medical services or perform Surgery in accordance with the laws of the jurisdiction where such professional services are performed, however, such definition will exclude chiropractors and physiotherapists.

(Exclusions on next page)

Exclusions

With respect for the Accidental Death and Dismemberment, this Insurance does not cover:

- Suicide or attempt thereof by the Insured Person while sane or self destruction or any attempt thereof by the Insured Person while insane;
- Injury sustained while the Insured Person is riding as a pilot, student pilot, operator or crew member, in or on, boarding or alighting from, any type of aircraft;
- Injury sustained while the Insured Person is riding as a passenger in any aircraft (a) not having a current and valid Airworthy Certificate and (b) not piloted by a person who holds a valid and current certificate of competency for piloting such aircraft;
- Any consequence, whether directly or indirectly, proximately or remotely occasioned by, contributed to by, or traceable to, or arising in connection with: a) war, invasion, act of foreign enemy hostilities, warlike operations (whether war be declared or not), or civil war. b) mutiny, riot, strike, military or popular uprising insurrection, rebellion, revolution, military or usurped power. c) any act of any person acting on behalf of or in connection with any organization with activities directed towards the overthrow by force of the Government de jure or de facto or to the influencing of it by terrorism or violence. d) martial law or state of siege or any events or causes which determine the proclamation or maintenance of marital law or state of siege (hereinafter for the purposes of this Exclusion called the "Occurrences");
- Service in the military, naval or air service of any country;
- Flying in any aircraft being used for or in connection with acrobatic or stunt flying, racing or endurance tests;
- Being under the influence of alcohol or having taken drugs or narcotics unless prescribed by a legally qualified Physician or surgeon;
- Injury occasioned or occurring while the Insured Person is committing or attempting to commit a felony or to which a contributing cause was the Insured Person being engaged in an illegal occupation; and
- While riding or driving in any kind of competition.

With respect to Accident & Sickness Medical, Dental, Spinal Manipulation, Emergency Medical Evacuation/Repatriation, Return of Mortal Remains or Cremation, this Insurance does not cover:

- Pre-Existing Conditions, as defined in the Definitions section;
- Injury or Illness which is not presented to the Company for payment within 6 months immediately following the Incident or Benefit Period;
- Charges for treatment which is not Medically Necessary;
- Charges provided at no cost to the Insured Person;
- Charges incurred for Surgery or treatments which are, Experimental/Investigational, or for research purposes;
- Suicide or any attempt thereof, while sane or self destruction or any attempt thereof, while sane;
- Any consequence, whether directly or indirectly, proximately or remotely occasioned by, contributed to by, or traceable to, or arising in connection with: a) war, invasion, act of foreign enemy hostilities, warlike operations (whether war be declared or not), or civil war. b) mutiny, riot, strike, military or popular uprising insurrection, rebellion, revolution, military or usurped power. c) any act of any person acting on behalf of or in connection with any organization with activities directed towards the overthrow by force of the Government de jure or de facto or to the influencing of it by terrorism or violence. d) martial law or state of siege or any events or causes which determine the proclamation or maintenance of marital law or state of siege (hereinafter for the purposes of this Exclusion called the "Occurrences");
- Injury sustained while participating in professional athletics;
- Injury sustained while participating in Amateur or Interscholastic Athletics; unless otherwise covered under the Policy in Section II Schedule of Benefits;
- Routine physicals, immunizations or other examinations where there are no objective indications or impairment in normal health, and laboratory diagnostic or x-ray examinations, except in the course of a Disablement established by a prior call or attendance of a Physician unless otherwise covered under this Policy;
- Services or supplies performed or provided by a Relative of the Insured Person, or anyone who lives with the Insured Person;
- Cosmetic or plastic Surgery, except as the result of a covered Accident; for the purposes of this Policy, treatment of a deviated nasal septum will be considered a cosmetic condition;
- Eye refractions or eye examinations for the purpose of prescribing corrective lenses for eye glasses or for the fitting thereof, unless caused by Accidental bodily Injury incurred while insured hereunder;
- Congenital abnormalities and conditions arising out of or resulting therefrom, unless otherwise covered under this Policy;
- Expenses as a result or in connection with intentionally self-inflicted Injury or Illness;
- Expenses as a result or in connection with the commission of a felony offense;

Exclusions (cont.)

- Treatment paid for or furnished under any other individual or group policy or other service or medical pre-payment plan arranged through the employer to the extent so furnished or paid, or under any mandatory government program or facility set up for treatment without cost to any individual;
- Injuries for which benefits are payable under any no-fault automobile Insurance Policy;
- Dental care, except as the result of Injury to natural teeth caused by Accident, unless otherwise covered under this Policy;
- Drug, treatment or procedure that either promotes or prevents conception, or prevents childbirth, including but not limited to: artificial insemination, treatment for infertility or impotency, sterilization or reversal thereof, or abortion limited to $500;
- Duplicate services actually provided by both a certified nurse-midwife and a Physician;
- Injury sustained as the result of the Injured Person operating a motor vehicle while not properly licensed to do so in the jurisdiction in which the motor vehicle accident takes place;
- Private-duty nursing services;
- Sex change operations, or for treatment of sexual dysfunction or sexual inadequacy;
- Weight reduction programs or the surgical treatment of obesity;
- Any Mental and Nervous disorders or rest cures;
- For Pregnancy or Illness resulting from Pregnancy, childbirth, or miscarriage; and
- For miscarriage resulting from Accident.

NOTE! This is just a brief explanation of Insurance benefits. The Master Policy will prevail on any discrepancies between this summarization and the Master Policy.