SHORT-TERM TRAVEL—POLICY SUMMARY FOR POLICY GLM N06531118

NOTE: This is only a summary of the Plan benefits and does not cover all the terms, conditions and limitations.

PERSONS ELIGIBILITY FOR COVERAGE

This coverage is for individuals in the Classes below on official business and/or sponsored (approved) travel by the Seventh-day Adventist Church who have paid the premium for each benefit and coverage.

Class I (PLAN A and PLAN A Enhanced) Insured - Employee, Retiree or Approved Volunteer whose names are on file with the Participating Organization while traveling worldwide except to destinations in the continental United States and Canada.

Class I Insured - Spouse of Class I Insured

Class I Insured - Dependent Child of Class I Insured

Class II (PLAN B and PLAN B Enhanced) Insured - Employee, Retiree or Approved Volunteer whose names are on file with the Participating Organization while traveling worldwide.

Class II Insured - Spouse of Class II Insured

Class II Insured - Dependent Child of Class II Insured

Plans cover travel worldwide and includes coverage for limited vacation and travel when combined with a business or sponsored travel. Vacation travel only is available to the Employee or Retiree. *This Policy provides in Home Country benefits for accident medical losses to a policy maximum of \$30,000 or a maximum benefit period of 90 days, or the first to occur. Benefits are payable under the policy only if there Covered Expenses are not payable under any other domestic health care plan.*

ACCIDENTAL DEATH & DISMEMBERMENT

Aggregate Limit - \$10,000,000 per covered accident.

CLASS I PLAN A Limit – \$5,000 CLASS II PLAN B Limit – \$10,000

CLASS I PLAN A ENHANCED Limit – \$100,000 CLASS II PLAN B ENHANCED Limit – \$100,000

A description of covered loss is available in the Description of Coverage.

MEDICAL EXPENSE BENEFIT

CLASS I PLAN A Limit – \$140,000 CLASS II PLAN B Limit – \$280,000

CLASS I PLAN A ENHANCED Limit – \$500,000 CLASS II PLAN B ENHANCED Limit – \$500,000

Medical Expense Benefits:

Medical Expense Benefits are payable for Covered Expenses that results directly, and from no other cause, from a Covered Accident or Sickness. These benefits are subject to the Deductibles, Co-insurance Rate, Maximum Benefit Period, benefit Maximum, and other terms or limits shown in the Schedule of Benefit, in the Description of Coverage.

This Policy provides in Home Country benefits for accident medical losses to a policy maximum of \$30,000 or a maximum benefit period of 90 days, or the first to occur. Benefits are payable under the policy only if there Covered Expenses are not payable under any other domestic health care plan.

PERSONAL EFFECTS/ BAGGAGE

CLASS I PLAN A Limit – \$1,500 CLASS II PLAN B Limit – \$3,000 CLASS I PLAN A ENHANCED Limit – \$3,000 CLASS II PLAN B ENHANCED Limit – \$3,000

Deductible per Trip:\$25

The Covered person must demonstrate that he or she has taken reasonable precautions for the safety and security of any covered property, and the Company requires certification by a police or security authority in an incident report.

EMERGENCY EVACUATION AND REPATRIATION

Included in all Classes and Plans 100 % of Covered Expenses

EMERGENCY REUNION BENEFIT

Benefit Maximum: \$5,000

CHAPERONE REPLACEMENT BENEFIT

Benefit Maximum: \$5,000

HOME COUNTRY EMERGENCY BENEFIT

Benefit Maximum: Up to the Medical Expense Benefit Maximum with a Maximum Benefit Period of 52

weeks.

HOME COUNTRY EXTENSION BENEFIT

Benefit Maximum: Up to \$30,000 for a covered accident with a Maximum Benefit Period of 90 days.

HOSPITAL CONFINEMENT BENEFIT

Daily Benefit \$200; Time Period of Confinement - 25 days; Benefit Waiting Period -5 days; Maximum Benefit Period -365 days.

TRIP CANCELLATION and INTERRUPTION BENEFIT

All Plans include a \$1,000 benefit per policy term.

OPTIONAL TRIP CANCELLATION & TRIP INTERRUPTION PURCHASE

Additional Trip Cancellation & Trip Interruption | \$500 Limit | \$1,000 Limit | \$1,400 Limit

This coverage is an option you can choose to purchase an additional trip cancellation and trip interruption (in addition to the \$1,000 included in the policy) for the amount stated above.

<u>DEDUCTIBLE</u>

A deductible of \$25 will apply on all Personal Effects/Baggage losses.

WAR RISK

War risk coverage is not available in the United States, the Covered Person's Home Country, the Covered Person's Country of Permanent Assignment, Specific Countries to include Afghanistan, Iran, Iraq, Israel(West bank and Gaza), Pakistan, Democratic Republic of Congo, Libya, Nigeria, Somalia, Sudan, Syria, Yemen. To request War Risk coverage while traveling to the Specific Countries, please contact Adventist Risk Management's Customer Care Department at least two weeks prior to the trip date.

OFAC

Any payments under the policy will only be made in full compliance with all United States of America economic or trade sanction laws or regulations, including, but not limited to, sanctions, laws and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"). Therefore, any expenses incurred or claims made involving travel that is in violation of such sanctions, laws and regulations will not covered under the policy. For more information you may consult the OFAC internet website at www.treas.gov/offices/enforcement/ofac/

ASSISTANCE SERVICE

Assistance Services are provided by Europ Assist:

The company will provide assistance to the eligible person to obtain the following services (this is not an exhaustive list of services):

- 1) Medical Monitoring
- 2) Medical Referrals
- 3) Emergency Medical Payments
- 4) Medical Evacuation and Repatriation
- 5) Family Reunion travel Arrangements
- 6) Location of lost items
- 7) Legal Assistance
- 8) Interpretation/Translation