1

Guide to Benefits

World Elite Mastercard ® Credit Cardholders

Important information. Please read and save.

This Guide to Benefits contains detailed information about the benefits you can access as a preferred cardholder. This Guide supersedes any guide or program description you may have received earlier

Important: Contact your card-issuing financial institution directly for questions concerning your account, such as account balance, credit line, billing inquiries (including transaction exchange rates), merchant disputes, or information about additional services not described in this Guide. Your financial institution's phone number should be available on your monthly billing statement or on the back of your card.

For more information on any of these services, call the Mastercard Assistance Center at 1-800-Mastercard: 1-800-627-8372, or en Espanol: 1-800-633-4466. "Card" refers to World Elite Mastercard® card and "Cardholder" refers to a World Elite Mastercard® Cardholder.

World Elite Mastercard Merchant Benefits

Enjoy exclusive benefits provided by our merchange partners accross safety & security, everyday value, and travel & experiences.

Terms, conditions and exclusions apply. Merchant benefits may be subject to change without prior notice. Please visit www.mastercard.com/worldelite for the lastest list of merchant benefits and applicable terms & conditions.

MASTERCARD ID THEFT PROTECTION™

Program Description:

Mastercard ID Theft Protection alerts you to possible identity theft by monitoring the surface, dark and deep web, searching for compromised credentials and potentially damaging use of your registered personal information. It also provides you with resolution services should you find yourself a victim of identity theft.

Eligibility: All Mastercard consumer credit cardholders in the US are eligible for this coverage. Enrollment is required.

Service provider: ID Theft Protection is provided by a service provider. More information about this service provider is available at: https://mastercardus.idprotectiononline.com/.

Access:To receive ID Theft Protection, you must enroll at: https://mastercardus.idprotectiononline.com/. ID Theft Protection is provided on a 24-hour basis, 365 days a year. Contact 1-800-Mastercard if you believe you have been a victim of identity theft.

Charges: There is no charge for ID Theft Protection, it is provided by your your financial institution.

Program provisions for Mastercard ID Theft Protection: To receive ID Theft Protection, you must enroll as described above and such benefits related to ID Theft Protection accrue as of the date of enrollment.

Mastercard ID Theft Protection is governed by the terms provided in this Guide to Benefits and the Terms and Conditions and Terms of Service available at: https://mastercardus.

idprotectiononline.com/.

The terms and conditions contained in this Guide to Benefits may be modified by subsequent mailings, statement inserts, or statement messages.

Mastercard or your financial institution can cancel or non-renew these services, and if we do, we will notify you at least thirty (30) days in advance. If the provider non-renews or cancels any services provided to eligible Mastercard cardholders, you will be notified within 30–120 days before the expiration of the service agreement.

In the event substantially similar service takes effect without interruption, no such notice is necessary

For general questions regarding these services, please contact 1-800-Mastercard or please see https://mastercardus.idprotectiononline.com/.

ID Theft Protection Services Provided:

1. DETECT POTENTIAL IDENTITY AND FRAUD THREATS

Personally Identifiable Information (PII)

Compromised Credentials monitors for a combination of email address /username /password /security questions located within:

- Hacker account dump sites
- Hacktivist forums
- Data leaks
- · Malware logs

Alerts are sent with event details, also listed within resolution console and most often includes source of breach (from where the data was harvested). High-Risk Transactions monitors a Consumer's high-risk transactions with more than 300 of the nation's largest companies to uncover and thwart account takeover attempts. Knowledge-Based Authentication (questions only an individual should know about themselves such as what street they lived on in 2009) used by organizations across industries limits the risk of identity theft or account takeover. Alerts are sent when a series of knowledge-based authentication questions are generated to validate the Consumer's identity (i.e. when accessing a credit report). Monitored transactions include:

- Credit cards
- Bank accounts
- Brokerage accounts
- · Healthcare portals
- Workplace intranets
- Other services (e.g. peer-to-peer fund transfers)

Dark Web Monitoring provides monitoring of underground webpages people can visit without third parties being able to trace the location of the web visitors or the webpage publisher. Dark web sites make up about .01% of the Internet and are intentionally hidden or protected by encryption technologies and not accessible via standard web browsers.

Credit Information

Single Bureau Credit Monitoring monitors a Consumer's TransUnion credit file for changes that could indicate fraud such as new credit inquiries, an address change or new credit account(s) opened in their name. In order to use this service, Consumers must provide some personal information, such as name, address, date of birth, and SSN, and undergo either digital verification via text or knowledge-based authentication. ID Theft Protection sends alert notification emails, such as change of address alerts, anytime potentially unauthorized inquiries or suspicious activities on Consumers credit file are detected so they can take immediate action to minimize damage.

Additional Information Small Business ID Theft Protection upgrades ID Theft Protection identity monitoring services by adding URL and Domain monitoring to the existing list of monitored items. URL and Domain monitoring searches for the Consumer's business URL and domain (limited to 10 domains) within corporate data breaches, malicious third-party botnets and criminal forums.

2. RECEIVE ALERTS OF SUSPICIOUS ACTIVITY

- · Email Addresses
- Debit/Credit Cards
- · Loyalty/Affinity Cards
- Bank Account Numbers
- Passport Numbers
- Medical and Vehicle Insurance Cards
- Driver's Licenses
 National Identity
- National Identity Numbers/Social Security Numbers
- New Lines of Credit
- Address Changes

3. RESOLVE IDENTITY THREATS WITH SELF-SERVICE RESOLUTION OR SPECIALIST SUPPORT

Self-Service ID Theft Resolution Kit is a self-service resolution document which informs Consumers of the different forms of ID theft, and how to resolve each situation. Resolution tools in the kit include preventive measures, step-by-step guides and sample letters to be sent to collection agencies.

Access to Resolutions Specialists which assigns a personal case manager to help take care of everything.

Self-service ID Theft Wizard provides step-by-step advice for many identity theft scenarios that Cardholders may face. All ID Theft Protection users have access to the Identity Theft Protection Kit found in the Profile section of their portal, which explains the many forms of identity theft and provides protective measures anyone can take to limit their risk. The kit also contains a Federal Trade Commission sample affidavit form, as well as sample letter templates for filing disputes in cases of identity theft or fraud.

Online Fraud Alerts allow Consumers to place a statement on their credit report that instructs lenders to contact the Consumer before issuing new credit. This makes it more difficult for an identity thief to open new accounts in their name. When Consumers place a fraud alert with one bureau, the other two bureaus are informed, and the alert is then placed on all three bureau files. Fraud alert placement is free, and alerts stay on the Consumer credit files for one year.

MASTERCARD GLOBAL SERVICE™;

Mastercard Global Service™ provides worldwide, 24-hour assistance with Lost and Stolen Card Reporting, and Emergency Card Replacement.

Call Mastercard Global Service immediately to report your card lost or stolen and to cancel the account. If you need to make purchases or arrange for a cash advance, with your issuer's approval, you can receive a temporary card the next day in the United States, and within two business days almost everywhere else.

Remember, if you report your card lost or stolen, you will not be responsible for any unauthorized transactions on your account.

In the United States (including all 50 states, the District of Columbia, the U.S. Virgin Islands, and Puerto Rico) and Canada, call 1-800-307-7309.

When out-of-country and in need of assistance, you can easily reach a specially trained Mastercard Global Service Representative who can help you 24 hours a day, 365 days a year, in any language. You can call toll-free from over 80 countries worldwide. Some of the key toll-free Mastercard Global Service telephone numbers are:

Australia......1-800-120-113

ı ana	1-000-120-110		
Austria	0800-070-6138	Italy800-870-866	
France	0-800-90-1387	Mexico001-800-307-730	9
Germany	0800-071-3542	Netherlands0800-022-582	.1
Hungary	06800-12517	Poland0-0800-111-1211	
Ireland	1_800_55_7378	Portugal 800-8-11-272	

For additional information, or for country-specific, toll-free telephone numbers not listed above, visit our website at www.mastercard.com or call the United States collect at 1-636-722-7111.

Account Information and Card Benefits:

When in the United States, contact your card issuer directly for account information and **1-800-Mastercard** for card benefits. When traveling outside the U.S., call Mastercard Global Service to access your card issuer for account information or to access any of your card benefits. **ATM Locations:**

.....900-822-756

United Kingdom.......0800-96-4767 Virgin Islands......1-800-307-7309

Call 1-877-FINDATM (1-877-346-3286) to find the location of a nearby ATM in the Mastercard ATM Network accepting Mastercard®, Maestro®, and Cirrus® brands. Also, visit our website at www. mastercard.com to use our ATM locator.

You can get cash at over two million ATMs worldwide. To enable cash access, be sure you know your Personal Identification Number (PIN) before you travel.

This benefit may be subject to change without prior notice. Please visit 1www.mastercard.us/worldelite or call 1-800-Mastercard for the latest benefit information.

Concierge Service

World Elite Mastercard® offers you the Mastercard Concierge Service. Imagine your own Personal Assistant 24 x 7 x 365, where knowledgeable experts can assist with whatever you need, whenever you need it. This takes "Concierge Service" to the next level with robust, personalized features that will save you time and simplify your day, such as:

- Personal Profile to track preferences for travel, hotels, dining, entertainment, special occasions and even food allergies.
- · Local experts who can provide on-site assistance with everyday household needs like being there when the new appliance is delivered, because you can't be.
- Access to unique dining and entertainment venues to turn a special occasion into a memorable experience.
- · Reminder service for those dates or events that you can't afford to miss.
- Pre-trip planning services, providing you with critical information in advance of your trip including: 10-day weather forecast, travel requirements, city-specific news and conditions, safety and security advisory, suggested packing lists, pre-arranged confirmations for dining and other services, top must-see attractions, fitness facilities, jogging paths and recreation within close proximity of your hotel, etc.

Let the Mastercard Concierge assist you today, so you can have your day back! Our experts look forward to assisting you at 1-877-354-8330.

Costs of any goods or services provided by the concierge will be billed to your World Elite Mastercard. This benefit may be subject to change without prior notice. Please visit www.mastercard.us/worldelite or call 1-800-Mastercard for the latest benefit information.

Mastercard Travel and Lifestyle Services

As a World Elite Mastercard® cardholder, you have access to Mastercard® Travel & Lifestyle Services, a suite of benefits, amenities and upgrades, preferential treatment and premium travel offers from best-in-class travel companies across hotels, air travel, tours, cruises, car rentals and more*. Get the most from all your travels whether you are planning a last-minute getaway or your dream family vacation. As a Mastercard® Cardholder, you have access to a lifestyle manager that will help you plan your vacation – complimentary, at your convenience, 24 hours a day, 7 days a week. Plus, take advantage of the Mastercard Lowest Hotel Rate Guarantee** and Mastercard Hotel Stay Guarantee*** which deliver value and peace of mind.

* Travel & Lifestyle Services are provided by Ten Lifestyle Management Limited. No travel bookings are being made by Mastercard, nor is Mastercard acting as a travel agency or providing any travel consultation or advice, in connection with Mastercard Travel & Lifestyle Services.

** Mastercard Lowest Hotel Rate Guarantee: If you book a qualifying 'prepaid hotel rate' or 'pay at local hotel rate' hotel stay through the Mastercard Travel & Lifestyle Services program either online or through an authorized program agent using your Mastercard and then find the same hotel room type, in the same hotel, for the same dates, the same number of children and adults, at a lower price online, before taxes and fees, we'll refund you the difference. To receive a refund you must submit a claim as described in the Terms & Conditions prior to your stay and at least seventy-two (72) hours before the date of your reservation check-in.

*** Mastercard Hotel Stay Guarantee: The Mastercard Travel & Lifestyle Services Hotel Stay Guarantee is simple – if you book your three-star or higher hotel stay through the Mastercard Travel & Lifestyle Services program and you encounter problems with the hotel, contact Ten Lifestyle Management Limited, the designated travel agent for the Mastercard Travel & Lifestyle Services program at toll-free (US) 1-855-802-1387 during your stay and a lifestyle manager will attempt to make it right for the remainder of your stay by working directly with the hotel to try to resolve your issue or will make efforts to find you comparable accommodations.

Certain terms, conditions and exclusions apply. Full details are available at https://travel.mastercard.com/product/terms.

Trip Assistance, Trip Delay and Trip Cancellation Benefits

Throughout the insurance benefit sections of this document, you and your refer to Cardholder and any other person that qualifies as a beneficiary under the plan. We, us, and our refer to New Hampshire Insurance Company, an AIG Company, New York, NY.

Accident(al) means a sudden, unforeseen, and unexpected event which: (1) Happens by chance; (2) arises from a source external to the Eligible Traveler; (3) is independent of illness, disease or their bodily malfunction or medical or surgical treatment thereof; (4) occurs while you are insured under the Group Policy; and (5) is the direct cause of loss.

Accidental Bodily Injury means an Accidental injury to the body of an external origin, unintentional and unforeseen by the Eligible Traveler. An Accidental Bodily Injury must be verified by a Physician.

Account Holder means a person to whom an Eligible Account is issued and who holds the Eligible Account under his or her name.

Administrator means Sedgwick Claims Management Services, Inc (for Travel Medical Insurance, Administrator means AXA Assistance USA). You may contact the Administrators if you have questions regarding this coverage or would like to make a claim. The Administrators may be reached by phone at 1-800-Mastercard.

Authorized User means a person who is recorded as an authorized user of an Eligible Account by the Account Holder and who is authorized by the Account Holder to make payments to the Eligible Account.

Cardholder means the Account Holder or Authorized User of an Eligible Account in good standing who is a U.S. citizen or a legal resident of the U.S. or a U.S. territory, including the District of Columbia, American Samoa, Puerto Rico, Guam, the U.S. Virgin Islands, and the Northern Mariana Islands.

City of Departure/Return means the city where the Eligible Traveler departed by Common Carrier to commence a Covered Trip. City of Departure/Return includes any neighboring city for return travel that is within 100 miles from the city where the Eligible Traveler departed by Common Carrier for a Covered Trip.

Claim Determination Period means a calendar year or at least another twelve (12) consecutive month period, excluding any part of such period during which an Eligible Person has no coverage under the Group Policy.

Common Carrier means any air, land, or water conveyance operating under a valid license for the transportation of passengers for hire and for which a ticket or other type of fare must be purchased prior to commencing travel. Common Carrier does not include taxis, limousine services, commuter rails or commuter bus lines, personal automobiles, or rental cars. Covered Card means the Mastercard card linked to your Eligible Account.

Domestic Partner means a person who can provide documentation of registration of a Domestic Partner relationship with another person pursuant to state, county, or municipal provision or who meets all of the following qualifications: (1) Has resided with his or her partner continuously for at least six (6) months in a sole-partner relationship that is intended to be permanent; (2) is not married to any other person; (3) is at least eighteen (18) years old; (4) is not related to his or her partner by blood closer than would bar marriage per state law; and (5) is financially interdependent with his or her partner as can be documented by copies of joint home ownership or lease, common bank accounts, credit cards, investments, or insurance.

Eligible Account means the account associated with a U.S. issued credit card, debit card, checking account, line of credit, loan, certificate of deposit, or other account that is eligible for coverage under the Group Policy.

Eligible Person means you and your spouse and unmarried dependent children up to age nineteen (19) (up to age twenty-six (26) if a full-time student enrolled at an accredited institution or on leave of absence from such institution due to Illness for a period of twelve (12) months from the last attendance at such institution) for whom a Covered Trip is scheduled.

Eligible Traveler means you and your Family Members and Traveling Companions who purchase a Covered Trip to your Covered Card. Emergency Dental Care means the services or supplies provided by a Physician, Hospital, or other provider which are Medically Necessary to treat dental problems resulting from Injury, infection, or breakage to tooth surface or loss of filling. Emergency Medical Care means the services or supplies provided by a Physician, Hospital, or other provider which are Medically Necessary to treat any Illness or Injury where the onset is sudden and unexpected.

Group Policy means the Insurance Policy entered between New Hampshire Insurance Company, an AIG Company, and Mastercard Insurance Master Trust, which is the subject of this Guide to Benefits. For the purposes of Price Protection and Satisfaction Guarantee, Group Policy means the master services contract between AIG WarrantyGuard, Inc. and Mastercard.

Group-type means contracts or coverages that are not available to the general public and may be obtained and maintained only because of membership in or connection with a particular organization or group, regardless of whether uninsured arrangements or individual contract forms are used and how the coverage is designated (i.e., "franchise" or "blanket").

Hospital means a short-term, acute, general hospital which: (1) Primarily engages in providing diagnostic services and therapeutic services for the diagnosis, treatment, and care of injured or sick persons by or under the continuous supervision of a Physician; (2) has organized departments of medicine and major surgery; (3) requires every patient to be under the care of a Physician or dentist; (4) provides twenty-four (24) hour nursing service by or under the supervision of a registered professional nurse; (5) if located in New York, effects a hospitalization review plan that at least meets the standards set forth under section 1861(k) of the United States Public Law 89-97 (42 U.S.C. 1395x(k)); (6) is duly licensed by the agency responsible for licensing such hospitals; and (7) is not, other than incidentally, a place of rest, a place primarily for the treatment of tuberculosis, a place for the aged, a place for drug addicts or alcoholics, or a place for convalescent, custodial, educational, or rehabilitative care.

Illness means a sickness or disease diagnosed or treated by a Physician.

Immediate Family Member means an Eligible Traveler's spouse, Domestic Partner, children, stepchildren, grandchildren, parents, stepparents, siblings, step-siblings, nieces, nephews, grandparents, parent-in-law, sibling-in-law, grandparent-in-law, son-in-law, and daughter-in-law.

Injury means a bodily injury which: (1) is sustained as a direct result of an unintended, unanticipated accident that occurs while the Eligible Person's coverage under the Group Policy is in force; and (2) directly (independent of sickness, disease, mental incapacity, bodily infirmity, or any other cause) causes a covered loss. An Injury must be verified by a Physician.

Medically Necessary means services or supplies provided by a Hospital, Physician, or other provider that: (1) are essential for the diagnosis, treatment, and care of the Eligible Person's Illness or Injury for which they are prescribed or performed; (2) meet generally accepted standards of medical practice; (3) are ordered by a Physician and performed under his or her care, supervision, or order, and (4) are not primarily for the convenience of an Eligible Person, Physician or other providers, or any other person.

Pre-existing Condition means any condition resulting from any injury or Sickness affecting an Eligible Traveler, a Traveling Companion, or a Family Member traveling with an Eligible Traveler within the sixty (60) day period prior to the purchase date of a Covered Trip. The condition must have (a) first manifested itself or exhibited symptoms which would have caused one to seek diagnosis, care, or treatment; (b) required taking prescribed drugs or medicine; or (c) required medical treatment or treatment was recommended by a Physician. Pre-existing Conditions does not include conditions that are considered stable and for which maintenance medications are taken as prescribed by a Physician.

Quarantine means a directive by a Physician, that an Eligible Traveler be mandatorily confined due to the Eligible Traveler having been exposed to a severe infectious disease, infection or contamination

Primary Residence means an Eligible Person's place of residence as listed on the participating organization's file or address reflected on the Eligible Person's billing statement. Sickness means ill health, disorder, or unsound condition that is diagnosed or treated by a Physician.

Terrorist Action means an act of violence by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government, that is deemed terrorism by the United States Government, other than civil disorder or riot, and is not an act of war, declared or undeclared, and results in loss of life or major damage to property.

Traveling Companion means an individual who has made advanced arrangements with you or your Family Members to travel together for all or part of a Covered Trip.

Travel Supplier means a tour operator, innkeeper, resort, or a cruise line, airline, railroad or other Common Carrier.

Trip Cancellation means the cancellation of travel arrangements when the Eligible Traveler is prevented from traveling on a Common Carrier for a Covered Trip on or before the departure of the Covered Trip

Trip Interruption means the interruption of the Covered Trip either on the way to the point of departure or after departure of the Covered Trip.

Trip Cancellation and Trip Interruption

Evidence of Coverage (EOC)

Refer to Insurance Benefit Key Terms for the definitions of you, your, we, us, our, and words that appear in bold. This EOC is subject to the Legal Disclosures set forth below. Key Terms specific to Trip Cancellation and Trip Interruption:

- Covered Trip means a period of round-trip travel to one or more destinations other than an Eligible Traveler's place of residence at the time of departure where: (1) The Eligible Traveler departs by Common Carrier from the City of Departure/Return to begin the period of round-trip travel; (2) the period of round-trip travel ends when the Eligible Traveler returns by Common Carrier to the City of Departure/Return; (3) the period of round-trip travel does not exceed three hundred sixty-five (365) days away from the Eligible Traveler's place of residence at the time of departure; and (4) the Eligible Traveler charges the full amount of the cost of transportation by Common Carrier(s) to your Covered Card. The period of round-trip travel may consist of round-trip, one-way, or combinations of round-trip and one-way tickets with Common Carrier(s).
- Family Member means a person's spouse, Domestic Partner, and unmarried children up to age nineteen (19) (or under age twenty-six (26) if enrolled as a full-time student at an accredited institution).
- Physician means a licensed medical, surgical, or dental practitioner acting within the scope of his or her license. The treating Physician may not be an Eligible Traveler, an Eligible Traveler's Family Member, a Traveling Companion or related to an Eligible Traveler by blood.

 You must charge the full amount of a Covered Trip to your Covered Card or in combination with your Covered Card and accumulated points on your Eligible Account or redeemable certificates. vouchers, coupons, or discounts awarded from a frequent flyer program or similar program.

B. The kind of coverage you receive:

- Coverage begins on the date the Covered Trip was purchased and ends immediately at the time the Covered Trip is completed.
- An Eligible Traveler's coverage terminates on any of the following dates: The date the Eligible Traveler is no longer eligible to participate; the date the Eligible Account is determined to be ineligible by the participating organization; the date the participating organization ceases to pay premium on the Group Policy; the date the participating organization ceases to participate in the Group Policy; or the date the Group Policy is terminated.

Covered Losses

- · Covered losses include Trip Cancellations or Trip Interruptions that result from the following:
 - 1. Accidental Bodily Injury or loss of life or Sickness of either the Eligible Traveler, Traveling Companion or an Immediate Family Member of the Eligible Traveler or Traveling Companion.
 - 2. Inclement weather, which prevents a reasonable and prudent person from traveling or continuing on a Covered Trip (e.g., severe weather or natural disaster that causes all travel to or from the scheduled destination to stop);
 - 3. The Eligible Traveler or his or her spouse's change in military orders;
 - 4. Terrorist Action or hijacking which causes the operator of the Common Carrier or Travel Supplier to cancel or change the travel arrangements for a Covered Trip;
 - 5. Call to jury duty or subpoena by the courts, either of which cannot be postponed or waived;
 - 6. The Eligible Traveler or Traveling Companion's dwelling made uninhabitable; or
 - 7. Quarantine imposed by a Physician for health reasons.

Trip Cancellation

- We will reimburse you for the nonrefundable amount paid to a **Travel Supplier** with your **Covered Card** if a covered loss causes an **Eligible Traveler's Trip Cancellation**, subject to the cancellation provisions in effect at the time the **Travel Supplier** is notified of cancellation.
- If a **Physician** advises the **Eligible Traveler** that a **Covered Trip** is medically inadvisable, the **Eligible Traveler** must immediately notify the appropriate **Travel Supplier** of his or her **Trip Cancellation** after receiving such medical advice. If the **Eligible Traveler** does not provide such notification, our payment will not exceed the cancellation penalties imposed by the **Travel Supplier** and in effect during the forty-eight (48) hour period immediately following the **Physician's** notice that travel was not advisable, subject to any other limits set forth herein.

Trip Interruption

- If a covered loss causes an Eligible Traveler's Trip Interruption, we will reimburse you for the nonrefundable amount paid to a Travel Supplier with your Covered Card for the following:
 - 1. The forfeited, non-refundable, pre-paid land, air and sea transportation arrangements that were missed; and
 - 2. Additional transportation expenses that the **Eligible Traveler** incurs less any available refunds, not to exceed the cost of an economy-class air ticket by the most direct route for the **Eligible Traveler** to rejoin his or her **Common Carrier Covered Trip** or to return to his or her place of origin.
- If a covered loss causes an Eligible Traveler to temporarily postpone transportation by Common Carrier for a Covered Trip and a new departure date is set, we will reimburse you for the following:
 - 1. The additional expenses incurred to purchase tickets for the new departure (not to exceed the difference between the original fare and the economy fare for the rescheduled **Covered Trip** by the most direct route); and
 - 2. The unused, non-refundable land, air, and sea arrangements paid to a Travel Supplier with your Covered Card.

C. Coverage limitations:

- The maximum benefit amount is \$5,000 per Covered Trip and \$10,000 per Eligible Account per twelve (12) consecutive month period.
- Coverage is secondary to and in excess of any other applicable insurance or benefit available to the **Eligible Traveler** including benefits provided by the **Travel Supplier**, such as exchanged tickets, drop in ticket prices, goodwill payments, refunds, credits, or vouchers. In no event will this coverage apply as contributing insurance. This "noncontribution" clause will take precedence over the "noncontribution" clauses found in other insurance or indemnity language. Coverage is not available in states where prohibited.

D. What is NOT covered:

Coverage does not apply to any Accident, Accidental Bodily Injury, or loss caused by or resulting from the following, directly or indirectly:

- Pre-existing Conditions.
- The Eligible Traveler's intentionally self-inflicted injuries, including suicide or attempted suicide.
- · A declared or undeclared war.
- · Mental or emotional disorders, unless hospitalized.
- The Eligible Traveler's participation in a sporting activity for which he or she receives a salary or prize money.
- The Eligible Traveler being intoxicated at the time of an Accident. Intoxication is defined by the laws of the jurisdiction where such Accident occurs.
- The Eligible Traveler being under the influence of any narcotic or other controlled substance at the time of an Accident, unless the narcotic or other controlled substance is taken and used as prescribed by a Physician.
- The Eligible Traveler's commission or attempted commission of any illegal or criminal act, including but not limited to any felony.
- The Eligible Traveler parachuting from an aircraft.
- The Eligible Traveler engaging or participating in a motorized vehicular race or speed contest.
- Dental treatment except as a result of Accidental Bodily Injury to sound, natural teeth.
- Any non-emergency treatment or surgery, routine physical examinations.
- · Hearing aids, eyeglasses or contact lenses.
- One-way travel that does not have a return destination.
- · A counterfeit scheduled airline or train ticket; or a scheduled airline or train ticket which is charged to a fraudulently issued or fraudulently used Account card.
- · Any occurrence while the Eligible Traveler is incarcerated.

E. How to file a claim:

- Notification of Claims: Visit www.mycardbenefits.com or call 1-800-Mastercard to open a claim. You must notify the Administrator of your claim within sixty (60) days of the covered loss or the claim may not be honored. You must also notify the Travel Supplier and complete its claim procedures.
- · Claim Forms: Upon receipt of notice of your claim, we will furnish you with such instructions as are usually furnished by us for filing proof of loss.
- Proof of Loss: You must furnish written proof of loss to us within one hundred eighty (180) days after the date of your loss. Failure to file such proof within the time required will not invalidate or reduce your claim if it was not reasonably possible to give proof within such time, provided you furnish such proof as soon as reasonably possible and in no event, except in the absence of legal capacity, later than one (1) year from the time proof is otherwise required. Required documentation may include the following:
 - o Copies of your Common Carrier tickets and Travel Supplier receipts.
 - o Your Covered Card billing statement showing the charges for the Covered Trip./span>
 - o Proof of covered loss, as applicable, including court subpoenas, orders to report for active duty, Physician orders, etc.
 - o A copy of the Travel Supplier's cancellation policy.
 - o Any other information that may be reasonably requested by us to validate your claim.

Trip Delay

Evidence of Coverage (EOC)

Refer to Insurance Benefit Key Terms for the definitions of you, your, we, us and our, and words that appear in bold. This EOC is subject to the Legal Disclosures set forth below. Key Terms specific to Trip Delay:

- Covered Trip means a period of round-trip travel to one or more destinations other than an Eligible Traveler's place of residence at the time of departure where: (1) The Eligible Traveler departs by Common Carrier from the City of Departure/Return to begin the period of round-trip travel; (2) the period of round-trip travel ends when the Eligible Traveler returns by Common Carrier to the City of Departure/Return; (3) the period of round-trip travel does not exceed three hundred sixty-five (365) days away from the Eligible Traveler's place of residence at the time of departure; and (4) the Eligible Traveler charges the full amount of the cost of transportation by Common Carrier(s) to your Covered Card. The period of round-trip travel may consist of round-trip, one-way, or combinations of round-trip and one-way tickets with Common Carrier(s).
- Family Member means a person's spouse, Domestic Partner, and unmarried children up to age nineteen (19) (or under age twenty-six (26) if enrolled as a full-time student at an accredited institution).

A. To get coverage:

• You must charge the full amount of a Covered Trip to your Covered Card or in combination with your Covered Card and accumulated points on your Eligible Account or redeemable certificates, vouchers, coupons, or discounts awarded from a frequent flyer program or similar program.

B. The kind of coverage you receive:

- Coverage is provided that reimburses an Eligible Traveler for reasonable additional expenses (including but not limited to meals, lodging, toiletries, medication, and other personal use items) incurred for a Covered Trip that is delayed more than six (6) hours, if the Covered Trip delay is caused by a covered loss.
- Covered losses include Covered Trip delays that result from the following:
 - 1. Inclement weather, which prevents a reasonable and prudent person from traveling or continuing on a **Covered Trip** (e.g., severe weather that delays the scheduled arrival or departure of a **Common Carrier**);
 - 2. A Common Carrier's equipment failure, as documented by the Common Carrier; or
 - 3. Lost or stolen passports or travel documents.
- · Coverage begins on the date the Covered Trip was purchased and ends immediately at the time the Covered Trip is completed.
- An Eligible Traveler's coverage terminates on any of the following dates: The date the Eligible Traveler is no longer eligible to participate; the date the Covered Card is determined to be ineligible by the participating organization; the date the participating organization ceases to pay premium on the Group Policy; the date the participating organization ceases to participate in the Group Policy; or the date the Group Policy is terminated.

C. Coverage limitations:

- Coverage is limited as follows:
 - o \$300 per Covered Trip; and

o \$500 per Eligible Account per twelve (12) consecutive month period.

• Coverage is secondary to and in excess of any other applicable insurance or benefit available to the **Eligible Traveler** including benefits provided by the **Common Carrier**, such as exchanged tickets, drop in ticket prices, goodwill payments, refunds, credits, or vouchers. In no event will this coverage apply as contributing insurance. This "noncontribution" clause will take precedence over the "noncontribution" clauses found in other insurance or indemnity language. Coverage is not available in states where prohibited.

D. What is NOT covered:

· Losses where the Common Carrier is a helicopter are NOT covered.

E. How to file a claim:

- · Visit www.mycardbenefits.com or call 1-800-Mastercard to open a claim. You must notify the Administrator of your claim within sixty (60) days of the covered loss, or the claim may not be honored.
- · Upon receipt of notice of your claim, we will furnish you with such instructions as are usually furnished by us for filling proof of loss.
- You must furnish written proof of loss to us within one hundred eighty (180) days after the date of your loss. Failure to file such proof within the time required will not invalidate or reduce your claim if it was not reasonably possible to give proof within such time, provided you furnish such proof as soon as reasonably possible and in no event, except in the absence of legal capacity, later than one (1) year from the time proof is otherwise required. Required documentation may include the following:
 - o A statement from the **Common Carrier** that the **Covered Trip** was delayed.
 - o Your charge receipt.
 - o Copies of your Common Carrier tickets.
 - o Receipts for travel expenses.
 - o Any other information that may be reasonably requested by us to support your claim.

MasterAssist

Terms and Conditions

This section solely details the **MasterAssist™** services available to you as a member of the plan.

Eligibility: In order to be eligible for the services and benefits offered by Mastercard International through Assistance Center, you must be a Beneficiary as defined below.

Membership to the program is non-transferable.

Duration of Coverage: As long as you remain a Mastercard Cardholder in good standing, you will have access to the assistance services described herein.

Availability of Services: MasterAssist is available worldwide, with the exception of those countries and territories which may be involved in an international or internal conflict, or in those countries and territories where the existing infrastructure is deemed inadequate by Assistance Center to guarantee service. The Beneficiary may contact MasterAssist prior to embarking on a covered trip to confirm whether or not services are available at his/her destination(s).

Access: The services and benefits offered in the Mastercard program will be arranged by Assistance Center.

For 24-hour emergency assistance call the Mastercard Assistance Center at:

Toll free number in the United States: 1-800-307-7309.

Outside the United States, call collect at 1-636-722-7111.

I. GENERAL DEFINITIONS SPECIFIC TO MASTERASSIST

Assistance Center: The designated assistance teams trained to provide customer services and coordination of qualified local providers to travelers in real time.

Beneficiary: An eligible Mastercard Cardholder in good standing whose card has been issued by an institution located in the United States and with his/ her permanent address of residence within the United States; such as Cardholder's spouse; or, a dependent child under the age of nineteen (19) or under the age of twenty-six (26) in the case of a dependent full-time college student. In either case the Family Member resides permanently at the same address as the Cardholder and is traveling with the Cardholder.

Family Member: Any Beneficiary's common law spouse, and his or her children.

MasterAssist: Service provided by Assistance Center on behalf of Mastercard International.

II. CONTENT OF THE ASSISTANCE SERVICES

The **Beneficiary** is entitled to obtain the following services (i) when 100 miles (160km) or more away from such **Beneficiary's** primary residence; or (ii) while traveling overseas outside the home country of origin:

1. TRÁVEL MEDICAL EMERGENCY ASSISTANCE

Referrals to medical services: If you have a medical emergency while traveling, MasterAssist will refer you to qualified: physicians, hospitals, clinics, ambulances, private duty nurses, dentists, dental clinics, services for the disabled, opticians, ophthalmologists, pharmacies, suppliers of contact lenses and medical aid equipment.

For the convenience of the Cardholder, MasterAssist will make arrangements for a general practice physician to consult the Beneficiary's hotel or current location while traveling. Although MasterAssist service will make every effort, this service may not be available in all states and countries. If a physician cannot be dispatched, other arrangements will be made by MasterAssist and options will be offered to the Beneficiary. It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder.

Hospital admission: If you require hospitalization, MasterAssist can organize the hospital admission and, if requested, the guarantee of medical expenses. It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder, and can be charged to the Cardholder's account, subject to authorization by the Card Issuer.

Medical transportation/Medical evacuation: If the MasterAssist medical department determines that adequate medical facilities are not locally available in the event of an accident or illness, MasterAssist service will arrange for an emergency evacuation to the nearest facility capable of providing adequate care. The MasterAssist service team of physicians will be able to make travel recommendations including the mode of transport, whether or not an escort is needed (medical or non- medical), as well as ground transport requirements (for example, wheelchair assistance, ambulance at each end). It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder. Repatriation of remains: In the event of the Beneficiary's death, MasterAssist will arrange for the repatriation of remains to the place of burial in his/her country of residence. Transportation of remains will be subject to international laws and regulations. It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder.

Prescription transfer/shipping: MasterAssist helps the Beneficiary replace lost or misplaced medication or other important items such as eyeglasses or contact lenses, by first endeavoring to find a local resource for replacement, or by locating and arranging prompt shipment of the item or its equivalent (subject to local law).

IMPORTANT NOTE: Please see below for "Travel Medical Insurance" coverage details.

2. LEGAL ASSISTANCE

The **Beneficiary** is entitled to obtain the following services: Legal Referrals.

MasterAssist provides referrals to lawyers or other legal service providers including the providers name, address, telephone number, office hours, specialty and language resources. Whenever there is sufficient information to do so, we shall refer you to two (2) or more legal professionals so that the Beneficiary may have the benefit of choosing. MasterAssist uses reasonable efforts to ensure that its referrals are to legal service providers who meet the reasonable professional standards of the country or city where the traveler is located. MasterAssist will also follow up with the Beneficiary in each case to ensure that the service rendered was satisfactory.

Legal Assistance - Up to USD \$1,000

If you are jailed (or threatened to be) following a road traffic accident, MasterAssist can appoint and advance the fees of a lawyer. It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder, and can be charged to the Cardholder's account, subject to authorization by the Card Issuer.

Advance payment for bail bond – Up to USD \$5,000

If you are jailed (or threatened to be) following a road traffic accident, **MasterAssist** shall advance the bail bond. It is expressly understood and agreed upon that all costs are the sole responsibility of the **Cardholder**, and can be charged to the **Cardholder's** account, subject to authorization by the Card Issuer.

3. TRAVEL PERSONAL ASSISTANCE

MasterAssist will make available to Beneficiary:

- a. Information for preparing a journey
- b. Information on visas, passports
- c. Information on inoculation requirements for foreign travel
- d. Information on customs and duty regulations
- e. Information on foreign exchange rates and value- added taxes
- f. Referrals to Embassies or Consulates
- g. Referrals to Interpreters
- h. Dispatch of an Interpreter

In case of imprisonment, hospitalization or circumstances that demand the services of an interpreter, MasterAssist shall make the necessary arrangements to provide the Beneficiary with an interpreter. It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder, and can be charged to the Cardholder's account, subject to authorization by the

Card Issuer.

4. TRAVEL-ORIENTED EMERGENCY ASSISTANCE

Cash advances - Up to USD \$5,000

In the event of lost or stolen cash, Travelers Checks, credit and charge cards or in the event that there are no ATMs available at the **Beneficiary's** location, **MasterAssist** shall advance cash to the **Beneficiary** (to be charged to **Cardholder's** account and subject to authorization by the Card issuer).

Urgent message relay

Transmission of urgent messages from the Beneficiary to relatives, business associates, friends residing in his/her country of residence and vice versa.

Luggage assistance

MasterAssist shall provide assistance in locating lost luggage and shall provide to the LBeneficiary regular updates on the location status.

Lost document, ticket replacement, and return trip assistance

In case of loss or theft of the Mastercard card, travel tickets, passport, visa or other identity papers necessary to return home, **MasterAssist** will provide assistance in replacing them by contacting local police, consulates, airline company or other appropriate entities.

In the event of loss or theft of the transportation ticket to return home, a replacement transportation ticket can be arranged. It is expressly understood and agreed upon that all costs are the sole responsibility of the Cardholder, and can be charged to the Cardholder's account, subject to authorization by the Card Issuer.

5. MASTER ROADASSIST® SERVICE

- a. If your car breaks down on the road while you are traveling in the 50 United States or the District of Columbia, just call 1-800-Mastercard and tell us where you are.
- b. We'll send someone to the rescue. This is not only reassuring, but it may also save you money because fees for many services (jump-starts, towing, gas delivery, tire changes) are pre-negotiated. Road service fees will be automatically billed to your Mastercard Card account.
- c. You are responsible for emergency road service charges incurred by towing facilities responding to your dispatch, even if you are not with your car (or it's gone) when the tow truck arrives. Mastercard International is not responsible or liable for the service the towing facility provides. Towing facilities are independent contractors, solely liable for their services.
- d. Emergency road service is not available in areas not regularly traveled, in "off-road" areas not accessible by ordinary towing vehicles, or for over one-ton capacity trailers, campers, or vehicles-intow.
- e. If you have a Rental Vehicle, be sure to call the car rental agency before you call 1-800-Mastercard as many rental agencies have special procedures regarding emergency road service. III. COST OF THE ASSISTANCE SERVICES PROVIDED

MasterAssist offers valuable emergency assistance services, however it is not insurance coverage. Please keep in mind that you will be responsible for the fees incurred for professional or emergency services requested of MasterAssist™ Travel Assistance Services (such as, medical or legal bills).

Most of the assistance services are offered to the **Cardholder** at no cost; however, according to circumstances and depending on the nature of the requested service, **Assistance Center may have to advance payment on behalf of the Cardholder** subject to the **Cardholder**'s approval. In this case, the advanced payment and associated delivery fees shall be reimbursed to **Assistance Center** through the debit of the **Cardholder**'s Mastercard Card account, subject to prior approval of the **Cardholder**'s issuing bank. In the event approval for the charge is not granted by the issuing bank, the payment coverage/ monetary advance will not be provided.

IV. TRAVEL MEDICAL INSURANCE

Evidence of Coverage (EOC)

- Refer to Insurance Benefit Key Terms for the definitions of you, your, we, us and our, and words that appear in bold. This EOC is subject to the Legal Disclosures set forth below. Key Terms specific to Travel Medical Insurance:
 - o **Covered Trip** means an **Eligible Person's** trip to a destination more than one hundred (100) miles from his or her **Primary Residence** or overseas outside his or her home country where (1) the trip's expense has been charged to your **Covered Card**, (2) the period of travel does not exceed sixty (60) consecutive days in duration, and (3) the travel is not for the purpose of obtaining medical treatment.
 - o Family Member means an Eligible Person's spouse, child, mother, father, brother, sister, grandparent, grandchild, daughter-in-law, son-in-law, brother-in-law, sister-in-law, stepchild, stepsister, stepbrother, stepparent, parent-in-law, civil union partner, or Domestic Partner.
 - o Physician means a licensed practitioner of the healing arts acting within the scope of his/her license. A treating Physician may not be an Eligible Person or Family Member.
- If you have a medical emergency away from home, Travel Medical Insurance may help you receive the best care. The insurance evidenced by this **EOC** provides limited benefits health insurance only. It does NOT provide the following: basic hospital, basic medical, major medical, Medicare supplement, long term care insurance, nursing home insurance only, home care insurance only, or nursing home and home care insurance.
- THIS **EOC** IS NOT A MEDICARE SUPPLEMENT PLAN. If you are eligible for Medicare, review the Guide to Health Insurance for people with Medicare available from our **Administrator**.

A. To get coverage:

An Eligible Person's trip must qualify as a Covered Trip.

B. The kind of coverage you receive and coverage limitations:

An Eligible Person's coverage beings on the day he or she begins travel to a Covered Trip's destination. An Eligible Person's coverage ends at midnight on the day of return to his or her Primary Residence or until midnight on the sixtieth (60th) day of his or her Covered Trip, whichever is sooner.

An **Eligible Person's** coverage terminates on any of the following dates: The date the **Eligible Person** is no longer eligible to participate; the date your **Covered Card** is defined as ineligible by the participating organization; the date the participating organization ceases to pay premium; the date the participating organization ceases to participate in the **Group Policy**; on the three hundred sixty-fourth (364th) day of coverage; or the date the **Group Policy** is terminated. Termination of the policy will not affect a claim for loss of the **Eligible Person's** coverage that was in effect when the **Group Policy** was cancelled.

Emergency Medical & Dental Care

- Covers an Eligible Person's incurred expenses for Emergency Medical Care or Emergency Dental Care which are provided during a Covered Trip. Each Eligible Person may receive up to USD \$2,500 in coverage per Covered Trip, subject to a USD \$50 deductible per Eligible Person per Covered Trip.
- Coverage is limited to the reasonable and customary charges commonly used by providers for medical care in the locality in which care is provided.

Transportation Benefits

- If an Eligible Person is hospitalized while traveling alone, we'll pay for transportation to another medical facility or to the Eligible Person's Primary Residence provided such transportation is Medically Necessary and approved by us.
- If an Eligible Person is traveling alone and is hospitalized outside the United States for more than eight (8) days, we will cover travel arrangements for a round-trip, economy-class ticket to bring a Family Member or close friend to the Eligible Person. The arrangements must be submitted to us for approval in advance.
- If an Eligible Person is traveling with dependent children and is hospitalized for eight (8) days or more, we will provide return home transportation for the children.
- If an Eligible Person dies while traveling, we'll arrange for the Eligible Person's remains to be sent home.
- If a Family Member dies at home while the Eligible Person is traveling, we'll pay for the Eligible Person's return travel to the United States.
- The total transportation benefits payable for any Covered Trip is limited to USD \$10,000. All medical transportation must be approved by both the attending Physician and our Administrator. All other travel benefits must be approved in advance by our Administrator. All travel will be scheduled economy class if original ticket(s) cannot be used.

Post-Hospital Hotel Covalescence

• If an Eligible Person's onsite attending Physician determines that it is necessary for the Eligible Person to recuperate in a hotel immediately following the Eligible Person's hospitalization during a Covered Trip, we'll pay up to USD \$75 per day to cover hotel convalescence for a maximum of five (5) consecutive days.

Cordination of Benefits

- Plan means one of the following which provides benefits or services for or because of health care or repatriation of remains: (1) Group or Group-type insurance contracts; (2) group or Group-Type subscriber contracts; (3) Uninsured arrangements of group or Group-type coverage; (4) group or Group-type coverage through HMOs and other prepayment, group practice, and individual practice plans; (5) medical benefits coverage under group and Group-type automobile "no-fault" and traditional automobile "fault" type contracts; and (6) coverage under governmental plan or coverage required or provided by law, excluding: (a) A state plan under Medicaid (Title XIX, Grants to States for Medical Assistance programs, of the United States Social Security Act, as amended from time to time); and (b) a plan or law when its benefits are excess of those of any private insurance plan or other non-governmental plan by law. Plan does not include school accident-type coverage that covers grammar, high school, and college students for accidents only either on a twenty-four (24) hour basis or on a "to-and-from school" basis.
- The medical expense and repatriation of remains benefits under this **EOC** ("This **Plan**") may be primary or secondary as to another **Plan** covering an **Eligible Person**. When **This Plan** is primary, its benefits are determined before those of another **Plan** and without considering the other **Plan's** benefits. When **This Plan** is secondary, its benefits are determined after those of another **Plan** and may be reduced by the other **Plan's** benefits. If more than two (2) **Plans** cover an **Eligible Person**, **This Plan may be primary as to one (1) Plan** and secondary as to the other **Plan(s)**.

- We will not administer this Coordination of Benefits provision with respect to medical expense reimbursement under **This Plan** if the total charge for the covered medical services is less than USD \$250
- When there is a basis for a claim under **This Plan** and another **Plan**, **This Plan** is secondary and determines its benefits after those of the other **Plan**, unless: (1) The other **Plan** has rules coordinating its benefits with those of **This Plan**; and (2) the other **Plan's** rules and **This Plan's** rules, as set forth below, require the benefits under **This Plan** to be determined before those of the other **Plan**.
- Order Determination Rules. This Plan determines its order of benefits by using the first of the following rules which applies:
 - (1) Non-Dependent/Dependent. The Plan benefits which cover the Eligible Person as an employee, member, or subscriber (i.e., other than as a dependent) are determined before those of the Plan which covers the Eligible Person as a dependent. However, the benefits of the Plan covering the Eligible Person as a dependent are determined before those of the Plan covering the Eligible Person as a non-dependent if the Eligible Person is also a Medicare beneficiary and—as a result of the rule established by Title XVIII of the Social Security Act and implementing regulations—Medicare is (a) secondary to the Plan covering the Eligible Person as a dependent and (b) primary to the Plan covering the Eligible Person as a non-dependent (e.g., a retired employee).
 - (2) Active/Inactive Employee. The Plan benefits which cover the Eligible Person as an employee who is neither laid-off nor retired are determined before those of a Plan which covers the Eligible Person as a laid-off or retired employee. This rule is ignored if the other Plan does not have this rule and as a result, the Plans do not agree on the order of benefits.
 - (3) Continuation Coverage. If an Eligible Person whose coverage is provided under a right of continuation pursuant to federal or state law is also covered under another Plan, the benefits are determined in this order: (a) First, the Plan benefits covering the Eligible Person as an employee, member, or subscriber; and (b) second, the benefits under the continuation of coverage. This rule is ignored if the other Plan does not have this rule and as a result, the Plans do not agree on the order of benefits.
 - (4) Length of Coverage. If none of the above rules determines the order of benefits, the benefits of the Plan which cover the Eligible Person for the longer term are determined before those of the Plan which cover the Eligible Person for the shorter term.
- Benefits Reduction. If This Plan's benefits are secondary to one (1) or more other Plans, the benefits of This Plan will be reduced when the sum of the following exceeds the total allowable expenses in a Claim Determination Period: (1) The benefits that would be payable for the allowable expenses under This Plan in the absence of this Coordination of Benefits section; and (2) the benefits that would be payable for the allowable expenses under the other Plan(s) in the absence of similar Coordination of Benefits provisions and regardless of whether a claim is made. In that case, the benefits of This Plan will be reduced so that the benefits payable under This Plan and the benefits payable under the other Plans do not total more than the allowable expenses.
- Right to Information. We need certain facts to apply these Coordination of Benefits rules. We have the right to decide which facts we need. We may obtain needed facts from or provide them to any other person or organization without any person's knowledge or consent. Each person claiming benefits under This Plan must provide us with any facts needed to pay a claim.
- Facility of Payment. A payment made under another Plan may include an amount which should have been paid under This Plan. If so, we may pay that amount to the organization which made the payment. That amount will be treated as though it were a benefit paid under This Plan.
- Right to Recovery. If we pay more than we should have paid under this Coordination of Benefits provision, we may recover the excess from one or more of (1) the persons we paid or for whom we paid, (2) insurance companies, or (3) other organizations.

C. What is NOT covered:

Benefits will not be provided for medical or dental services, supplies, or charges:

- Provided by an Eligible Person's Family Member.
- Which are not Medically Necessary, except for related reconstructive surgery resulting from trauma, infection, or disease.
- For treatment provided by state or Federal workers' compensation, employers' liability or occupational disease law.
- To the extent benefits are provided by any governmental agency (except Medicaid).
- For any loss sustained or contracted in consequence of being intoxicated or under the influence of any narcotic, unless administered on the advice of a Physician.
- For any routine physical examinations or dental care or treatment.
- · Which are experimental/investigative.
- For any illness or injury suffered due to war or hostilities of any kind (i.e. invasion, rebellion, insurrection, riot, or civil commotion) or military duty.
- For any illness or injury suffered due to air travel except as a fare-paying passenger on a licensed aircraft operated by an airline or air charter company.
- For injury, illness, or loss due to normal pregnancy or childbirth; mental or emotional disorders; participation in a felony; skydiving, hang gliding, parachuting; or suicide, attempted suicide, or intentionally self-inflicted harm.
- For any Injury or Illness incurred due to participation in interscholastic sports.

D. How to file a claim:

- 1. Visit www.mycardbenefits.com or call 1-800-Mastercard to open a claim. You must report the claim within ninety (90) days from the date of loss, or as soon thereafter as reasonably possible, or the claim may not be honored.
- 2. Upon receipt of a claim notice, we will provide you with the necessary instructions for filing proof of loss. Written proof of loss, including any required documentation, must be submitted to our **Administrator** within one hundred twenty (120) days from the date of loss or the claim may not be honored. Failure to file such proof within the required time will not invalidate or reduce any claim if it was not reasonably possible to provide proof within such time, provided such proof is furnished as soon as reasonably possible.
- 3. Assignment. By making a request for assistance, or a claim for health or dental benefits, the Eligible Person assigns to the Administrator the rights to receive benefits or reimbursement payable under other health or dental insurance for covered services performed or paid for by the Administrator.
- 4. Release of Information. Each Eligible Person agrees that in order to collect benefits, any person or entity having information relating to an Illness or Injury for which benefits are claimed may furnish to us, upon our request, any information (including copies of records) relating to the Illness or Injury.
- 5. Payment of Claims. All benefits payable will be paid to the Eligible Person or in the case of death, to the Eligible Person's estate.
- 6. External Appeal. If we deny coverage on the basis that the service is not Medically Necessary, the Eligible Person has a right to request, in writing, an external appeal. It is your responsibility to start the external appeal process. Your completed request for an external appeal must be filed within four (4) months of either the date upon which you receive a final adverse determination from us or the date of our alleged failure to adhere to claim processing requirements. Please contact our Administrator for more information about your right to an external appeal and the steps you must follow.

E. Washington residents:

• For Washington residents only, the definitions of Emergency Dental Care and Emergency Medical Care, and any reference to such terms herein, are deleted in their entirety and replaced with the following:

Necessary Dental Care means a Physician, Hospital, or other provider's services or supplies which are: (1) Medically Necessary to treat an Eligible Person's dental problems resulting from infection and which are provided during a Covered Trip; or (2) Medically Necessary to treat an Eligible Person's dental problems resulting from Injury, breakage to tooth, or loss of filling incurred during a Covered Trip and which are provided to the Eligible Person within three hundred sixty-five (365) days from the accident date.

Necessary Medical Care means a Physician, Hospital, or other provider's services or supplies which are: (1) Medically Necessary to treat an Eligible Person's sudden and unexpected Illness and which are provided during a Covered Trip; or (2) Medically Necessary to treat an Eligible Person's sudden and unexpected Injury incurred during a Covered Trip and which are provided to the Eligible Person within three hundred sixty-five (365) days from the accident date.

- Furthermore, the section (B) of the EOC, entitled "Emergency Medical and Dental Care," is deleted in its entirety and replaced with the following:
 - (1) Necessary Medical & Dental Care. Covers an Eligible Person's incurred expenses for Necessary Medical Care or Necessary Dental Care. Each Eligible Person may receive up to USD \$2,500 in coverage per Covered Trip, subject to a USD \$50 deductible per Eligible Person per Covered Trip. Coverage is limited to the reasonable and customary charges commonly used by providers for medical care in the locality in which care is provided.

LEGAL DISCLOSURES

This Guide to Benefits is not, by itself, a policy or contract of insurance or other contract.

Benefits are provided to you, the Cardholder, at no additional charge. Non-insurance services may have associated costs, which will be your responsibility.

Insurance benefits are provided under a **Group Policy** issued by New Hampshire Insurance Company, an AIG company. Non-insurance benefits are provided under a Master Agreement issued by AIG Warranty Guard, Inc. These Guide to Benefits are summaries of any insurance or non-insurance benefits provided to you and are governed by the controlling **Group Policy** or Master Agreement, as applicable.

Effective date of benefits: These Guide to Benefits replace all prior disclosures, program descriptions, advertising, and brochures issued by any party. The master group policy or contract holder and the applicable insurer or obligated entity reserve the right to change the benefits and features of these programs at any time. Notice will be provided for any changes.

Cancellation: The Group Policy or Master Agreement holder can cancel these benefits at any time or choose not to renew the insurance or non-insurance benefits for all Covered Cards. If these benefits are cancelled, you will be notified in advance. Benefits will still apply for any eligible coverage that attaches prior to the date of such termination, cancellation, or non-renewal, subject to the

terms and conditions of coverage.

Benefits to you: These benefits apply only to U.S. issued Covered Cards. No person or entity other than you shall have any legal or equitable right, remedy, or claim for benefits, proceeds, and damages under or arising out of these programs. These benefits do not apply if your card privileges have been cancelled. However, benefits will still apply for any benefit you were eligible for prior to the date that your Covered Card is suspended or cancelled, subject to the terms and conditions of coverage.

Legal Action: No action at law or in equity may be brought to recover under these benefits prior to the expiration of sixty (60) days after written proof of loss has been furnished in accordance with the benefit requirements. No such action may be brought after the expiration of three (3) years from the time written proof of loss is required to be furnished.

Transfer of rights or benefits: The Group Policy and Master Agreement are not assignable, but the benefits may be assigned.

Intentional Misrepresentation and Fraud: If any request for benefits is determined to be fraudulent, or if any fraudulent means or devices are used by you or anyone qualifying as a beneficiary to obtain coverage under the benefits, all benefits will be forfeited. No coverage is provided if you or anyone qualifying as a beneficiary does the following: (1) Conceals or misrepresents any fact upon which we rely, if the concealment or misrepresentation is material and is made with the intent to deceive; or (2) conceals or misrepresents any fact that contributes to the loss.

Due Diligence: You must exercise or perform all vigilant activity, attentiveness, and care that would be exercised or performed by a reasonable and prudent person in the same or similar circumstances to avoid, diminish, or reduce any covered loss or damage.

Subrogation: If payment is made under these benefits, we are entitled to recover such amounts, to the extent of our payments, from other parties or persons. Any party or person who receives payment under these benefits must transfer to us his or her rights to recovery against any other party or person and must do everything necessary to secure these rights and must do nothing that would jeopardize them.

Sanctions: We shall not be deemed to provide coverage, and we shall not be liable to pay any claim or provide any benefit hereunder, to the extent that the provision of such coverage, payment of such claim, or provision of such benefit would expose us, our parent company, or our ultimate controlling entity to any sanction, prohibition, or restriction under United Nations resolutions or the trade or economic sanctions, laws, or regulations of the European Union or the United States of America.

Salvage: If your loss involves an item that is not repairable, we may request you to send the item to us for salvage at your expense. Failure to remit the requested item for salvage to us may result in denial of the claim.

Severability of Provisions: If in the future any one or more of the provisions of this Guide to Benefits is, to any extent and for any reason, held to be invalid or unenforceable, then such provision(s) shall be deemed "severable" from the remaining provisions of the Guide. In that event, all other provisions of this Guide shall remain valid and enforceable.

Benefits listed in this Guide to Benefits are subject to the conditions, limitations, and exclusions described in each benefit section. Receipt and/or possession of this Guide to Benefits does not guarantee coverage or coverage availability.

This Guide is intended as a summary of services, benefits, and coverages and, in case of a conflict between the Guide and the **Group Policy** or Master Agreement, the **Group Policy** or Master Agreement shall control. Provision of services is subject to availability and applicable legal restrictions. Representations or promises made by anyone that are not contained in the **Group Policy** or Master Agreement are not part of your coverage.

Washington Residents: For Washington residents only, Evidence of Coverage (EOC) means the section of this Guide to Benefits that describes the terms, conditions, and exclusions of your coverage. The EOC, Insurance Benefit Key Terms, and Legal Disclosures are the entire agreement between you and us. Representations or promises made by anyone that are not contained in the EOC, Insurance Benefit Key Terms, or Legal Disclosures are not part of your coverage. In case of a conflict between this Guide to Benefits and the Group Policy or Master Agreement, the Guide to Benefits shall control.

Priority Pass Digital Airport Lounge Access

Airport lounge access provided by Priority Pass is avialable to all eligible World Elite Mastercard cardholders. Cardholders can use their Priority Pass digital membership card to access an airport lounge in a seamless way, as follows:

- · Eligible cardholders will have lounge membership with "pay as you go" pricing.
- Membership to 1700+ Priority Pass lounges in 120+ countries and in over 400 aiports regarless of airline, frequent flyer membership or class of ticket. Priority Pass provides affulent cardholers the opportunity to relax, refresh and enhance their airport experience as they wait for their flight.

Who Is Eligible: U.S. issued World Elite Mastercard cardholders whose issuing bank has completed the enrollment process.

How Priority Pass Works:

- 1. Before traveling, eligible cardholders can log in to www.prioritypass.com/MGMlconicLounge to enroll. Cardholders then have access via website or Smartphone App to view a list of participating lounges and experiences.
- 2. Eligible cardholders will enjoy complimentary refreshments, newspapers and television. In addition, there is access to facilities business facilities including phone, fax, conference and internet facilities (where available).
- 3. To gain access to the lounges, an eligible cardholder only needs to quote "Priority Pass" at the participating lounge and present their Priority Pass Digital Membership Card(QR Code) found in the Priority Pass app.

8

- 4. A list of participating lounges can be found and viewed using the Priority Pass website or app.
- FAQs can be viewed online at https://memberhelp.prioritypass.com/en-GB/support [memberhelp.prioritypass.com]
- Contact Priority Pass at https://memberhelp.prioritypass.com/en-GB/support/contact or +1 469 334 4174 for customer support.
- Terms of Use can be viewed online at https://prioritypass.com/terms-of-use
- · Conditions of Use can be viewed online at https://prioritypass.com/conditions-of-use