

www.medexassist.com



TravMed

GLOBAL

Medical insurance & assistance for Americans
& foreign nationals traveling outside their home
countries to destinations other than the United States

\$100,000 Medical
Expense Benefit

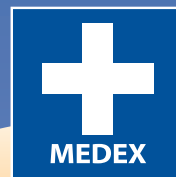
\$25,000 AD&D Benefit

Worldwide,
24 Hours A Day

Multilingual
Medical Assistance



Administered by:
MEDEX Insurance Services, Inc.
P.O. Box 19056 | Baltimore, Maryland 21284
1-800-732-5309



Helping Travelers In Need.

TravMed GLOBAL

Peace of Mind for International Travelers

TravMed Global provides access to a 24-hour emergency assistance center – just a toll-free phone call away. Anywhere in the world, you can be immediately in contact with a highly-trained, multilingual coordinator who can assist with any travel-related situation. It is easy to arrange. Just complete the enclosed application and send it with your payment. Each visitor needing TravMed Global must complete a separate application. This insurance is not available to persons 71 years or older.

Offers \$100,000 Medical Expense Benefits Including:

- Medical Evacuation Benefit
- Repatriation of Remains Benefit
- \$25,000 Accidental Death & Dismemberment Benefit
- Travelers Assistance Services
- Optional Trip Cancellation and Curtailment Benefit
- Optional Additional AD&D Benefit

Have your sights set on seeing the world?


Then think of the disappointment when an unexpected medical problem forces your trip to be cancelled, as well as the loss of hundreds of dollars in lost accommodation and travel deposits. Your dream vacation or adventure of a lifetime suddenly turns into a nightmare of untold proportion.

If you get sick at home, you know exactly what to do...

where to find medical care... which doctor to call... where to get your prescriptions filled... which expenses your insurance will cover. But what do you do while traveling in a foreign country where you may not even speak the language? How do you pay the medical expenses?

TravMed Global satisfies these needs and more

By offering \$100,000 of comprehensive coverage, for expenses such as hospitalization, physician services, prescription medication, laboratory fees, x-rays, local ambulance transportation and even a medical evacuation to an appropriate facility or back to your home country. Repatriation of remains is also covered under the policy in the unlikely event of death.



Your **MEDEX**
Assistance Coordinators
are available 24 hours a day,
7 days a week.

OUTLINE OF COVERAGE

Medical Expense Benefits

\$100,000 Accident and Sickness Benefit

(\$100, \$500, or \$1,000 deductible)

After the deductible you select, the Company will pay up to \$100,000 for those medical expenses incurred outside the USA during the Period of Insurance which are the direct result of each covered injury or sickness which first manifests itself during the Period of Insurance. Covered expenses include, but are not limited to, the necessary medical or surgical treatment, services and supplies, hospital services, local ambulance, prescriptions, x-rays, laboratory fees, and visits to a physician's office.

Benefits for claims resulting from: (1) downhill (alpine) skiing; and (2) scuba diving (certification by PADI or NAUI required) are limited to \$10,000.

If medical expenses are expected to exceed \$500, the Assistance Center must be notified immediately.

Medical Evacuation

If a covered injury or sickness occurs during the Period of Insurance and requires your medical evacuation, the Company (with your concurrence and that of the attending physician) may evacuate you to a more suitable hospital or to your home location in the event you are hospitalized more than five consecutive days. An evacuation to your home location will terminate coverage under this policy.

Repatriation of Remains

If a covered injury or sickness results in the loss of your life during the Period of Insurance, the Company will pay the expenses for the preparation and transportation of your body back to your home.

All medical evacuations and repatriation of remains must be approved (in advance) and coordinated by the Assistance Center.

Dental Expense Benefit

The Company will pay you up to \$200 for the immediate relief of dental pain; or up to \$200 per tooth (subject to a \$1,000 maximum) for dental treatment resulting from a covered accident.

\$25,000 Accidental Death & Dismemberment Benefit

The principal sum benefit is \$25,000. If a covered injury occurs to you during the Period of Insurance, which is independent of all other causes and results in one of the following losses within 180 days of the covered injury, the Company will pay the sum indicated below.

LOSS	BENEFIT
Life	Principal Sum
Any two limbs (above the elbow/knee)	Principal Sum
Sight in both eyes (irrecoverable)	Principal Sum
One limb and the sight in one eye	Principal Sum
One limb or the sight in one eye	One-half Principal Sum

The Company will not pay more than the principal sum for all losses incurred as a result of the same accident.

Period of Insurance

Coverage for Medical Expense Benefits and the Accidental Death & Dismemberment Benefit starts: (a) on the departure date requested on the application; (b) when you board a conveyance at the actual start of the planned trip; or (c) when your application and premium are received by the Administrator, whichever occurs later. Coverage ends: (a) when you alight from a conveyance at the completion of the trip; or (b) at 11:59 p.m. local time on the date specified on your application, whichever occurs earlier.

Important Information

1. This insurance cannot be renewed. However; another policy may be purchased. If a new policy is issued, any claims incurred under the previous policy will be considered a pre-existing condition and therefore not covered under the new policy.
2. TravMed Global covers injuries resulting from random acts of terrorism. However, if it is your intention to travel to an area where a state of war exists, that is faced with the threat of war, or is in a state of civil unrest, that information must be included on the application. Additional premium may be required.

Right of Subrogation

If you are injured or become sick as a result of another person's negligence, the Company has the right to seek reimbursement on your behalf against the negligent party for any claims paid under this insurance.

Refund Policy

Premium will be refunded only if MEDEX Insurance Services, Inc. receives a written request for the refund before your insurance begins. Once your insurance begins, all premium is considered fully earned and none will be refunded.

This is a descriptive brochure containing a summary of the coverage provided by the Master Policy. Once insured you will receive a Certificate of Insurance which contains details of the coverage.

3 Easy Ways To Enroll

Complete the attached form and submit by mail to:

MEDEX Insurance Services, Inc.
P.O. Box 19056
Baltimore, Maryland 21284
Fax it to us directly: 410-308-7905
or, register online at www.medexassist.com in our Individuals section



OPTIONAL COVERAGES

\$500–\$5,000 Trip Cancellation and Curtailment Benefit

Trip Cancellation

The Company will pay up to the benefit limit selected on the application, for the loss of unrecoverable deposits or charges paid in advance, due to the necessary cancellation of the entire trip prior to the scheduled departure; provided that the covered injury, sickness or death giving rise to the cancellation begins within the Period of Insurance.

Trip Curtailment

The Company will pay up to the benefit limit selected on the application for either: (a) any additional reasonable transportation and/or lodging expenses for the emergency return trip home; or (b) the balance of unrecoverable trip costs; whichever is lesser, provided that the covered injury, sickness or death giving rise to the curtailment occurs after your trip commenced and prior to the termination of the coverage as specified on the application.

The Trip Cancellation and Curtailment Benefit may also be applicable if a covered injury, sickness or death is sustained by your traveling companion (named on the application), immediate family (spouse, children, mother, father, sister, brother), and immediate family in-laws. See exclusion A.

Period of Insurance

Coverage for the Trip Cancellation and Curtailment Benefit begins at 12:01 a.m. local time 30 days prior to your scheduled departure, but no sooner than the date your application and premium are received by the Administrator. Coverage ends at: (a) the completion of your trip or; (b) 11:59 p.m. local time on the last day of coverage specified on your application, whichever occurs earlier.

\$100,000 Accidental Death & Dismemberment Benefit

The Accidental Death & Dismemberment Benefit (as previously defined) may be optionally increased from the included \$25,000 benefit to a total benefit of \$125,000.

TravMed Global Application Form

Mail application to: MEDEX Insurance Services, Inc. | P.O. Box 19056 Baltimore, Maryland 21284

Please call 800-732-5309 between 8:00 A.M - 5:00 P.M. EST Monday - Friday for telephone assistance. You may fax your enrollment to us at 410-308-7905.

— Applicant Information

FIRST NAME OF APPLICANT: _____ MIDDLE INITIAL: _____

LAST NAME OF APPLICANT: _____

ADDRESS: _____

Street Address

City

State

Zip

FAX OR EMAIL: _____

HOME PHONE: _____

WORK PHONE: _____

DESTINATION COUNTRY(IES): _____

DEPARTURE DATE: _____

RETURN DATE: _____

NAME OF BENEFICIARY: _____

COUNTRY OF PERMANENT RESIDENCE: _____

PASSPORT NUMBER: _____ DATE OF BIRTH _____

Maximum Age 70

PERSON TO BE CONTACTED IN THE EVENT OF AN EMERGENCY:

NAME: _____

HOME PHONE: _____

WORK PHONE: _____

RELATIONSHIP: _____

— Payment Information

Method of Payment (circle one):

American Express / VISA / MasterCard / Check enclosed
(make checks payable to MEDEX Insurance Services)

CARD NUMBER: _____

EXPIRATION DATE: _____

CARDHOLDER: _____

SIGNATURE: _____

— Required Coverage

**\$100,000 Medical Expense Benefits
with \$25,000 AD&D Benefit**

Minimum 2 weeks, Maximum 26 weeks

\$100 Deductible = \$21/Week

\$500 Deductible = \$17/Week

\$1,000 Deductible = \$14/Week

\$ _____ x _____ = \$ _____
cost per week # of weeks Premium

— Optional Coverage

Trip Cancellation and Curtailment Benefit

\$500 Minimum, \$5,000 Maximum

This coverage is available only if purchased at least 10 days before the Departure Date.

Cost per Person: .05 x the coverage requested

_____ x .05 = \$ _____
Amount of coverage requested (see premium page) Premium

Name of Traveling Companion: _____

— Optional Coverage

\$100,000 Additional AD&D Benefit

Minimum 2 weeks, Maximum 26 weeks

Cost per Person: \$3.50 x _____ = \$ _____
weeks Premium

TOTAL PREMIUM DUE: \$ _____

— Declaration of Applicant

I hereby apply to purchase the insurance. I declare to the best of my knowledge and belief that the information given in this application is true and complete. I acknowledge (on behalf of the person to be insured) that benefits will not apply to treatment arising from any pre-existing medical condition. It is agreed that this declaration and the information given herein shall form the basis of the contract between the Insured Person and the Company. Further, I hereby subscribe to the International Sojourners Insurance Trust and acknowledge enrolling in this group coverage for which I am eligible under the contract issued by the Company.

Signature _____

Date _____

— Purchase Information

HOW DID YOU HEAR ABOUT MEDEX?

PURPOSE OF TRAVEL? (i.e. business, pleasure)

TRAVMED GLOBAL PREMIUMS

\$100,000 Medical Expense Benefit with \$25,000 AD&D Benefit

Premium is based on the deductible you select.

DEDUCTIBLE	COST PER WEEK
\$100.00	\$21.00 per week
\$500.00	\$17.00 per week
\$1000.00	\$14.00 per week

Minimum 2 weeks, Maximum 26 weeks

A week is seven calendar days. The first day of your coverage can be your departure date or a later date if you request.

Coverage cannot begin before your departure.

EXAMPLE:

Deductible Requested: . . \$500.00
Departure Date: March 10
Return Date: March 28

Period of Coverage
is 19 days therefore,
3 weeks of coverage.

$\$17.00 \text{ Per Week} \times 3 \text{ Weeks} = \$51.00 = \text{Premium}$

\$100,000 Additional Accidental Death & Dismemberment Benefit

\$3.50 per week

Minimum 2 weeks, Maximum 26 weeks

Trip Cancellation and Curtailment Benefit

Coverage Available: \$500 minimum; \$5,000 maximum
Premium = coverage requested x .05

EXAMPLE:

$\$1,250 \text{ Coverage Requested} \times .05 = \62.50 Premium

Exclusions & Limitations

This insurance does not cover, nor has premium been charged for losses resulting from:

A. A Pre-existing Condition defined as:

Any injury or sickness or complications arising therefrom, which manifests itself, or for which a physician was consulted or for which treatment or medication was prescribed or taken in the 180 days immediately prior to the Period of Insurance. With reference to the Trip Cancellation/Curtailment Benefit this exclusion also applies to any condition or set of circumstances known to you at the time of purchasing the insurance where such condition or set of circumstances could reasonably have been expected to give rise to the cancellation or curtailment of the trip.

B. Any claim in respect of:

1. Congenital conditions; cosmetic surgery and/or dental care (except as covered under the Dental Expense Benefit); suicide, self-inflicted injury or any attempt thereof;
2. Examinations/treatment where there is no objective impairment of normal health;
3. Eyeglasses, contact lenses or hearing aids;
4. Sexually transmittable diseases (this exclusion does not apply to HIV, AIDS, ARC or any derivative or variation thereof);
5. Birth Control, fertility or infertility treatment, or pregnancy including miscarriage or abortion;
6. "Off-Road", All-Terrain Vehicle accidents; mountaineering (where ropes or guide persons are customarily used); or
7. Other vehicle accident, if such expenses are recoverable under any other valid and collectible insurance, regardless of whether you assert your rights to obtain benefits from these sources. Nor will this plan cover you while operating a vehicle unless you are properly licensed to operate said vehicle at the time and place of the accident.

C. Any claim arising from war, declared or undeclared, or any act of war or while in military service. An act of terrorism shall not be considered an act of war.

D. Participation in professional sports; or involving aviation other than as a passenger in a powered aircraft currently licensed for the carrying of passengers.

E. Expenses not considered medically necessary; or not recommended and approved by the attending physician.

F. Amounts covered under any occupational or other benefit plan, or any other insurance or public assistance program.

G. Those claim expenses incurred after the Period of Insurance or in your home country.

H. Any loss that occurs:

1. From medical expenses incurred within the United States;
2. While traveling against the advice of a physician;
3. While on a waiting list for a specific treatment; or
4. When traveling for the purpose of obtaining medical treatment.