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# REGISTRATION/TICKET INSURANCE POLICY

Connecticut

## BISTIX-01-CT

Plan Administrator battleface 45 East Lincoln Street Columbus, OH 43215

This Insurance Policy describes travel insurance benefits underwritten by Spinnaker Insurance Company, under Policy Form series BIS1100 (06/2021). Insurance benefits vary by plan, please refer to the accompanying Confirmation of Coverage. You will find the specific information for the plan you purchased. Please contact the Plan Administrator immediately if you believe the Confirmation of Benefits contains incorrect information.

The insurance described in this document provides limited benefits. Limited benefit plans are insurance products with reduced benefits intended to supplement comprehensive health insurance plans. This insurance is not an alternative to comprehensive coverage. It does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential coverage as set forth under the Patient Protection and Affordable Care Act.

This page is informational only and is not attached to nor does it form part of the policy.

#### SPINNAKER INSURANCE COMPANY

A Stock Company Home Office: 233 S. Wacker Drive, Ste 5500, Chicago, IL 60606 Administrative Office: 1 Pluckemin Way, Bedminster, NJ 07921

#### TRAVEL INSURANCE POLICY

This *policy* is issued in consideration of enrollment and payment of the premium due. This *policy* describes all of the travel insurance benefits underwritten by Spinnaker Insurance Company, herein referred to as *we*, *us*, and *our*. This *policy* is a legal contract between *you* (herein referred to as *you* or *your*) and *us*. It is important that *you* read *your policy* carefully. Insurance benefits vary from program to program. Please refer to the *schedule of benefits*. It provides *you* with specific information about the program *you* purchased.

#### OUR PROMISE TO YOU FREE LOOK PERIOD

Since **your** satisfaction is **our** priority, **we** are pleased to give **you** ten (10) days to review **your policy**. If, during this ten (10)-day period, **you** are not completely satisfied for any reason, **you** may cancel **your policy** and receive a full refund. Please note that this refund is only available if the **covered trip** has not started and if a claim has not been initiated. After this ten (10)-day period, **your** premium is non- refundable.

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## SECTION I. DEFINITIONS

**Accident** or **accidental** means a sudden, unexpected, unusual, specific event which occurs at an identifiable time and place but shall also include exposure resulting from a mishap to a conveyance in which **you** are traveling.

Active military duty means serving in the United States Armed Forces on a full-time basis, including the United States Armed Forces Reserves.

Adventure activities means leisure and non-professional sports activities in:

- a. Snow skiing or snowboarding, except extreme skiing or extreme snowboarding;
- b. Mountain biking or mountain cycling;
- c. Mountain climbing below three thousand (3,000) meters;
- d. Ice Fishing;
- e. Scuba diving for *qualified divers* up to a maximum depth of forty (40) meters or one hundred thirty (130) feet and for *unqualified divers* up to a maximum depth of twelve (12) meters or forty (40) feet;
- f. White or black water rafting (Grades one (1) two (2));
- g. Water skiing;
- h. Kite surfing and wind surfing;
- i. Surfing;
- j. Hunting/Shooting;
- k. Sailing;
- I. Snowmobiling;
- m. Tobogganing or sledding;
- n. Riding upon, or rental of, electric or gasoline-powered scooters, bicycles, mopeds, Segways or other motorized two-wheeled conveyances; or
- o. Any activity materially similar to the above.

*Advisory* means a formal travel *advisory* by the United States Government recommending that *you* leave the *host country*.

**Baggage** means luggage and personal possessions including:

- a. Traveling documents; and
- b. Musical instruments; and
- c. Sporting equipment,

whether owned, borrowed, or rented, and taken by you on the covered trip.

**Bankruptcy** means the filing of a petition for voluntary or involuntary **bankruptcy** in a court of competent jurisdiction under Chapter 7 or Chapter 11 of the United States Bankruptcy Code 11 U.S.C. Subsection 101 et seq.

**Business partner** means an individual who is involved in a legal partnership with **you** and actively involved in the day to day management of the business.

## Cancellation penalties means trip costs:

- a. Which are not refundable by the *travel supplier*, or are subject to restrictions;
- b. Which are paid by **you** prior to **your covered trip departure date**, or which **you** are obligated, or later become obligated, to pay as a result of cancelling or interrupting the **covered trip**;
- c. Which are identified by *you* on the application; and
- d. For which insurance was purchased.

These will also include any subsequent *prepaid payments or deposits* paid by *you* for the same *covered trip*, after application for coverage under this *policy*; however, *you* must notify *us* of these payments and pay the additional cost by within two (2) days of *initial trip payment*.

*Caregiver* means an individual employed for the purpose of providing assistance with activities of daily living to *you* or *your family member* who has a physical or mental impairment. The *caregiver* must be employed by *you* or *your family member*. A *caregiver* is not a babysitter, childcare service, or any facility or provider.

*Child(ren)* means *your children*, including an unmarried *child*, stepchild, *child(ren)* of a *domestic partner*, legally adopted *child* or foster *child* who is:

- a. Under the age of eighteen (18) and primarily dependent on you for support and maintenance; or
- b. Who is at least eighteen (18) but less than age twenty-four (24) and who regularly attends an institution of higher learning/an accredited school or college; and who is primarily dependent on **you** for support and maintenance.

*City* means an incorporated municipality having defined borders and does not include the high seas, uninhabited areas, or airspace.

*Civil disorder* means a group of people acting in revolt, coup, rebellion or resistance against an established government or civil authority.

*Common carrier* means any regularly scheduled land, sea, and/or air conveyance operating under a valid license for the *transportation* of passengers for hire.

**Complications of pregnancy** means conditions requiring **hospital** admission (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include:

- a. Acute nephritis;
- b. Nephrosis;
- c. Cardiac decompensation;
- d. Missed abortion;
- e. Nonelective cesarean section;
- f. Ectopic pregnancy which is terminated;
- g. Spontaneous termination of pregnancy which occurs during a period of gestation in which a viable birth is not possible; and
- h. Similar medical and surgical conditions of comparable severity.

## Complications of pregnancy do not include:

- a. False labor;
- b. Occasional spotting;
- c. *Physician*-prescribed rest during the period of pregnancy;
- d. Morning sickness;
- e. Hyperemesis gravidarum;
- f. Preeclampsia; and
- g. Similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct *complication of pregnancy*.

## *Confirmation* means the written *reservation* of *travel arrangements* on a *common carrier*.

**Covered trip** means a **trip** for which **you** request insurance coverage and pay the required premium and includes: **prepaid** Land/Sea Arrangements and shall include flight connections to join or depart such Land/Sea Arrangements provided such flights are scheduled to commence within one (1) day of the Land/Sea Arrangements, or **prepaid** course arrangements. **Covered trip** includes a period of round-trip travel to a **destination** that does not exceed one hundred twenty (120) days in length.

*Cruise* means any *prepaid* sea/ocean and/or inland waterway arrangements made by the *travel supplier*.

## Dangerous activities means:

- a. Air travel on a not-for-hire aircraft (whether as a pilot, crewmember or a passenger);
- b. Bull riding;
- c. Running of the bulls;
- d. Free diving;
- e. Rock climbing without equipment;
- f. Operating or learning to operate any aircraft, as student, pilot, or crew;
- g. Air travel on any air-supported device, other than a regularly scheduled airline or air charter company;
- h. BASE jumping;
- i. Wingsuit flying;
- j. Participation in bodily contact sports such as boxing and full-contact martial arts;
- k. Riding, training or driving in races, or speed or endurance competitions or events;
- I. Bridge swinging; or
- m. Any activity materially similar to the above.

Dependent means lawful spouse and/or children.

**Destination** means any place **you** are scheduled to travel to on **your covered trip**, as shown on the travel documents, manifest, or **confirmation**.

**Domestic partner** means a person, at least eighteen (18) years of age, with whom **you** have been living in a spousal relationship with evidence of cohabitation for at least ten (10) continuous months prior to the **effective date** of coverage.

*Effective date* means the date and time *your* coverage begins, as outlined in Section III. Eligibility and Period of Coverage of the *policy*.

*Epidemic* means an outbreak of a contagious disease that spreads rapidly and widely and that is identified as an *epidemic* by The Centers for Disease Control and Prevention (CDC).

## *Extreme Activities* means:

- a. Cliff diving, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- b. Fly-by-wire, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- c. Hang gliding, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- d. Heli-skiing, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- e. Heli-snowboarding, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;

- f. *Mountain climbing* (over three thousand (3,000) meters) up to a maximum of six thousand (6,000) meters, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- g. Parkour, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- h. Participation in *professional athletic events*;
- i. Sky diving or parachuting, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- j. Bungee cord jumping, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- k. Spelunking or cave exploring, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- I. *Extreme skiing*, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- m. *Extreme snowboarding*, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- n. Riding upon, or rental of, electric or gasoline-powered scooters, bicycles, mopeds, Segways or other motorized two-wheeled conveyances;
- o. White or black water rafting (Grades three (3) four (4)), only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator; or
- p. any activity materially similar to the above.

*Extreme skiing* means snow skiing that includes such activities as freestyle skiing, skiing in the backcountry on unmarked or unpatrolled areas either inside or outside a ski resort's boundaries, or skiing on slopes with an angle of descent of forty-five (45) degrees or more, or any activity materially similar to the above.

*Extreme snowboarding* means engaging in activities beyond general alpine snowboarding, such as jibbing, freeriding, freestyle, half-pipe, slopestyle, or any activity materially similar to the above.

## Family member means your or your traveling companion's:

- a. *Spouse*, civil union partner or domestic partner;
- b. *Child*;
- c. Siblings;
- d. Parents;
- e. Grandparent, step-grandparent, grandchild, or step-grandchild;
- f. Step-child, step-sibling, or step-parent;
- g. Step-aunt or step-uncle;
- h. Parent-in-law;
- i. Daughter-in-law or son-in-law;
- j. Brother-in-law or sister-in-law;
- k. Aunt or uncle;
- I. Niece or nephew;
- m. Legal guardian;
- n. *Caregiver*;
- o. Ward or legal ward; or
- p. *Spouse*, civil union partner, or *domestic partner* of any of the above.

*Family member* also includes these relations to *your* or *your traveling companion's spouse*, civil union partner or *domestic partner*.

*Financial default* means the cessation or partial suspension of operations due to insolvency, with or without the filing of a *bankruptcy* petition, by a tour operator, *cruise* line, airline, resort, rental company, or other *travel supplier*.

*Government* means the local, state, provincial, national or federal authority at *your primary residence* or *destination* with the authority to recommend or mandate orders in the event of an *epidemic* or *pandemic*. *Home country* means *your* country of residence.

Hospital means a facility that:

- a. Is operated according to law for the care and treatment of sick or *injured* people;
- b. Has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis;
- c. Has twenty-four (24) hour nursing service; and
- d. Is supervised by one or more *physicians* available at all times.

### A *hospital* does not include:

- a. A nursing, convalescent or geriatric unit of a *hospital* when a patient is confined mainly to receive nursing care;
- b. A facility that is, other than incidentally, a clinic, a rest home, nursing home, convalescent home, home health care, or home for the aged, nor does it include any ward, room, wing or other section of the *hospital* that is used for such purposes; or
- c. Any military or veteran's *hospital* or soldiers' home or any *hospital* contracted for or operated by an national government or government agency for the treatment of members or ex-members of the armed forces for which no charge is normally made.

*Host country* means a country or territory *you* are visiting, shown on *your* itinerary, and which is not *your home country*.

*Hotel* means any establishment used for the purpose of temporary, overnight lodging for which a fee is paid and *reservations* are required.

*Imminent physical danger* means a situation or environment that poses a direct and immediate threat of physical *injury* or death to *you*.

Inaccessible means you cannot reach your destination by the original mode of transportation.

*Inclement weather* means any *severe weather* condition other than a hurricane which delays the scheduled arrival or departure of a *common carrier* or prevents *you* from reaching *your destination*.

*Initial trip payment* means the first *payment or deposit* made to *your travel supplier* toward the cost of *your covered trip*, regardless of whether this payment is refundable. A "good faith deposit" or a "holding payment" is not considered the *initial trip payment* until the payment is applied to confirmed travel dates.

*Injury* or *injured* means a bodily *injury* caused by an *accident* occurring while *your* coverage under this *policy* is in force and resulting directly and independently of all other causes of *loss* covered by this *policy*. The *injury* must be verified by a *physician*.

#### *Insured* means a person:

a. For whom any required application form has been completed;

- b. For whom any required cost has been paid; and
- c. For whom a *covered trip* is scheduled.

**Loss** means an **unforeseen** event or incident (subject to the exceptions contained in the following sentences) sustained by **you** as a direct result of one (1) or more of the events against which **we** have undertaken to compensate **you**. **Loss** does not include lost profits or lost revenues of any kind, business interruption damages, or any pain and suffering damages. **Loss** also does not include any form of consequential, incidental, or indirect damages or **injury**.

#### *Medically necessary* means a treatment, service, or supply:

- a. Is essential for diagnosis, treatment or care of the *accidental injury* or *sickness* for which it is prescribed or performed;
- b. Meets generally accepted standards of medical practice; and
- c. Is ordered by a *physician* and performed under his or her care, supervision or order.

*Mental, nervous or psychological disorder* means a mental or nervous health condition including, but not limited to: anxiety, depression, neurosis, phobia, psychosis; or any related physical manifestation.

**Mountain climbing** means the ascent or descent of a mountain requiring the use of specialized equipment, including, but not limited to, ropes, belay devices, pick-axes, anchors, bolts, crampons, carabiners, and lead or top-rope anchoring equipment.

#### Natural disaster means:

- a. A flood (due to natural causes);
- b. Tsunami;
- c. Hurricane;
- d. Tropical storm;
- e. Tornado;
- f. Earthquake;
- g. Mudslide;
- h. Avalanche;
- i. Landslide;
- j. Volcanic eruption;
- k. Sandstorm;
- I. Sinkhole;
- m. Wildfire;
- n. Severe windstorm, such as a derecho or similar sudden and severe wind event; or
- o. Blizzard.

*Normal pregnancy or childbirth* means a pregnancy or childbirth that is free of complications or problems.

Pandemic means an epidemic over a wide geographic area that affects a large portion of the population.

**Payments or deposits** means the cash, check, or credit card amounts actually paid for **your covered trip**. Certificates, vouchers, frequent traveler rewards, miles or points, discounts and/or credits applied (in part or in full) towards the cost of **your covered trip** are not **payments or deposits** as defined herein.

Physician means a licensed practitioner of medical, surgical, dental, services or the healing arts including

accredited Christian Science Practitioner, acting within the scope of his/her license. The treating *physician* cannot be *you*, *your traveling companion*, a *family member*, or a *business partner*.

**Policy** means this individual policy document, the **schedule of benefits**, and any endorsements, riders or amendments that will attach during the Period of Coverage.

*Pre-existing medical condition* means an *injury, sickness*, death or other condition of *you, your traveling companion, family member, business partner* or *service animal*, to which any of the following applied within the sixty (60) day period immediately preceding and including the purchase date of this policy:

- a. First manifested itself, worsened, became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or
- b. Care, testing or treatment was given or recommended by a *physician*; or
- c. Required a change in prescribed medication.

Change in prescribed medication means the dosage or frequency of a medication has been reduced, increased, stopped and/or new medications have been prescribed due to the worsening of an underlying condition that is being treated with the medication, unless the change is:

- a. Between a brand name and a generic medication with comparable dosage; or
- b. An adjustment to insulin or anti-coagulant dosage.

**Prepaid** means **payments or deposits** paid by **you** for **travel arrangements** for **your covered trip** prior to **your** actual **departure date** or **scheduled departure date**. **Payments or deposits** for shore excursions, theater, concert or event tickets or fees, or sightseeing, if such arrangements are made during **your covered trip** and are to be used prior to the **scheduled return date** of **your covered trip** are not considered **prepaid** as defined herein.

Primary residence means a residence from which you are leaving to start your covered trip.

**Professional athletic event** means a sporting contest in which **you** participate under contract in exchange for an agreed-upon salary. This does not include athletes participating in exchange for a scholarship or tuition.

**Qualified diver** means a diver that is certified by a recognized scuba diving authority such as the Professional Association of Diving Instructors, and is diving within the parameters of that certification, up to a maximum depth of forty (40) meters or one hundred thirty (130) feet.

**Quarantine(d)** means **you** or **your traveling companion** are ordered into a mandatory confinement intended to stop the spread of a contagious disease to which **you** or **your traveling companion** may have been exposed. **Quarantine(d)** does not include a **government** recommended or mandated **social distancing**, **shelter in place** or **stay at home** order.

**Reservation(s)** mean(s) a confirmed stay at a **hotel** or resort with a confirmed arrival date and a confirmed **departure date** made through the **travel supplier** or **property management company**.

*Return date* means the date on which *you* are scheduled to return to the point where the *covered trip* started or to a different specified *return destination*.

*Return destination* means *your primary residence* or the place to which *you* expect to return from *your covered trip*.

Schedule of benefits means the document that lists the base policy benefits and the amount of coverage for each

benefit, as well as options that may be added to *your policy*. Each of these benefits will pay up to the limit shown for covered *losses*.

Scheduled departure date means the date on which you are originally scheduled to leave on the covered trip.

*Scheduled return date* means the date on which *you* are originally scheduled to return to the point of origin or to a different final *destination* or to *your primary residence* from a *covered trip*.

*Service animal* means any guide dog, signal dog, or other animal individually trained to work or perform tasks for the benefit of an individual with a disability, including, but not limited to, guiding persons with impaired vision, alerting persons with impaired hearing to intruders or sounds, pulling a wheelchair, or fetching dropped items.

*Severe weather* means hazardous weather conditions including but not limited to windstorms, hurricanes, tornadoes, fog, hailstorms, rainstorms, snow storms, or ice storms.

**Shelter in place order** means **you** are required to stay indoors by official **government** order barring a specific, justifiable reason during extenuating circumstances, such as a public emergency.

*Sickness* means an illness or disease diagnosed or treated by a *physician* after *your effective date* of coverage under this *policy*. *Sickness* does not include *mental, nervous or psychological disorder*.

*Social distancing* means the practice of keeping space between *you* and others to reduce the chance of contact with those who knowingly or unknowingly carry an illness.

### Sportsman's or sporting equipment means:

- a. Hunting equipment including, but not limited to guns, bows and arrows;
- b. Fishing equipment including, but not limited to rods, reels and tackle;
- c. Ski gear, including, but not limited to skis, ski poles, ski bindings, boots and snowboards;
- d. Golf equipment, including but not limited to golf clubs and golf balls;
- e. Scuba gear, including but not limited to wetsuits, scuba tank, scuba mask, gloves, regulator and fins;
- f. Surfboards or paddleboards;
- g. Kayaks or canoes; and
- h. Any other similar gear or equipment utilized by *you* for similar activities during the *covered trip*.

This includes such equipment that is used by **you** on **your covered trip** whether owned, borrowed or rented.

Spouse means your legal spouse, civil union partner, or domestic partner.

**Stay at home order** means an order from a government authority to restrict movements of a population as a strategy for suppressing or mitigating an *epidemic* or a *pandemic* by ordering *you* to stay at home except for essential tasks, or to work in an essential business.

Strike means a stoppage of work which:

- a. Is announced, organized, and sanctioned by a labor union; and
- b. Interferes with the normal departure and arrival of a *common carrier*.

This includes work slowdowns and sickouts. *Your* coverage must be effective prior to when the *strike* is foreseeable. A *strike* is foreseeable on the date labor union members vote to approve a *strike*.

**Terrorist incident** means an act of violence that is deemed terrorism by the U.S. Department of State, or that is committed by any person acting on behalf of, or in connection with, any organization which is classified as a Foreign Terrorist Organization by the U.S. Department of State. The following are not considered **terrorist incidents**: an act of war (declared or undeclared), **civil disorder**, or riot. Not all acts of violence, even when committed by known terrorist organizations, are considered **terrorist incidents** for the purpose of this definition. Any act of violence will only be declared a **terrorist incident** if/when the US Department of State declares it so.

*Transportation* means any land, sea or air conveyance required to transport *you* and includes *common carriers* and private motor vehicles.

#### Travel arrangements means:

- a. Transportation;
- b. Accommodations; and
- c. Other specified services arranged by the *travel supplier* or *you* or others for *your covered trip*.

Travel supplier means any entity involved in providing travel services or travel arrangements.

*Traveling companion* means person(s) booked to accompany *you* on *your covered trip* and/or person(s) sharing *travel arrangements* with *you*.

*Trip* means a period of travel from *your primary residence* for a period that does not exceed one hundred twenty (120) days. *Your trip* must have a defined *departure date* and *return date*.

#### Trip cost means:

- a. The dollar amount of *trip payments or deposits*, which are subject to *cancellation penalties*, paid by *you* prior *your covered trip departure date* and as stated on *your* application; or
- b. The cost of any additional *prepaid payments or deposits* paid by *you* for the same *covered trip*, after application for coverage under this *policy* provided *you* amend *your policy* limit to include the cost of the additional *travel arrangements* and pays any additional premium.

Unforeseen means not known, anticipated or reasonably expected, and occurring after the effective date of your policy.

## **Uninhabitable** means:

- a. The building structure itself is unstable and there is a risk of collapse in whole or in part;
- b. There is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail or flood;
- c. Immediate safety hazards have yet to be cleared, such as debris or downed electrical lines;
- d. The property is without electricity, gas, sewer service or water for forty-eight (48) hours or more; or
- e. Local government authorities have issued a mandatory evacuation.

**Unqualified diver** means a diver who is not certified by a recognized scuba diving authority such as the Professional Association of Diving Instructors. The maximum depth allowable for an **unqualified diver** is twelve (12) meters or forty (40) feet. An **unqualified diver** must be under the supervision or guidance of a qualified divemaster or instructor

We, us or our means Spinnaker Insurance Company and its agents.

#### *Winter activities* means:

a. Skiing or snowboarding, except *extreme skiing* and *extreme snowboarding*;

- b. Glacier walking, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- c. Dog sled rides, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- d. Ice climbing, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- e. Ice curling;
- f. Ice diving, only when performed under the supervision or guidance of a qualified outfitter, guide or tour operator;
- g. Ice hockey;
- h. Ice skating;
- i. Sledding;
- j. Speed skating;
- k. Tobogganing; or
- I. Any activity materially similar to those activities described herein.

### You or your means the insured.

#### SECTION II. GENERAL PROVISIONS

The following provisions apply to all coverages:

**Entire Contract; Changes:** This *policy, schedule of benefits,* and any attachments are the entire contract of insurance. No agent may change it in any way. Only an officer of *our* company may approve a change. Any such change must be shown in this *policy* or its attachments.

**Legal Action:** No legal action for a claim or in equity can be brought against *us* until sixty (60) days after *we* receive proof of *loss* as required by this *policy*. No action may be brought against *us* after the expiration of three (3) years after the time written proof of *loss* is required to be furnished.

**Payment of Premium:** Coverage is not effective unless all premium due has been paid to **us** or **our** designated representative prior to a date of **loss** or insured occurrence.

**Subrogation:** When someone is responsible for *your loss, we* have the right to recover any payments *we* have made to *you* or someone else in relation to *your* claim, as permitted by law. In such case, *we* may require any person receiving payment from *us* to assign their rights to recover such payment, including signing and providing any documents reasonably required allowing *us* to do so. Everyone eligible to receive payment for a claim submitted to *us* must cooperate with this process and must refrain from doing anything that would adversely affect *our* rights to recover payment.

**Recovery:** To the extent *we* pay for a *loss* suffered by *you*, *we* may recover from funds received by *you* from a third party. *You* will be made whole before *we* begin recovery. *You* must help *us* preserve *our* rights against those responsible for the *loss*. This may involve signing any papers and taking any other steps *we* may reasonably require. When *you* have been paid benefits under this *policy* but also recover from another policy, the amount recovered from the other policy shall be held in trust for *us* by *you* and reimbursed to *us* to the extent of *our* payment.

As a condition to receiving the applicable benefits listed above, **you** agree, except as may be limited or prohibited by applicable law, to reimburse **us** for any such benefits paid to or on behalf of **you**, if such benefits are recovered, in any form, from any third party or coverage.

In the event **we** claim a portion of a third party recovery from a suit brought by **you**, **we** will pay a pro- rate portion of the attorney's fees incurred in bring the suit.

**Termination of this** *policy*: Termination of this *policy* will not affect a claim for *loss* if the *loss* occurred while this *policy* was in force.

**Primary Insurance:** The insurance provided by this *policy* will be paid on a *primary* basis. This is subject to recovery. *We* will pay the claim first then seek to recover any payments made by a third party.

**Insurance With Other Insurers:** If there is other valid coverage with another insurer that provides coverage for the same *loss, we* will pay only the proportion of the *loss* that *our* limit for that *loss* bears to the total limit of all insurance covering that *loss*, plus such portion of the premium paid that exceeds the pro-rata portion for the benefits so determined.

**Concealment or Fraud:** *We* do not provide coverage if *you* or someone acting on *your* behalf, has made false statements, intentionally concealed or misrepresented any material fact or circumstance relating to this *policy* or

claim.

Acts of Agents: No agent or any person or entity has authority to accept service of the required proof of *loss* or demand arbitration on *our* behalf nor to alter, modify, or waive any of the provisions of this *policy*.

**Physical Examinations** and Autopsy: *We* have the right to have *you* medically examined as reasonably necessary to make a decision about *your* medical claim. If someone covered by *your policy* dies, *we* may also require an autopsy (except where prohibited by law). *We* will cover the cost of these medical examinations or autopsies.

**Policy Changes:** *You* or the *policy* purchaser may request changes to the *policy* by notifying *us*. All other changes to *your policy* must be requested prior to *your* original *departure date*. If the change results in an increase in premium, *you* must pay the amount due. If the requested change results in a premium decrease, we will refund the return premium to the *policy* purchaser. Requested changes will be effective with *our* acceptance and *your* payment of premium due.

**Arbitration:** *We* and one (1) or more *insured(s)* with respect to the rights of such *insured(s)* under this *policy* shall be submitted to binding arbitration, which shall be the sole forum for the resolution of disputes under or in connection with this *policy*, upon the written request of any party. The Commercial Arbitration Rules of the American Arbitration Association shall apply, except with respect to the selection of arbitrators, the payment of arbitration fees and costs, the location and the entry of the arbitration award.

**Selection of Arbitrators:** One arbitrator shall be chosen by one side and another arbitrator by the other side, and a third arbitrator shall be chosen by the first two arbitrators before they enter into arbitration. All arbitrators shall be disinterested.

**Payment of Arbitration Fees and Costs:** Each side shall pay the fee of its chosen arbitrator and half the fee of the third arbitrator. The remaining costs of the arbitration, including legal fees and disbursements, shall be paid as the written decision of the arbitrators directs, with it being expressly understood that the intention is to favor reimbursement of such fees and expenses to **you** that has brought a meritorious dispute. The fees to be borne by a side consisting of more than one party shall be divided equally among such parties.

**Location:** Any arbitration hereunder shall take place in the state of residence, unless otherwise mutually agreed upon by the two sides.

**Entry of Arbitration Award:** Judgment upon an arbitration award hereunder may be entered in, and enforced by, any court of competent jurisdiction.

Transfer of Coverage: Coverage under this *policy* cannot be transferred by *you* to anyone else.

**Assignment:** You may not assign any of your rights, privileges or benefits under this policy without our prior consent.

**Controlling Law:** Any part of this *policy* that conflicts with the state law where this *policy* is issued is changed to meet the minimum requirements of that law.

**You** are responsible for meeting all requirements to travel, including obtaining required travel authorizations/documentation (for example, passports or visas), obtaining required immunizations (unless **you** are medically unable) and medical supplies/equipment (including verifying that **your** supplies/equipment meet **your travel supplier's** requirements), and anything else required for **you** to travel.

#### SECTION III. ELIGIBILITY AND PERIOD OF COVERAGE

**ELIGIBILITY AND ENROLLMENT:** *You* must apply for *your* own insurance *policy* and pay premium due. If a minor *dependent child* is traveling with *you*, *you* must complete an application for the *child* and pay premium due. If accepted by *us*, each applicant will become an *insured*.

*You* are only eligible for coverage if *we* accept *your* request for insurance. *Your policy's* coverage *effective date* and coverage end date are indicated on *your confirmation*. The *policy* is effective on the day after *we* receive both the application and the full premium. If this *policy* was purchased by mail, the *policy* is effective the day after both the order and the full premium are postmarked. The order and full premium must be received before the *departure date*.

In order to be eligible for coverage, *losses* must occur while *your policy* is in effect.

Except for one-way and same-day return *trips*, the *departure date* and *return date* that *you* provided at time of purchase are counted as two separate days of travel when *we* calculate the duration of *your covered trip*.

Subject to payment of any premium due:

## WHEN YOUR COVERAGE BEGINS

For Trip Cancellation: Coverage begins at 12:01 A.M. local time, at **your** location on the day after the required premium for such coverage is received by **us** or **our** Administrator as shown in the **schedule of benefits**. Coverage ends at the point and time of departure on **your scheduled departure date**.

In the event the *scheduled departure date* and/or the *scheduled return date* are delayed, or the point and time of departure and/or point and time of return are changed because of circumstances over which neither the *travel supplier* nor *you* have control, *your* term of coverage shall be automatically adjusted in accordance with *your* or the *travel supplier's* notice to *us* of the delay or change.

#### WHEN YOUR COVERAGE ENDS

Trip Cancellation coverages end on the earlier of:

- a. The cancellation of your covered trip; or
- b. 11:59 P.M. on the day before the *scheduled departure date*.

#### SECTION IV. COVERAGES

## TRIP CANCELLATION

*We* will pay *you* up to the maximum amount shown in the *schedule of benefits* for *loss(es)* incurred by *you* or *your traveling companion* for a *covered trip* cancelled up to the date and time of departure due to any of the following *unforeseen* events:

## **Health and Family**

- a. Any *injury*, death, or *sickness*;
  - Occurring to you, your traveling companion, a family member traveling with you or service animal, that is so disabling as to cause a reasonable person to cancel their covered trip, which results in medically imposed restrictions as certified by a physician at the time of loss preventing your continued use of the covered trip;
  - Occurring to a *family member* not traveling with *you* that is considered life-threatening, as certified by a *physician* or they require *your* immediate care. Such disability must be so disabling as to reasonably cause a *covered trip* to be canceled and must be certified by a *physician*;
  - 3. Occurring to *your business partner* that is so disabling as to cause a reasonable person to cancel their *covered trip* to assume daily management of the business. Such disability must be certified by a *physician*.

## **Transportation and Accommodation**

- a. You and/or your traveling companion are directly involved in a traffic accident, while en route to your destination. Traffic accident must be substantiated by a police report;
- Mechanical/Equipment failure of a *common carrier* that occurs on or within one (1) day of a *covered trip* scheduled departure date and causes complete cessation of your travel for at least twenty-four (24) consecutive hours;
- c. Strike causing cancellation or delay of your pre-arranged travel services for at least twenty-four (24) consecutive hours that causes complete cessation of services of your common carrier for at least forty-eight (48) consecutive hours.

## Weather

- a. Inclement weather, if all of the following conditions are met:
  - 1. Prevents you from reaching your destination;
- b. Your or your traveling companion's primary residence being made uninhabitable or inaccessible by natural disaster, flood, tsunami, hurricane, tornado, earthquake, mudslide, avalanche, landslide, volcanic eruption, fire, wildfire, or blizzard that is due to natural causes; vandalism or burglary. Coverage for a hurricane applies only if insurance was purchased prior to the storm being upgraded to a hurricane.

## **Personal Safety and Security**

- A politically motivated *terrorist incident* occurs within a fifty (50) mile radius of the territorial *city* limits of the *city* to be visited as shown in *your* itinerary and if the United States government issues a travel *advisory* indicating that Americans should not travel to a *city* named on the itinerary within thirty (30) days of *your scheduled departure date*;
- b. **You** and/or **your traveling companion** being hijacked, **quarantined**, required to serve on a jury, subpoenaed, or required to appear as a witness in a legal action, provided **you** or **your traveling companion** are not a party to the legal action or appearing as a law enforcement officer;
- c. Theft of passports, travel documents, or visas specifically required for *your covered trip* within fourteen (14) days of the *scheduled departure date*. The theft must be substantiated by a police report;
- d. Cancellation of a *covered trip* as a result of: riot, or *civil disorder* for at least twenty-four (24) consecutive

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#### Work/Military/School

- a. You or your traveling companion or parent or legal guardian if the insured is a child has an involuntary employer-initiated permanent transfer within the same organization of two hundred fifty (250) or more miles which requires your primary residence to be relocated, provided that you have been an active employee with the same employer for at least two (2) continuous years. Notification of the transfer must occur after the effective date and the transfer must occur within thirty (30) days of the scheduled departure date;
- b. You or your traveling companion or parent or legal guardian if the insured is a child are involuntarily terminated or laid off through no fault of your own more than thirty (30) days after your effective date, provided that you have been an active employee with the same employer for at least two (2) continuous years. Termination must occur following the effective date. This provision is not applicable to temporary employment, seasonal employment, independent contractors or self-employed persons;
- c. You or your traveling companion are employed as a full time teacher or other full time employee, a student, or parent of a student at a primary or secondary school and are required to complete an extended school year that falls on or beyond the *scheduled departure date*. School extensions due to extra-curricular or athletic events are not covered;
- d. *Your* business operations are interrupted by fire, flood, burglary, vandalism, product recall, *bankruptcy*, *natural disaster*, or *financial default*;
- e. You, your traveling companion or family member are called to active military duty to provide aid or relief in the event of a natural disaster, or military leave is revoked or reassigned within thirty (30) days of the scheduled departure date, except because of war, the War Powers Act, or disciplinary action. The military leave for the dates of travel must have been approved prior to the effective date.

#### **Trip Cancellation Exclusions:**

In addition to the General Limitations and Exclusions, the following exclusions apply to the Trip Cancellation Benefit. No benefits will be paid for any *loss* for, caused by, or resulting from:

- a. *Travel arrangements* canceled by an airline, charter, *cruise* line, or tour operator, except as provided elsewhere in the plan;
- b. Changes in plans by *you*, a *family member*, or *your traveling companion*, for any reason;
- c. Financial circumstances of you, a family member, or your traveling companion;
- d. Any business or contractual obligations of you, a family member, or your traveling companion;
- e. Any government regulation or prohibition;
- f. An event which occurs prior to your coverage effective date;
- g. Failure of any tour operator, *common carrier*, person or agency to provide the bargained-for *travel arrangements* or to refund money due *you*;
- h. Financial default; or
- i. Traveling for the purpose of securing medical treatment.

#### SECTION V. CLAIMS PROCEDURES AND PAYMENT

All benefits will be paid in United States Dollars.

**Payment of Claims: When Paid:** Payable claims will be paid as soon as *we* or *our* designated representative receive and verify the completeness of all required documentation of the *loss*.

**Payment of Claims: to Whom Paid:** Benefits are payable to the *insured* who purchased this *policy*. Any benefits payable due to *your* death will be paid to the survivors of the first surviving class of those that follow:

- a. The beneficiary named by **you** and on file with **we** or **our** designated representative; if none is available, then
- b. To *your spouse*, if living. If no living *spouse*, then
- c. To **your** estate.
- d. In the event *you* are a minor, incompetent or otherwise unable to give a valid release for the claim, *we* may make arrangements to pay claims to *your* legal guardian, committee or other qualified representative.

**Notice of Claim:** *You* or someone acting on *your* behalf must contact *our* administrator listed on *your policy*, within twenty (20) days, or as soon as reasonably possible. *You* should be prepared to describe details regarding the *loss* and *your covered trip*. *Our* administrator will provide a claim form to *you* for completion and signature.

**Claim Forms:** *We* will send the claimant proof of loss forms within fifteen (15) days after *we* receive notice. If the claimant does not receive the proof of loss forms within fifteen (15) days after submitting notice, he or she can send *us* a detailed written report of the claim and the extension of the *loss*. *We* will accept this report as proof of loss if sent within the time fixed below for filing proof of loss.

**Proof of Loss:** The claim forms must be sent back to *us* or *our* designated representative no more than ninety (90) days after a covered *loss* occurs or ends, or as soon after that as is reasonably possible. Failure to furnish such proof within such time will not invalidate nor reduce any claim if it shall be shown not to have been reasonably possible to furnish such proof during that time. All claims under this *policy* must be submitted to *us* or *our* designated representative no later than one (1) year after the date of *loss* or as soon as reasonably possible. All claims require *you* to provide *us* or *our* designated representative with the following:

- a. The benefit-specific documentation shown below; and
- b. A *covered trip* invoice, itinerary or *confirmation* showing details of the *covered trip* (dates of travel, *destination*, etc.); and
- c. Any other information reasonably required to prove the *loss*.

**Other Insurance with Us:** *You* may be covered under only one (1) travel *policy* with **us** for each *covered trip*. If *you* are covered under more than one (1) such *policy*, *you* may select the coverage that is to remain in effect. In the event of death, the selection will be made by the beneficiary or estate. *We* will refund the premiums paid for the duplicate coverage, less claims paid, and the duplicate coverage will be cancelled.

## SECTION VI. GENERAL LIMITATIONS AND EXCLUSIONS

In addition to any applicable benefit-specific exclusions, the following exclusions apply to all *losses* and all benefits. Unless otherwise shown below, these exclusions apply to *you*, *your traveling companion*, *family member*, *business partner* and *service animal*. This *policy* does not cover any *loss* for, caused by or resulting from:

- a. Intentionally self-inflicted *injury*, suicide, or attempted suicide of *you*, *your family member*, or *your traveling companion* while sane or insane;
- b. War (whether declared or not) or act of war, participation in a *civil disorder*, riot, insurrection or unrest (unless specifically covered herein);
- c. Operating or working as a crew member (including as a trainee or learner/student) aboard any aircraft or commercial vehicle or commercial watercraft;
- d. Mental, nervous or psychological disorder;
- e. Being under the influence of drugs or narcotics, unless administered upon the advice of a *physician* as prescribed;
- f. Intoxication above the legal limit at your location at the time of loss;
- g. Commission or the attempt to commit a criminal act by *you, your traveling companion*, or *your family member*, whether insured or not;
- h. Participation in or *loss* due to *adventure activities*, unless the Adventure Sports Coverage is included with *your* plan;
- i. Participation in or *loss* due to *dangerous activities*;
- j. Participation in or *loss* due to *extreme activities*, unless the Extreme Activities Coverage is included with *your* plan;
- k. Participation in or *loss* due to *winter activities*, unless the Winter Activities Coverage is included with *your* plan;
- I. Any non-emergency treatment or surgery, routine physical examinations, hearing aids, eye glasses or contact lenses;
- m. Any treatment or medication which, at the time of departure, is required to be continued during the *covered trip*;
- n. *Normal pregnancy or childbirth*, or elective abortion. However, *unforeseen complications of pregnancy* are not excluded;
- o. Traveling for the purpose of securing medical treatment;
- p. Directly or indirectly, the actual, alleged or threatened discharge, dispersal, seepage, migration, escape, release or exposure to any hazardous biological, chemical, nuclear radioactive material, gas, matter or contamination;
- q. Care or treatment for which compensation is payable under Worker's Compensation Law, any Occupational Disease law; the 4800 Time Benefit plan or similar legislation;
- r. Accidental injury or sickness when traveling against the advice of a physician;
- s. Care or treatment which is not *medically necessary*, except for related reconstructive surgery resulting from trauma, infection or disease;
- t. Any *loss*, condition, or event that was known, foreseeable, intended, or expected when *your policy* was purchased;
- u. Any failure of a provider of travel related services (including any *travel supplier*) to provide the bargained-for travel services or to refund money due *you*;
- v. Your participation in *civil disorder*, riot or a felony;
- w. Acts, travel alerts/bulletins, or prohibitions by any government or public authority;
- x. A p**andemic** or **epidemic**;
- y. Your failure to derive pleasure in, or benefit from, or profit from your covered trip;
- z. Travel supplier restrictions on any baggage, including medical supplies and equipment;
- aa. If your tickets do not contain specific travel dates (open tickets); or
- bb. Any *loss* or expense incurred as the result of a *pre-existing medical condition*.

## PRE-EXISTING MEDICAL CONDITION EXCLUSION WAIVER

We will waive the *pre-existing medical condition* exclusion if the following conditions are met:

- a. This *policy* is purchased within two (2) days of *initial trip payment*;
- b. The amount of coverage purchased equals all *prepaid* nonrefundable *payments or deposits* applicable to the *trip* at the time of purchase;
- c. All *insureds* are medically able to travel when this *policy* cost is paid; and
- d. The *trip cost* does not exceed thirty thousand dollars (\$20,000), per person.

This coverage will be terminated and no benefits will be paid under this *Pre-existing Medical Condition* Exclusion Waiver coverage if the full costs of all *prepaid*, non-refundable *trip* arrangements are not insured.

#### SPINNAKER INSURANCE COMPANY

#### CONNECTICUT AMENDATORY ENDORSEMENT

This endorsement modifies insurance provided under the following:

#### TRAVEL INSURANCE POLICY

This endorsement is made a part of the Policy to which it is attached. This endorsement is subject to all of the provisions and limitations of the Policy. If there is a conflict between the Policy and this endorsement, the terms of the endorsement will govern.

SECTION II. GENERAL PROVISIONS, the Arbitration provision is replaced by the following:

**Arbitration:** *We* and one (1) or more *insured(s)* with respect to the rights of such *insured(s)* under this *policy* shall be voluntarily submitted to non-binding arbitration upon the written request of any party. The Commercial Arbitration Rules of the American Arbitration Association shall apply, except with respect to the selection of arbitrators, the payment of arbitration fees and costs, the location and the entry of the arbitration award.

All other provisions of the Policy apply.

## SPINNAKER

Rev. 06/2022

FACTS	CTS WHAT SPINNAKER DOES WITH YOUR PERSONAL INFORMATION?		
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.		
What?	<ul> <li>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</li> <li>Name and date of birth</li> <li>Property information and property records</li> <li>Checking account information and credit-based insurance scores</li> </ul>		
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Spinnaker chooses to share; and whether you can limit this sharing.		
Reasons we can share your personal information		Does Spinnaker share?	Can you limit this sharing?
For our everyday business purposes — such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus		Yes	No
For our marketing purposes — to offer our products and services to you		No	No
For joint marketing with other financial companies		No	No
For our affiliates' everyday business purposes — information about your transactions and experiences		Yes	No
For our affiliates' everyday business purposes — information about your creditworthiness		No	We don't share
For our affiliates to market to you		No	We don't share
For nonaffiliates to market to you		No	We don't share
Questions?	Call toll-free 1-800-747-3214.		

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Who we are	
Who is providing this notice?	Spinnaker Insurance Company and its insurance company subsidiaries
What we do	
How does Spinnaker protect my personal information?	To protect your personal information from unauthorized access and use, we maintain physical, electronic, and procedural safeguards that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Spinnaker collect my personal information?	<ul> <li>We collect your personal information, for example, when you:</li> <li>apply for insurance or pay insurance premiums</li> <li>provide account information or give us your contact information</li> <li>file an insurance claim</li> <li>We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.</li> </ul>
Why can't I limit all sharing?	<ul> <li>Federal law gives you the right to limit only</li> <li>sharing for affiliates' everyday business purposes – information about your creditworthiness</li> <li>affiliates from using your information to market to you</li> <li>sharing for nonaffiliates to market to you</li> <li>State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law.</li> </ul>
Definitions	
Affiliates	<ul> <li>Companies related by common ownership or control. They can be financial and nonfinancial companies.</li> <li>Our affiliates include financial companies such as companies that share the Spinnaker, Mainsail, Masthead, or Hippo brand.</li> </ul>
Nonaffiliates	<ul> <li>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</li> <li>Spinnaker does not share with nonaffiliates so they can market to you.</li> </ul>
Joint marketing	<ul> <li>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</li> <li>Spinnaker doesn't jointly market.</li> </ul>

#### Other Important Information

We will also comply with more restrictive state laws to the extent they apply.

**California Residents:** We will not share your information with nonaffiliated third parties for their marketing purposes except with your express consent. California residents will also be provided an important Privacy Choices" notice explaining their rights under the California Financia Information Privacy Act.

**Nevada Residents**: Nevada aw a lows us to make marketing calls to our existing customers listed on the National Do Not Call Registry. This notice is provided to you pursuant to state law. If you prefer not to receive marketing calls from us, you may be placed on our internal Do Not Call List by calling 1-888-221-7742. If you would like more information about our practices, you may call 1-888-221-7742. You may also contact the Nevada Attorney General's office: Bureau of Consumer Protection, Office of the Nevada Attorney General, 555 E. Washington St., Suite 3900, Las Vegas, NV 89101; Phone number: (702) 486-3132; email: <a href="mailto:aginfo@ag.nv.gov">aginfo@ag.nv.gov</a>.

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**Vermont Residents**: We will not disclose information about your creditworthiness to our affiliates and will not disclose your personal information, credit report, or health information to nonaffiliated third parties to market to you, other than as permitted by Vermont law, unless you authorize us to make those disclosures.

**AZ, CA, CT, GA, IL, ME, MA, MN, MT, NV, NJ, NC, OH, OR, or VA Residents.** You have the right to request access to, correction, and deletion of personal information that we have about you. Please contact us at <u>compliance@spinnakerins.com</u> or Spinnaker Insurance Company, 1 Pluckemin Way, Suite 102, Bedminster, NJ 07921 with a notarized letter and include your name, address, and your policy, contract, or account number, and describe the information you wish to access, delete, or correct.

## SPINNAKER INSURANCE COMPANY

In Witness Whereof, the Spinnaker Insurance Company has caused this policy to be signed by its Chief Executive Officer and Secretary at Bedminster, New Jersey, and countersigned on the declarations page by a duly Authorized Agent of the Company.

Deviddyny

David Ingrey, Chief Executive Officer, Secretary



Powered by **battleface** 

**battleface Insurance Services LLC** 45 East Lincoln Street Columbus, OH 43215

**t:** +1 (855) 998 2928 **e:** usa@battleface.com