

emergency medical evacuation/repatriation

The program will pay Covered Expenses incurred if any covered injury or illness commencing during the Period of Coverage results in a Medically Necessary Emergency Medical Evacuation or Repatriation in consultation with the local attending Physician.

return of mortal remains

The Program will pay the reasonable Covered Expenses incurred up to a maximum of \$50,000 to return your remains to your Home Country, if you should die.

emergency medical reunion

When Emergency Medical Evacuation or Repatriation is arranged and the attending Physician recommends that a family member travel with you, the program will arrange and pay up to \$50,000 for round-trip economy-class transportation for one individual of your choice, from your Home Country.

political evacuation and repatriation

If due to political or military events in a host country, a formal recommendation from the appropriate authorities is issued for you to leave the host country, or you are expelled or declared persona non-grata by the host country, all reasonable expenses incurred for transportation to the nearest place of safety or for repatriation to your Home Country are covered up to a maximum of \$50,000 with in 10 days of evacuation

interruption of trip

If you are unable to continue your Trip due to the death of an Immediate Family member (*parent, spouse, sibling or child*) or due to serious damage to your principal residence from fire, flood or similar natural disaster (*tornado, earthquake, hurricane, etc.*), the program will reimburse you (*up to \$5,000*) for the cost of economy travel, less the value of applied credit from an unused return travel ticket.

felonious assault benefit

If you are Injured as a result of a Felonious Assault while traveling outside of your Home Country, the program will pay \$10,000. This benefit is in addition to any other benefit available under this program. Refer to the Program summary for full description and conditions.

terrorism

Coverage for Injuries and Illnesses up to \$50,000 lifetime maximum resulting from Terrorist Activity. Certain restrictions apply

pre-notification/referral

In order to ensure that you receive the best possible care, we require that you or someone on your behalf contact our administrator Seven Corners Assist prior to receiving any medical treatment worldwide

exclusions

For Medical benefits, certain exclusions including pre-existing conditions apply. Please contact us for details.

refund of premium

We realize there is uncertainty in international travel. Refund of total plan cost will only be considered if written request is received by our program administrator prior to the Effective Date of Coverage. If written request is received after the Effective Date of coverage, the unused portion of the plan cost may be refunded minus a cancellation fee, provided no claim has been submitted.

HOSPITALS ACCEPTING OUR INSURANCE CLIENTS

The following are ready to accept policy holders for any emergency medical treatment 24/7.

Ethiopia

- Myungsung Korea Hospital
- St. Gabriel Hospital
- Hayat Hospital
- International Cardiovascular Hospital
- Girum Hospital and many more...

Should you require evacuation to a tertiary overseas facility the following nearby hospitals are available for your utmost care in addition to thousands of centers in Europe, USA and Middle East

INSURANCE UNDERWRITERS

This plan is underwritten by Certain Underwriters at Lloyd's, London. Lloyd's has over 300 years of experience in the international insurance business and is one of the largest insurance entities in the world. In addition, Lloyd's is rated "A" (Excellent) by the A.M. Best Company and "A+" (Strong) by Standard & Poor's.

FOR ADDITIONAL INFORMATION

Please contact

InsureTripEthiopia.com

114 Birchtree Ct.

State College, PA USA

Please visit: www.insuretripethiopia.com for detailed information and online quoting

email: info@insuretripethiopia.com

[Addis Ababa Liaison](mailto:AddisAbabaLiaison@insuretripethiopia.com)

Tel : 0911914824

Comprehensive travel medical insurance that covers you during your visit to Ethiopia!



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ethiopia.com

Enjoy your trip... Let us worry about your well being.

schedule of coverage

All coverages and plan costs listed in this brochure are in U.S. Dollar amounts.

medical maximum: \$60,000; \$125,000; \$600,000; \$1,000,000 (ages 80+, maximum limited to \$20,000)

deductible: \$0; \$100; \$250; \$500; \$1000; \$2500 Deductible is per person per Policy Period, maximum of 3 Policy Period deductibles per family. The selected Deductible and Coinsurance amount must be met for each 364-day Policy Period (see Continuing Coverage).

coinsurance: inside the united states and canada: After you pay the deductible, the program pays 80% of the next \$5,000 of eligible expenses, then 100% to the selected Medical Maximum.

outside the united states and canada: After you pay the deductible, the program pays 100% to the selected Medical Maximum.

hospital indemnity: \$150/night, up to a maximum of 30 days (traveling outside the U.S. and Canada). In addition to any other Covered Expense.

dental (emergency): \$100 (\$500 for accidents) Only available to programs purchased for 1 month or more.

emergency medical evacuation/ repatriation: \$300,000 (in addition to the Medical Maximum)

home country coverage:
incidental trips to the home country: \$50,000
follow me home coverage: \$5,000

return of mortal remains: \$50,000

political evacuation and repatriation: \$50,000

emergency reunion: \$50,000

return of minor child(ren): \$50,000

interruption of trip: \$5,000

loss of checked luggage: \$250

local ambulance expense: \$5,000

accidental death & dismemberment (ad&d): \$25,000 Principal Sum for Insured or Insured Spouse, \$5,000 for Dependent Child(ren) *Note: In the event of a Common Carrier Accidental Death this benefit will not be paid.*

common carrier accidental death: \$50,000 per adult, \$12,500 per child under age of 19; \$250,000 Maximum per family

coma benefit: \$50,000

felonious assault benefit: \$10,000

hospital room & board: Usual, reasonable and customary to the selected Medical Maximum

intensive care: Usual, reasonable and customary to the selected Medical Maximum

outpatient medical expenses: Usual, reasonable and customary to the selected Medical Maximum

terrorism: Usual, reasonable and customary up to \$50,000 lifetime maximum

waiver of pre-existing conditions: Up to chosen Medical Maximum for U.S. citizens traveling outside the United States & Canada with a Primary Health Plan, otherwise up to \$20,000 (refer to exclusion #1 for details)

For foreign nationals visiting the United States, up to \$200 per day for each night spent in the hospital after being admitted for either a heart attack or stroke. Max. Benefit of \$3,000 (refer to exclusion #1 for details)

benefit period: 180 days

WHY USE OUR TRAVEL MEDICAL INSURANCE?

Each year, millions of people travel beyond the boundaries of their medical insurance. If you are concerned with the potential out-of-pocket expenses that could result from an Injury or Illness while traveling, Our comprehensive travel medical insurance offers medical coverage and emergency services to individuals and families traveling outside their Home Country. For a full description, please visit our website at www.insureTripEthiopia.com. Once you have purchased the program a complete Program Summary will be e-mailed to you.

ELIGIBILITY

Our insurance plan provides coverage, as outlined in this brochure, for individuals and families (including unmarried dependent children over 14 days and under 19 years of age) while traveling outside of their Home Country. Home Country is defined as - The country where a covered person(s) has his/her true, fixed and permanent home and principal establishment.

DESCRIPTION OF COVERAGE

period of coverage

The minimum period of coverage is 5 days, maximum is 364 days.

effective date

Your coverage will begin on the latest of the following: 1) The moment you depart your Home Country; or 2) The date and time the Application and full plan cost is received and accepted by us; or 3) The date requested on the Application

It is the Insured Person's responsibility to maintain all records regarding travel history and age and provide any documents, which would verify Eligibility Requirements

expiration date

Coverage will end on the earlier of the following: 1) Your return to your Home Country (except as provided under the Home Country Coverage); or 2) The date shown on the ID Card, for which premium has been paid; or 3) The date you are no longer eligible under this plan; or 4) When the maximum benefit amount has been paid.

medical benefits

When you incur a covered Injury or Illness, the program will pay Usual, Reasonable and Customary medical charges for Covered Expenses, excess of the chosen Deductible and Coinsurance, up to the selected Medical Maximum. Only such expenses, which are listed below, incurred within 180 days from the onset of an Injury or Illness, and not listed in the Exclusions, shall be considered as Covered Expenses:

1. Charges made by a Hospital for room and board, floor nursing and other services inclusive of charges for professional service (with the exception of personal services of a non-medical nature); provided, however, that expenses do not exceed the Hospital's average charge for semi-private room and board accommodations, charges made for an operating room.

2. Charges made for Intensive Care or Coronary Care charges and nursing services.

3. Charges made for diagnosis, treatment and Surgery by a Physician; charges made for the cost and administration of anesthetics.

4. Charges made for Outpatient treatment, same as any other treatment covered on an Inpatient basis. This includes ambulatory Surgical centers, Physicians' Outpatient visits/examinations, clinic care, and Surgical opinion consultations.

5. Charges for medication, x-ray services, laboratory tests and services, the use of radium and radioactive isotopes, oxygen, blood transfusions, iron lungs, and medical treatment; dressings, drugs, and medicines upon a written prescription of a Physician or Surgeon.

6. Charges for physiotherapy, if recommended by a Physician for the treatment of a specific Disablement.

7. Ground ambulance (within the metropolitan area) up to \$5000 maximum to and from the nearest Hospital with facilities for required treatment. If the covered person is in a rural area and unreachable by ground ambulance, then licensed air ambulance transportation to the nearest metropolitan area.

8. Hotel room charge, when the Covered person, otherwise necessarily confined in a Hospital, shall be under the care of a duly qualified Physician in a hotel room due to unavailability of a Hospital room by reason of capacity or distance or any other circumstances beyond control of the Covered person.

9. Charges made for artificial limbs, eyes, larynx, and orthotic appliances, but not for replacement of such items.

hospital indemnity

If you are hospitalized while traveling outside of the United States and Canada, and the hospitalization is a Covered Expense, you will receive \$150 for each night spent in the hospital, up to a maximum of 30 days.

dental - emergency only

The Emergency Dental Benefit is available, provided you have purchased 1 or more months of coverage. It covers treatment to resolve acute, spontaneous and unexpected pain in sound natural teeth (\$100) or to restore or replace sound natural teeth lost or damaged in an Accident (\$500). Subject to the Deductible and Coinsurance.

loss of checked luggage

If your checked luggage is permanently lost by the airline, the program will reimburse you for the replacement of clothing and personal hygiene items, to a maximum per article limit of \$50 (maximum benefit of \$250). This benefit is secondary to any other (including airline) coverage available. You must furnish proof to the Company that full reimbursement has been obtained from the airline.