

Out-of-Country Insurance Package

THE EMPLOYER PACKET

An insurance package for employers and volunteer-coordinating organizations that have workers (employees or volunteers) serving out of country. The package is designed to provide key coverages for these workers and their families while they serve.



Overview

This package contains valuable information on the insurance policies available to the approved worker.

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Out-of-Country Insurance Package Summary

Policy Period: January 1 thru December 31

The Out-of-Country Insurance Package is comprised of several insurance policies from various companies to meet the needs of workers around the world.

	TYPE OF COVERAGE	COMPANY/POLICY NO.	BENEFITS & LIMITS
	Accident and Sickness Medical (ASM)	ACE American Insurance Co Policy #: GLM N01060995	Medical Expense Benefit up to \$50,000 <ul style="list-style-type: none"> • \$0 Deductible per policy term • Your first \$3,500 of expenses will be reimbursed at 90%, thereafter at 100% per person Accidental Death & Dismemberment up to \$50,000 Emergency Evacuation and Repatriation: 100% of covered expenses not to exceed the Usual and Customary Charges for similar transportation, treatment, services or supplies in the locality where the expense is incurred. Pre-existing Condition: Exclusion applicable except as provided by the policy.
	Life Insurance	Global Benefits Group Policy #: LIS-6497	Benefits: <ul style="list-style-type: none"> • Employee — \$5,000 • Spouse — \$2,500
	Personal Effects & Baggage (PEB)	GENCON Policy #: PR102193-03	Benefit: Up to \$3,000
	International Workers Comp (WC)	Chubb Policy #: PHFD37987621002	Benefits: This insurance applies only in the event a covered individual suffers bodily injury by accident or disease, including death resulting from or arising out of and in the course of employment in the business operations of the world church.

For medical referrals, evacuation, repatriation or other services, please call
International SOS: +1 (215) 942-8226 (Outside the USA, Call Collect)
Member #: 11BCAM749125 (Reference Seventh-day Adventist Church)

Policy Number: GLM N01060995
Organization Name: General Conference Corp. of Seventh-day Adventists

This summary has been prepared for the convenience of the Insured and is not an exact and binding analysis of the coverages. Even though care has been taken in preparing this summary, in the event there is a discrepancy, the original policies will prevail as the sole binding documents. This document is based upon general limits, deductibles, terms and conditions shown on the policy, and may vary from the actual policy.



Checklist

- Submit a completed application before departure. *Be sure to include date of birth and beginning and ending dates of assignment (format: mm/dd/yyyy).*
- Ensure you provide your worker with their Certificate and ID Card regarding emergency evacuation procedures.
- Ensure you provide your worker with their insurance summary package.
- Notify ARM if there is a change in the itinerary: new start date or change in end date.
- Inform ARM of a childbirth or marriage.

COVERAGES BY POLICY

	Accident and Sickness Medical (ASM)	Workers' Compensation (WC)	Personal Effects Baggage (PEB)	Life Insurance
Medical Evacuation	X	X		
Medical Repatriation	X	X		
Medical Guarantee 10K	X			
AD&D	X			
Trip Cancellation/Interruption	X			
Political Risk		X		
Salary		X		
Healthcare				
Dental and Vision				
Personal Property			X	
Accident Medical	X	X		
Sickness Medical	X	X		
War Risk	X			
Death				X



How to File a Claim

While each type of claim form may have different questions and require additional documentation or information, the steps below provide simple guidance for the employee/volunteer through the claim process:

1. Be sure to complete all sections of the claim form including accurate contact information; typed or clearly written.
2. Most claims require additional documentation to be attached to the claim form. This may include: medical bills and receipts, police report, death certificate, or medical report stating the cause of death, depending on the type of claim. Each claim form will provide guidance for what is needed.
3. Send the completed and signed claim form and attached documentation to the email address (preferred), insurance address, or fax number listed on the claim form.
4. Retain a copy of the claim form and attached documentation for your records.
5. A claims examiner or claims assistant will contact you if additional information or documentation is required.

Do not hesitate to reach out to Adventist Risk Management, Inc. with questions about which claim form to use, or how to fill it out. We are available at:

Email: claims@adventistrisk.org

Phone: 1 (888) 951-4ARM (4276)

Fax: (301) 453-7060

Adventist Risk Management, Inc.

Claims and Legal Services

12501 Old Columbia Pike

Silver Spring, MD 20904 USA

In many cases the claim will be initially paid to the employer/volunteer coordinating organization and passed to the employee/volunteer through internal channels.

Please encourage employees/volunteers to familiarize themselves with the summary of benefits. There are provisions, limitations, and exclusions in the policy. The insurance company makes the final determination on payment or denial of all claims.



Emergency Assistance Program

International SOS provides an emergency assistance program available for your employees and volunteers while outside their home country. This service should be utilized when emergency hospitalization, medical evacuation, political evacuation, repatriation is required, or when you need to guarantee payment for emergency medical expenses. International SOS is our emergency assistance provider.

If you need these services, please contact **International SOS**.

International SOS Phone:

+1 (215) 942-8226 (*Outside the USA Call Collect*)

Member #: 11BCAM749125 (Reference the Seventh-day Adventist Church)

ARM Contact: Joni Dreher-Smith, Senior Claims Examiner; jdreher@adventistrisk.org
(888) 951-4276, option #2 (*Inside the USA*); **1 (301) 453-7400** (*Outside the USA Call Collect*)

When you contact Adventist Risk Management, Inc. and International SOS for emergency assistance, please provide:

- Name of caller, email address, phone number, and relationship to patient.
- Contact name, email address, and phone number of your employer/sponsoring organization.
- Name of point of contact with the patient (if different from caller), email address, phone number.
- Patient's name, age, gender, and policy number.
- A description of the patient's condition and, if it was an accident, how it occurred.



Out-of-Country Insurance Package Application

Policyholder: General Conference of the Seventh-day Adventists
Underwritten by ACE American Insurance Company, a Chubb Company
Global Benefits Group, and GENCON Insurance Company of Vermont

Adventist Risk Management, Inc.
12501 Old Columbia Pike, Silver Spring, MD 20904
Email: ASV@adventistrisk.org

Adventist Risk Management, Inc.
119 St. Peters Street, St. Albans, Hertsfordshire AL1,
3EY, England
Email: ASV@adventistrisk.org

▶ COMPLETE THE FOLLOWING: SPONSORING ORGANIZATION RESPONSIBLE FOR PAYMENT:

NEW APPLICATION	EARLY RETURN	EXTENSION	DIVISION, UNION, CONFERENCE OR ENTITY					
PLACE OF SERVICE			STREET ADDRESS					
CITY			COUNTRY					
DIVISION			UNION					
YOUR COUNTRY OF RESIDENCE			YOUR COUNTRY OF CITIZENSHIP					
PRIMARY OCCUPATION		EFFECTIVE DATE		EXPIRATION DATE				
			MM/DD/YY	MM/DD/YY				
DO YOU EXPECT TO TRAVEL ON BUSINESS WHILE THE PROVIDED COVERAGE IS IN FORCE?	YES	NO	IF YES, HOW MANY DAYS?	TYPE OF TRANSPORTATION	AUTO	SHIP	PLANE	TRAIN
PILOT COVERAGE	YES	NO	An application must be made and accepted by the insurance company prior to the effective date					
IS SPOUSE A VOLUNTEER ALSO?	YES	NO	If Yes, complete separate application					
IS VOLUNTEER A MEDICAL PROFESSIONAL?	YES	NO	If Yes, list specialty:					

INSURED'S LAST NAME	INSURED'S FIRST NAME	DOB	MM/DD/YY		
DEPENDENT'S LAST NAME	DEPENDENT'S FIRST NAME	DOB	MM/DD/YY	SPOUSE COVERAGE	DEPENDENT CHILD(REN) COVERAGE

Optional Benefit: Trip Cancellation Benefit	Benefit Amount per Policy Term	Cost of Trip Cancellation & Trip Interruption Benefit
DECLINE	\$500	\$12.57 PER TRIP
	\$1,000	\$25.13 PER TRIP
	\$1,500	\$50.26 PER TRIP

▶ Approved by:

Title of Division, Union or Authorized Entity Representative Signature Date Signed

Classification of Eligible Persons:

- Class 1 Relief Doctors, Relief Workers, Pilots, Workers including Relief Missionaries, Student Missionaries and Adventist Volunteer Service Workers, Sustentation Volunteer Workers who are **servng outside the United States and who are approved by the Participating Organization.**
- Class 2 All regular missionaries of the Participating Organization (not Classes 1 or 3) who are serving **outside of the United States.**
- Class 3 All participants (not Classes 1 or 2) authorized by the Participating Organization for special short term trips.
Dependents of Class 1 and Class 3 are eligible for Coverage under this Policy.

Covered Activities for Accident and Sickness Medical (A&S) - Underwritten by ACE American Insurance Company, a Chubb Company

Policy Number: GLM N01060995

Classes 1 and 2 and Dependents of Class 1: Travel Coverage, Exposure & Disappearance

Class 3 and Dependents of Class 3: Specified Trip Coverage, Exposure & Disappearance

Coverage: Accident and Sickness Medical* See separate summary of coverage

Benefits	Class 1	Class 2 Dependent Spouse & Child(ren)	Class 3	Dependent Spouse & Child(ren) of Class 1 and 3
Medical Expense Benefit	Covered	Covered	Covered	Covered
Emergency Reunion Benefit	Covered	Covered	Covered	Covered
Repatriation of Remains Benefit	Covered	Covered	Covered	Covered
Accidental Death & Dismemberment Benefit	Covered	n/a	Covered	Covered
Disability Benefit (Permanent Total Disability)	Covered	n/a	Covered	n/a
Owned, Leased, or Controlled Aircraft Benefit	Covered	n/a	Covered	Covered
Home Country Extension Benefit	Covered	Covered	Covered	Covered
War Risk Benefit	Covered	Covered	Covered	Covered
Trip Cancellation	Covered	Covered	Covered	Covered
Trip Interruption	Covered	Covered	Covered	Covered

* Coverage not available in home country.

Class 1

Monthly Rate/Age	<40	40-49	50-59	60-64	65-69	70-79	80-100
Medical Insured Only:*	\$33.06	\$52.08	\$63.99	\$73.40	\$84.47	\$107.07	\$24.24
Medical Insured + One Dependent:*	\$70.66	\$89.00	\$104.69	\$131.14	\$167.81	\$191.70	\$37.69
Medical Insured + Family:*	\$76.93	\$137.46	\$140.89	\$164.03	\$200.68	\$224.47	\$70.51
Life Insured:**	\$1.38	\$1.38	\$1.38	\$1.38	NA	NA	NA
Life Spouse:**	\$0.69	\$0.69	\$0.69	\$0.69	NA	NA	NA
PEB Insured Only:	\$4.02	\$4.02	\$4.02	\$4.02	\$4.02	\$4.02	\$4.02

*Medical Benefits end at age 80

**Life Insurance ends at age 65

Life Insurance

Policy Holder: General Conference of the Seventh-day Adventists

Policy Number: LIS-6497

Underwritten by Global Benefits Group of GBG Insurance Limited

Class 1 Benefit: \$5,000 Insured \$2,500 Spouse \$0 Child

Annual Premium: \$16.50 \$8.25 n/a

Personal Effects & Baggage

Policy Holder: General Conference of the Seventh-day Adventists

Policy Number: PR102193-02

Underwritten by GICV

Benefit Limit: \$3,000

Annual Premium: \$48.22

REFER TO THE SUMMARY OF BENEFITS FOR A DESCRIPTION OF THE IMPORTANT FEATURES OF THESE INSURANCE PLANS.



Accident and Sickness Medical (ASM)





General Conference of Seventh-Day Adventists Accident and Sickness Medical

General Conference of Seventh-Day Adventists is making a variety of travel benefits available for you while you are traveling on behalf of the General Conference of Seventh-Day Adventists and its affiliates. Below is a brief overview of the travel benefits being offered and contact information in the event of an emergency.

Who is eligible for coverage?

You are eligible for coverage if you are an approved relief doctor, relief worker, pilot, relief missionary, student missionary, Adventist volunteer service worker, a sustentation volunteer worker or regular missionary serving outside of the United States or an authorized participant on a specified short-term trip and eligible dependents.

When is coverage in effect?

Coverage will begin on the actual start of a covered trip. It will end when you return to your home, home country, place of work or other place.

Accidental Death & Dismemberment Benefits*:

If, within 365 days of a covered accident, injury results in any one of the losses shown, the benefit amount shown opposite the loss will be paid. If multiple losses occur, only one benefit amount—the largest—will be paid for all losses due to the same accident.

COVERED LOSS	BENEFIT AMOUNT**
Life, Two or More Members, Quadriplegia	\$50,000
Hemiplegia, One Member, Paraplegia	\$25,000
Thumb & Index Finger of the Same Hand, Uniplegia	\$12,500

**Benefit Amounts for eligible Spouses and Dependent Children vary.

Medical Expense Benefits:

We will pay up to \$50,000 for medically necessary expenses incurred for hospital and medical care, treatment or services within 30 days of a covered accident or sickness. Coverage may vary for regular missionaries serving outside the United States. **Deductibles***: \$0 per Policy Term. **Co-insurance Rate**: 90% of Usual & Customary Charges up to \$3,500; 100% thereafter. **Maximum** co-insurance out-of-pocket expense is \$350 per Policy Term.

Additional Benefits:	Benefit Maximums:
Emergency Hotel Convalescence	\$200 per day, maximum of 5 days
Emergency Medical (Guarantee of Payment for Hospital Admission)	\$10,000
Emergency Medical Evacuation	100% of Covered Expenses
Emergency Reunion	\$5,000, subject to \$300 per day for 10 days
Home Country Extension	Up to \$50,000
Permanent Total Disability*	1% of \$50,000 per month, up to 365 days
Repatriation of Remains	100% of Covered Expenses
Trip Cancellation	\$750 with options to purchase additional amounts of \$500, \$1,000 or \$1,500
Trip Interruption	\$750 with options to purchase additional amounts of \$500, \$1,000 or \$1,500
War Risk	Provides accident benefits as the result of a war if you are traveling outside of the United States or your Home Country

*Not applicable to regular missionaries serving outside the United States.



What's Not Covered?

No accident benefits are payable for any loss or Injury that is caused by or results from:

- ◆ intentionally self-inflicted injury; suicide or attempted suicide; war or any act of war, whether declared or not*
- ◆ a Covered Accident that occurs while on active duty service in the military, naval or air force of any country or international organization
- ◆ sickness, disease, bodily or mental infirmity, bacterial or viral infection, or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food
- ◆ piloting or serving as a crewmember in any aircraft*
- ◆ commission of or attempt to commit a felony

In addition, medical expense benefits will not be paid for any loss, treatment, or services resulting from, or contributed to by:

- ◆ routine physicals and care of any kind
- ◆ mental and nervous disorders*
- ◆ routine dental care and treatment, damage to dentures and bridges*; treatment of temporomandibular joint dysfunction and associated myofascial pain
- ◆ cosmetic surgery or plastic surgery, including but not limited to, breast implants and breast reduction surgery, except as the result of an injury
- ◆ eye refractions or eye examinations for the purpose of prescribing corrective lenses or for the fitting thereof; eyeglasses, contact lenses, and hearing aids
- ◆ services, supplies, or treatment including any period of Hospital confinement which is not recommended, approved and certified as Medically Necessary and reasonable by a Doctor, or expenses which are non-medical in nature
- ◆ treatment or service provided by a private duty nurse
- ◆ treatment by any Immediate Family Member or member of your household
- ◆ any expense paid or payable by any other valid and collectible group insurance plan
- ◆ expenses incurred as the result of Injury or Sickness for which benefits are paid or payable under any

Workers' Compensation or Occupational Disease Law or Act, or similar legislation, whether United States federal or foreign law

- ◆ Injury or sickness where your trip to the host country is undertaken for treatment or advice for such injury or sickness
- ◆ medical expenses for which you would not be responsible to pay for in the absence of the Policy
- ◆ injury or sickness that occurs while you are under the influence of any drug unless administered under the advice and consent of a Doctor
- ◆ for expenses as a result of, or in connection with, the commission or attempt to commit an assault or felony
- ◆ injury resulting from mountain climbing (where ropes or guides are used), amateur and professional racing, racing or speed contests and bungee jumping
- ◆ custodial care
- ◆ services incurred in your Home Country*
- ◆ services provided by any government hospital or agency; any expense covered by another employer or government-sponsored plan for which, and to the extent that you are eligible
- ◆ elective treatment, exam or surgery, including those deemed to be experimental and which are not recognized and generally accepted medical practices in the United States
- ◆ expenses payable by any automobile insurance policy without regard to fault
- ◆ organ or tissue transplants and related services
- ◆ injury sustained while participating in professional, intercollegiate, or interscholastic sports
- ◆ expenses incurred for services related to the diagnostic treatment of infertility or other problems related to the inability to conceive a child, including but not limited to, fertility testing and in-vitro fertilization
- ◆ birth defects and congenital anomalies, or complications which arise from such conditions
- ◆ pre-existing conditions (please contact claims@adventistrisk.com for full details of this exclusion).

*Except as provided in the Policy.

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims.

How to File a Claim for Policy Number: GLM N01060995

You will need to submit a completed claim form for any covered accident or eligible expense in order to receive reimbursement under the policy. If you have suffered a covered loss or incurred a covered expense, please contact claims@adventistrisk.org for the appropriate claim form. The instructions for the claim form will detail any supporting documentation you will need to submit with your claim.

How can I ensure the timely processing of my claim?

Be sure to provide the requested documentation when submitting a claim. Also, be sure to provide a diagnosis or suitable explanation for the loss you are claiming. When receiving care from doctors outside of the United States, an explanation of the occurrence may help to clarify your claim and help to facilitate the claim process.

For access to your assistance services, please contact International SOS at:

Philadelphia Assistance Center: +1-215-942-8226 | +1-800-523-6586
Philadelphia@internationalsos.com
Membership #: 11BCAM749125 (Reference Seventh-day Adventist Church)

www.internationalsos.com
Member Log-in: 11BCAM749125

CHUBB®



Chubb NA is the U.S.-based operating division of the Chubb Group of Companies, headed by Chubb Ltd. (NYSE:CB) Insurance products and services are provided by Chubb Insurance underwriting companies and not by the parent company itself. This information is a brief description of the important features of this insurance plan. It is not an insurance contract. Insurance benefits are underwritten by ACE American Insurance Company. Coverage may not be available in all states or certain terms may be different where required by state law.

Program sponsored by: Adventist Risk Management,® Inc.

Adventist Risk Management & International SOS

A partnership that supports you



Adventist Risk Management has partnered with International SOS to offer our staff medical, safety and security advice, referrals and routine & emergency assistance when travelling or living abroad. We strongly recommend that you follow the steps below to familiarise yourself with this new partnership and the services available to you in preparation of your next trip and while overseas.



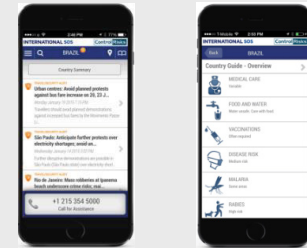
PRIOR TO DEPARTURE



1

READ YOUR TRAVEL GUIDELINES

Read your organization's travel guidelines and ensure you are compliant.



2

DOWNLOAD THE ASSISTANCE APP

The mobile app provides immediate access to the assistance centre where medical, security or logistical experts are on hand to provide routine advice or support in an emergency. You will find up-to-date advice and real-time alerts for the locations you are travelling to.

1. Download the App on your mobile.
2. Select 'Yes' when you run the app to make it a trusted application.
3. Enter our membership number: **11BCAM749125**



3

CALL OR GO ONLINE

There are many questions you should ask before you depart. International SOS medical and security specialists are on hand 24 hours a day to answer your queries and concerns.

Save the assistance centre number to your mobile now:

Philadelphia Assistance Center:
+1 215 942 8226

Before departing on your overseas assignment, a great place to start your pre-trip preparation is the online portal (internationalsos.com). Using our membership number (**11BCAM749125**) you can log into the portal and view up-to-date medical and security information and receive alerts to your email or smartphone.

International SOS will assist you no matter how big or small your request might be and we encourage you to call for help any time, day or night. Whether you have lost your wallet, need medical advice or assistance, a referral to a doctor, or require a full scale evacuation, International SOS can assist you.

Adventist Risk Management & International SOS

A partnership that supports you



Contact International SOS anytime, anywhere when you venture out of the country as your representative. Consider them your reliable, virtual advisor for both critical and routine questions.

PRE-DEPARTURE	DURING TRAVEL OR EXCHANGE	IN AN EMERGENCY
<ul style="list-style-type: none"> As soon as you know you are traveling, sign yourself up for email alerts for each of the countries/cities you will travel to or through Review the country guides Contact the assistance center (available 24/7) to get a travel brief over the phone Ensure your International SOS App is active – allowing you access to medical and security alerts while you’re away 	<p>Call an assistance center 24/7 if you:</p> <ul style="list-style-type: none"> Are not feeling well Need a referral for a doctor, dentist or other care Need emotional support Hear of travel disruption affecting your itinerary Hear of adverse weather or a natural disaster that impacts your itinerary Feel unsafe, hear of riots or protests outside your hotel or place of business Require a language translator, even in a cab Need prescriptive medication Your wallet /passport/ identification documents are lost or stolen Require a cash advance Are the victim of a theft or assault 	<p>Call an assistance center 24/7 in any emergency situation. International SOS will assist you and your managers with:</p> <ul style="list-style-type: none"> Hospitalization and medical monitoring (including upfront payment to ensure emergency admission) Step-by-step security instructions and advice to ensure your safety Operational and logistical management of your medical and/or security evacuation Liaising with your family members and ARM with updates on your situation Post-incident follow-up and return to work assistance

No matter how small your concern may feel, when in doubt, call International SOS for support. With a global network of medical and security specialists, International SOS is well equipped to support you.

Control Risks

Seventh-day Adventist Church ©
Membership No: 11BCAM749125

Please use the QR code above to download our free Assistance App.

For medical or security advice or assistance please call one of our 24-hour Assistance Centres

BALI +62 361 710 505	BANGKOK +66 2 205 7777	BEIJING +86 10 6462 9100
DUBAI +971 4 601 8777	FRANKFURT +49 6102 3588 100	GENEVA +41 22 785 6464
HANOI +84 4 3934 0666	HO CHI MINH CITY +84 8 3829 8520	HONG KONG +852 2528 9900
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For more information visit www.internationalsos.com



Life Insurance





Life Insurance Summary

Life Insurance provides financial assistance to the workers and their families in the event of an untimely death.

This policy pays for death by any cause.

Normal Retirement Age: 65th birthday attained

EXCLUSIONS

Nuclear, Chemical and Biological (NCB) weapons, or warfare (applies to all benefit amounts).

For Benefit Amounts in excess of \$100,000, the following exclusions will apply:

1. Suicide, attempted suicide or self-inflicted injury in the first two years an insured is covered under this program;
2. HIV/AIDS;
3. Misuse of drugs or alcohol;
4. Regularly and/or extensively practiced professional or hazardous sports or pursuits.



CLAIMS

To file a claim, fill out the claim form related to your type of loss and email it to claims@adventistrisk.org.

A final death certificate is needed to accompany the signed claim form.

This is a brief overview of the policy and is not intended to replace policy terms and conditions.



Personal Effects & Baggage (PEB)





Personal Effects Baggage Summary

GICV—Policy PR102193-03 | Policy Period: January 1 – December 31, 2019

All Employees approved by the participating Seventh-day Adventist organization are eligible for this coverage.

PROPERTY COVERED

Personal effects belonging to and usually carried or worn by the covered individual. Coverage is available only for business travel or while engaged in business activities away from the place of permanent residence, and subject to all the provisions of the policy.

LIMITS

US\$1,000 | US\$2,000 | US\$3,000 | US\$4,000 | US\$5,000

PROPERTY NOT COVERED

- 1. Bicycles or other conveyances or their equipment
- 2. Motor vehicle equipment including installed audio and/or electronic equipment; CB radios, Radar Detectors & Car Phones.
- 3. Travelers checks, securities or documents (other than travel tickets, birth certificates, Government-issued identification cards, visas, passports, or drivers' licenses.)
- 4. Animals, household furnishings, salesmen's samples.
- 5. Medical instruments, medical devices or prescription items which may be recoverable from a Medical Company.
- 6. Property for sale or exhibitions.
- 7. Contraband or illegal items.
- 8. Property specifically or otherwise insured
- 9. Any loss or damage resulting from the activity of fungi, wet or dry rot or bacteria.

LIMITATIONS

- 1. Loss or damage to any one item shall be limited to 35% of the limit.
- 2. Loss or damage caused by war or warlike action shall be limited to 25% of the limit.
- 3. The indemnity for loss or damage to property specially or otherwise insured shall be limited to the amount not covered by other insurance, within the scheduled limit.
- 4. Loss of money or securities in any one occurrence shall be limited as follows:
 - US \$200 insured limit of \$1,000
 - US \$300 insured limit of \$2,000
 - US \$400 insured limit of \$3,000
 - US \$500 insured limit of \$4,000
 - US \$600 insured limit of \$5,000

EXCLUSIONS

- 1. The residence or domicile of the covered individual.
- 2. While in storage or while in the custody of students.
- 3. Theft or pilferage due to negligence while left unattended in or on any automobile unless the loss is a direct result of visible, forcible entry into a securely locked automobile.
- 4. Wear and tear.
- 5. Breakage, marring or scratching of articles of brittle or fragile nature.
- 6. Radioactivity.
- 7. Due to confiscation or destruction under quarantine or government authority.

CLAIMS

To file a claim, fill out the claim form related to your type of loss and email it to claims@adventistrisk.org.

This is a brief overview of the policy and is not intended to replace policy terms and conditions.





International Workers' Comp





International Workers' Comp Summary

International Workers' Compensation is an insurance in place for workers who travel outside of the United States. Workers' Compensation insurance compensates workers for losses suffered as a result of a work related injury or illness.

Compensation can include:

- Medical and hospital costs
- Rehabilitation
- Death benefits
- Loss wages
- Lump sum or single payments for certain injuries
- Prosthetic devices

CLAIMS

Claim reporting should be sent via email directly to Chubb at:

ChubbClaimsFirstNotice@chubb.com



This is a brief overview of the policy and is not intended to replace policy terms and conditions.