

Business Travel Accident Insurance Plan

Accidents happen – help your family prepare.

When You Are Covered

Class I – V

Business Only – while traveling on the Business of the Policyholder, including a Sojourn or Personal Deviation taken during the course of the Trip.

War Risk, Business Only – extends coverage as a result of a declared or undeclared war in certain countries. Coverage is not extended in the United States of America, its territories and possessions, Canada or Mexico or the Insured Person's country of permanent residence. Advance notice must be reported to the Policyholder for travel into the following countries: Afghanistan & Iraq.

Class VI – VII

War Risk, Business Only – extends coverage as a result of a declared or undeclared war in certain countries. Coverage is not extended in the United States of America, its territories and possessions, Canada or Mexico or the Insured Person's country of permanent residence. Advance notice must be reported to the Policyholder for travel into the following countries: Afghanistan & Iraq.

Family Relocation Trip – Insured Dependents only – extends coverage to a Dependent during the course of any family relocation trip that is authorized by, or taken at the direction of, the Policyholder and/or must be paid in whole or in part by the Policyholder.

Family Accompanying the Insured – Insured Dependents only – extends coverage to a Dependent while they are accompanying or on their way to join the Insured during an authorized Trip, when the trip is authorized by and/or paid in whole or in part by the Policyholder.

Eligible Persons and Principal Sum

Class	Description of Class	Principal Sum
I	All active, full-time (Employees who work at least 30 hours per week for the Policyholder) and part-time (Employees who work at least 17.5 hours per week for the Policyholder) Trustees and Officers of the Policyholder, excluding Truck Drivers, not in any other Class.	\$200,000
II	All active, full-time (Employees who work at least 30 hours per week for the Policyholder) and part-time (Employees who work at least 17.5 hours per week for the Policyholder) Tenured Faculty and Exempt Administration of the Policyholder, excluding Truck Drivers, not in any other Class.	\$100,000
III	All active, full-time (Employees who work at least 30 hours per week for the Policyholder) and part-time (Employees who work at least 17.5 hours per week for the Policyholder) Untenured Faculty, Staff, Maintenance, and Operations Employees of the Policyholder, excluding Truck Drivers, not in any other Class.	\$100,000
IV	All active, full-time (Employees who work at least 30 hours per week for the Policyholder) and part-time (Employees who work at least 17.5 hours per week for the Policyholder) Tenured Faculty of the Policyholder, on leave from the Policyholder, excluding Truck Drivers, not in any other Class.	\$100,000
V	All active, full-time (Employees who work at least 30 hours per week for the Policyholder) and part-time (Employees who work at least 17.5 hours per week for the Policyholder) appointed Faculty Members of the Policyholder, excluding Truck Drivers, not in any other Class.	\$50,000
VI	All Eligible Spouse/Domestic Partners of Class I, II, III, IV, or V Insureds, not in any other Class.	\$25,000
VII	All Eligible Dependent Children of Class I, II, III, IV, or V Insureds, not in any other Class.	\$10,000



Trustees of Hamilton College
GTP 0009156848

Insurance underwritten by:
National Union Fire Insurance Company of Pittsburgh, Pa.

Benefits

Accidental Death, Dismemberment and Paralysis, Coma

When Injury to an Insured Person results directly in any of the following covered losses within 365 days from the date of the accident that caused the Injury, we will pay, in one sum, the indicated percentage of the principal sum:

Loss of	Percentage of Principal Sum
Life	100%
Both hands or both feet	100%
Sight of both eyes	100%
One hand and one foot	100%
One hand and sight of one eye	100%
One foot and sight of one eye	100%
Speech and hearing in both ears	100%
One hand or one foot	50%
Sight of one eye	50%
Speech or hearing in both ears	50%
Hearing in one ear	25%
Thumb and index finger of same hand	25%

Paralysis	Percentage of Principal Sum
Quadriplegia	100%
Paraplegia	100%
Hemiplegia	100%
Uniplegia	25%

Coma	Percentage of Principal Sum
	1% per month

"Loss" of a hand or foot means complete severance through or above the wrist or ankle joint. "Loss" of sight of an eye means total and irrecoverable loss of the entire sight in that eye. "Loss" of hearing in an ear means total and irrecoverable loss of the entire ability to hear in that ear. "Loss" of speech means total and irrecoverable loss of the entire ability to speak. "Loss" of thumb and index finger means complete severance through or above the metacarpophalangeal joint of both digits.

"Quadriplegia" means the complete and irreversible paralysis of both upper and lower limbs. "Paraplegia" means the complete and irreversible paralysis of both lower limbs. "Hemiplegia" means the complete and irreversible paralysis of the upper and lower limbs on the same side of the body. "Uniplegia" means the complete and irreversible paralysis of one limb. "Limb" means entire arm or entire leg.

If Injury renders an Insured Person Comatose within 365 days of the date of the accident that caused the Injury, and if the Coma continues for a period of 30 consecutive days, the Company will pay a monthly benefit of 1% of the Insured Person's Principal Sum. No benefit is provided for the first 30 days of Coma. No benefit is payable after the date the total amount of monthly Coma benefits paid for all Injuries caused by the same accident equals 100% of the Principal Sum. The Company will pay benefits calculated at a rate of 1/30th of the monthly benefit for each day for which the Company is liable when the Insured Person is Comatose for less than a full month. Only one benefit is provided for any one month of Coma, regardless of the number of Injuries causing the Coma.

The Company reserves the right, at the end of the first 30 consecutive days of Coma and as often as it may reasonably require thereafter, to determine, on the basis of all the facts and circumstances, that the Insured Person is Comatose, including, but not limited to, requiring an independent medical examination provided at the expense of the Company.

If more than one loss is sustained by an Insured Person as a result of the same accident, only one amount, the largest, will be paid.

Bereavement and Trauma Counseling Benefit

If the Insured Person suffers a covered accidental death, accidental dismemberment or paralysis, or coma the Company will pay benefits for Covered Bereavement and Trauma Counseling Expenses for the Insured Person and all of his or her immediate family members for up to 10 sessions combined, with a maximum of 150 per session. The expenses must be incurred within one year of the date of the accident.

Carjacking Benefit

The Company will pay a benefit when the Insured Person suffers one or more losses for which benefits are payable under the Accidental Death Benefit, Accidental Dismemberment and Paralysis and Coma Benefit as a result of a Carjacking of an Automobile while the Insured Person is operating, or riding as a passenger in, (including getting in or out of) such Automobile. The amount payable is the lesser of: 1) \$20,000; or 2) 10% of the largest benefit payable under any one of the Benefits specified above due to the Carjacking. Only one benefit is payable for all losses as a result of the same Carjacking.

Emergency Evacuation Benefit

Pays for Covered Emergency Evacuation Expenses if an Insured Person suffers an Injury or Emergency Sickness while he or she is at least 100 miles from home and the Injury or Emergency Sickness warrants a medically necessary emergency evacuation, up to a maximum of \$2,500,000. All arrangements must be made through Travel Guard Group, Inc.

Family Travel Benefit

Following an Insured Person's covered Emergency Evacuation, the Company will pay for expenses reasonably incurred: 1) to return the Insured Person's Spouse and any Children with an attendant if necessary, who were accompanying the Insured Person when the Emergency Evacuation became necessary, but not to exceed the cost of a single one-way economy airfare ticket less the value of applied credit from any unused return travel tickets per person; 2) for lodging and meals for up to 7 days for the Insured Person's Spouse and Children in the area where the Insured Person is confined, if they were accompanying the Insured Person and they are outside a 100 mile radius from the Insured Person's place of primary residence. The Company will only pay for such expenses for days in excess of the days that had been planned for the Trip prior to the Insured Person's Emergency Evacuation, and only while he or she remains so confined. The Company will not pay for such expenses in excess of, for the Spouse and Children combined, \$200 per day for lodging and \$100 per day for meals; 3) to bring one person chosen by the Insured Person to and from the hospital or other medical facility where the Insured Person is confined if: (a) the Insured Person is alone; and (b) the place of confinement is outside a 100 mile radius from the Insured Person's place of primary residence; but not to exceed the cost of one round-trip economy airfare ticket; and 4) for lodging and meals for up to seven days for such person in the area of such place of confinement, but: (a) only while the Insured Person remains so confined; and (b) not to exceed \$200 per day for lodging and \$100 per day for meals.

Following an Insured Person's death for which a Repatriation of Remains benefit is payable under the Policy, the Company will pay for expenses reasonably incurred: 1) to return to their current place of primary residence the Insured Person's Spouse and any of the Insured Person's Children who were accompanying the Insured Person when his or her death occurred, with an attendant for the children if necessary and if the children are not accompanied by the spouse; but not to exceed the cost of a single one-way economy airfare ticket less the value of applied credit from any unused return travel tickets per person; and 2) for lodging and meals for up to 7 days for the Insured Person's Spouse and Children in the area where the Insured Person's death occurred, if they were accompanying the Insured Person at that time. The Company will only pay for such expenses for days in excess of the days that had been planned for the Trip prior to the Insured Person's death, and only prior to the repatriation of his or her remains. The Company will not pay for such expenses in excess of, for the Spouse and Children combined, \$200 per day for lodging and \$100 per day for food.

All arrangements must be made through Travel Guard Group, Inc. for any benefits to be payable under this benefit.

Home Alteration and Vehicle Modification Benefit

Pays Covered Home Alteration and Vehicle Modification Expenses incurred within one year of the date of the accident, up to a maximum of \$50,000, if the Insured Person suffers a covered accidental dismemberment or paralysis benefit for which an Accidental Dismemberment and Paralysis benefit is payable under the Policy.

Rehabilitation Benefit

If an Insured Person suffers an accidental dismemberment or paralysis for which an Accidental Dismemberment and Paralysis benefit is payable under the Policy, the Company will reimburse the Insured Person for Covered Rehabilitative Expenses that are due to the Injury causing the dismemberment or paralysis. Reimburses Covered Rehabilitation Expenses, up to a maximum of \$50,000, incurred within two years of and as a result of an Injury causing a covered accidental dismemberment or paralysis under the Policy.

Repatriation of Remains Benefit

Pays benefits for covered expenses to return the Insured Person's body to his or her home if the Insured Person suffers a covered loss of life due to Injury or Emergency Sickness while at least 100 miles from home, up to a maximum of \$2,500,000. All arrangements must be made through Travel Guard Group, Inc.

Seat Belt and Air Bag Benefit

Pays a benefit of the lesser of 1) 10% of the Insured Person's Principal Sum; or 2) \$50,000 if the Insured Person is protected by a seat belt when he/she suffers a covered accidental death under the Policy while operating or riding as a passenger in a private passenger automobile. If the Insured Person is also protected by an air bag that inflates on impact, an additional benefit of the lesser of 1) 10 % of the Principal Sum; or 2) \$50,000 is payable.

Aggregate Limit of Indemnity Per Aircraft Accident: \$2,000,000 except \$2,000,000 Per Accident for War Risk, Business Only

The Aggregate Limit means the maximum amount payable under the Policy and may be reduced if more than one Insured Person suffers a loss as a result of the same accident and if the amounts are payable for those losses under one or more of the following Benefits provided by the Policy: Accidental Death, Accidental Dismemberment and Paralysis, Coma Benefit. The maximum amount payable for all such losses for all Insured Persons under all those Benefits combined will not exceed the amount shown above as the Aggregate Limit. If the combined maximum amount otherwise payable for all Insured Persons must be reduced to comply with this provision, the reduction will be taken by applying the same percentage of reduction to the individual maximum amount otherwise payable for each Insured Persons for all such losses under all those Benefits combined.

Definitions

Company: National Union Fire Insurance Company of Pittsburgh, Pa.

Domestic Partner: means a person who has entered into a Domestic Partnership.

Domestic Partnership: means an arrangement whereby two persons of the same or opposite sex have established a domestic or civil union relationship and who have submitted proof of such arrangement in the form of the following:

1. Registration as a Domestic Partnership indicating that neither individual has been registered as a member of another Domestic Partnership within the last six months, where such registry exists, or
2. For partners residing where registration does not exist, by:
 - a. an alternative affidavit of Domestic Partnership. The affidavit must be notarized and must contain the following
 - The partners are both eighteen years of age or older and are mentally competent to consent to contract.
 - The partners are not related by blood in a manner that would bar marriage under laws of the State of New York
 - The partners have been living together on a continuous basis prior to the date of the application;
 - Neither individual has been registered as a member of another Domestic Partnership within the last six months; and
 - b. Proof of cohabitation (e.g., a driver's license, tax return or other sufficient proof); and
 - c. Proof that the partners are financially interdependent. Two or more of the following are collectively sufficient to establish financial interdependence;
 - joint bank account
 - joint credit card or charge card
 - joint obligation on a loan
 - status as an authorized signatory on the partner's bank account, credit card or charge card
 - joint ownership of holdings or investments, residence or of real estate other than residence
 - listing of both partners as tenants on the lease of the shared residence
 - shared rental payments of residence (need not be shared 50/50)
 - listing of both partners as tenants on a lease, or shared rental payments, for property other than residence
 - common household and shared household expenses, e.g., grocery bills, utility bills, telephone bills, etc. (need not be shared 50/50)
 - shared household budget for purposes of receiving government benefits
 - status of one as representative payee for the other's government benefits
 - joint ownership of major items of personal property (e.g., appliances, furniture)
 - joint ownership of a motor vehicle
 - joint responsibility for child care (e.g., school documents, guardianship)
 - shared child-care expenses, e.g., babysitting, day care, school bills (need not be shared 50/50)
 - execution of wills naming each other as executor and/or beneficiary
 - designation as beneficiary under the other's life insurance policy
 - designation as beneficiary under the other's retirement benefits account

- mutual grant of durable power of attorney
- mutual grant of authority to make health care decisions (e.g., health care power of attorney)
- affidavit by creditor or other individual able to testify to partners' financial interdependence
- other item(s) of proof sufficient to establish economic interdependency under the circumstances of the particular case.

Insured Dependent Child(ren): The Insured's unmarried children, including natural children from the moment of birth, step or foster children, or adopted children (including a "proposed adopted child") from the moment of placement in the home of the Insured, under age 26 and primarily dependent on the Insured for support and maintenance, 1) for whom premium has been paid; and 2) while covered under the Policy. A "proposed adopted child" will be considered an adopted child during any waiting period prior to finalization of the child's adoption, provided such child is primarily dependent on the Insured for support and maintenance during such waiting period. An unmarried child under age 26 who is a full-time student as detailed above and who takes a medical leave of absence from school, will continue to be an Eligible Dependent Child for up to 12 months during such medical leave. Continued eligibility will end at the expiration of the 12 month period if such child has not returned to full-time student status at that time. The medical necessity of the medical leave of absence must be certified to by the student's attending physician. Any unmarried eligible dependent children of the Insured covered under the Policy before reaching the age limit specified above, who are incapable of self-sustaining employment by reason of mental or physical incapacity, and who are primarily dependent on the Insured for support and maintenance, may continue to be eligible under the Policy beyond that age limit for as long as the Policy is in force, but only if they remain continuously covered under the Policy.

Injury: means bodily injury: (1) which is sustained as a direct result of an unintended, unanticipated accident and that occurs while the injured person's coverage under the Policy is in force; (2) which occurs under the circumstances described; and (3) which directly (independent of sickness, disease, mental incapacity, bodily infirmity or any other cause) causes a covered loss.

Insured: A person: 1) who is a member of an eligible class of persons as described in the Eligible Persons and Principal Sums section of this document 2) for whom premium has been paid; and 3) while covered under the Policy. However, an Insured does not include any person covered under the Policy solely as an Insured Dependent.

Insured Person: An Insured or an Insured Dependent.

Insured Dependent: means an Insured Spouse, Domestic Partner or an Insured Dependent Child.

Policyholder: means Trustees of Hamilton College

Sojourn and Personal Deviation, Sojourn or Personal Deviation: means non-business travel or activities undertaken While on the Business of the Policyholder but unrelated to furthering the business of the Policyholder.

1. If they involve one or more stops en route and/or an extension of time spent at the destination(s) with respect to the circumstances described herein, do not last longer than a total of 14 day(s).

Trip: A trip taken by an Insured which begins when the Insured leaves his or her residence or place of regular employment for the purpose of going on the trip (whichever occurs last), and is deemed to end when the Insured returns from the trip to his or her residence or place of regular employment (whichever occurs first). However, the trip is deemed to exclude any period of time during which the Insured is on an authorized leave of absence or vacation or travel to and from the Insured's place of regular employment except when an Insured needs to utilize alternative means of transportation because of the discontinuance of service, due to strike or major breakdown, of one or more public transportation systems he or she regularly uses. "Trip" does not include the Insured's trip to a location that extends for more than 365 days. Such a trip will be deemed to change the Insured's residence or place of regular employment to the new location.

While on the Business of the Policyholder: While on assignment by, or at the direction of, the Policyholder for the purpose of furthering the business of the Policyholder. Does not include any period of time: 1) while the Insured is working at his or her regular place of employment; 2) during the course of everyday travel to and from work; or 3) during an authorized leave-of-absence or vacation. If an Insured's assignment to a location exceeds 365 days, such assignment will be deemed to change his or her residence and regular place of employment to the new location.

General Policy Exclusions

Unless otherwise provided by the Policy, no coverage shall be provided under the Policy and no payment shall be made for any loss resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following excluded risks even if the proximate or precipitating cause of the loss is an accidental bodily Injury:

1. Suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury.
2. Travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, other than as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline, unless specifically provided by the Policy.
3. Declared or undeclared war, or any act of declared or undeclared war unless specifically provided by the Policy.
4. Sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from any of these, unless specifically provided by the Policy.
5. Infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes.

6. Service in the Armed Forces, or units auxiliary there to of any country or international authority. (Unearned premium for any period for which the Insured Person is not covered due to his or her active duty status will be refunded.) (Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded.)
7. The medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from the treatment.

Limitation on Multiple Benefits

If an Insured Person suffers one or more losses from the same accident for which amounts are payable under more than one of the following benefits provided by the Policy, the maximum amount payable under all of the benefits combined will not exceed the amount payable for one of those losses, the largest: Accidental Death Benefit, Accidental Dismemberment and Paralysis, Coma Benefit

Terms capitalized in this document are defined terms in this brochure or in the Policy.

Travel Assistance Services

A full spectrum of travel, medical, security, and assistance services are offered to help travelers cope with emergencies and simplify the travel experience. These services are provided by Travel Guard[®], a wholly owned subsidiary of AIG.

Highlights

- 24/7 assistance services while traveling virtually anywhere in the world.
- A members-only website and mobile app, which offers up-to-date travel destination information, advisories, and alerts.
- Global service centers, which respond to emergency medical, travel and security needs 24/7/365, are located in key regions around the globe.
- An extensive network with access to over 650,000 medical providers worldwide.
- Direct payment of expenses when using a local provider; eliminates an employees' out-of-pocket costs while traveling.
- An in-house security operation that includes a global network of more than 400 security professionals who are ready to assist on the spot.
- Secure evacuation assistance.
- 24/7 access to online Travel Security Awareness Training.

To access your assistance website, visit www.aig.com/us/travelguardassistance and download the AIG Travel Assistance mobile app to your Apple or Android smartphone. Register with your Policy number (using numerals only).

Expenses incurred from third-party vendors for services not part of a filed insurance plan are the responsibility of the traveler.

Contact Information

For travel emergencies or for more information about your coverage:

Phone:

Within the U.S. (Toll-Free): 1-877-244-6871

Outside the U.S. (Collect/Reverse Charge): +1-715-346-0859

Email:

assistance@aig.com

The underwriting risks, financial and contractual obligations, and support functions associated with insurance products issued by National Union Fire Insurance Company of Pittsburgh, Pa., are its responsibility. National Union Fire Insurance Company of Pittsburgh, Pa. currently authorized to conduct insurance business in all states and the District of Columbia. NAIC No. 19445. Travel assistance services are provided by Travel Guard Group, Inc., an AIG company.

This is only a brief description of the insurance coverage(s) available under Policy Series C11860DBG-NY. The Policy contains reductions, limitations, exclusions and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern in all cases.

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