University of New Hampshire
Travel Medical Plan – Evidence of Benefits

Eligibility: Students, Faculty, Scholars, or other persons with a current passport or student visa, who are temporarily residing outside their Home Country or regular residence. The Insured must be engaged in full-time educational or research activities of the Participating Organization outside the United States.

Coverage #1: Travel Medical
Coverage #2: Emergency Medical Evacuation/Repatriation Coverage
Coverage #3: Political & Natural Disaster Evacuation Coverage
Coverage #4: ISOS Case Fees

Territory Restrictions:
- United States*
- Cuba, unless a valid travel license is obtained from the United States

* The U.S. is defined as the 50 United States and the District of Columbia.

Period of Coverage: No Insured person may have a policy period longer than twelve (12) months.

WHEN YOUR COVERAGE BEGINS – Provided:
(a) coverage has been elected; and
(b) the required premium has been paid.

All coverage will begin on the later of the Scheduled Departure Date or upon the Insured’s departure from his/her Home Country.

WHEN YOUR COVERAGE ENDS – Your coverage will end at 11:59 PM local time on the date that is the earliest of the following:
(a) Upon the Insured’s return to his/her Home Country; or
(b) Twelve (12) months after the Scheduled Departure Date.

COVERAGE #1: TRAVEL MEDICAL
Please keep this document as a general summary of the Insurance. This Evidence of Benefits is a brief summary of filed form number SRTC2500 A&H/P&C which contains complete details of the coverage. A copy of the Travel Protection Policy is available for inspection at the Plan Administrator's office. The Evidence of Benefits shall control in the event of any conflict between this Evidence of Benefits and the Travel Protection Policy.

SCHEDULE OF BENEFITS:

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baggage/Personal Effects</td>
<td>Up to $250 per item; $1,000 maximum per policy period</td>
</tr>
<tr>
<td>Emergency Sickness Medical Expense</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Emergency Accident Medical Expense</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Accidental Death &amp; Dismemberment</td>
<td>$10,000 per Insured; $5,000 per Spouse/Dependent Child</td>
</tr>
<tr>
<td>Accidental Death &amp; Dismemberment – Common Carrier (Air Only)</td>
<td>$25,000 per Insured; $10,000 per Spouse/Dependent Child</td>
</tr>
</tbody>
</table>

BAGGAGE/PERSONAL EFFECTS

The Company will reimburse You, up to the maximum shown on the Schedule of Benefits, for loss, theft or damage to baggage and personal effects, provided the Insured has taken all reasonable measures to protect, save and/or recover his/her property at all times. The baggage and personal effects must be owned by and accompany You during the Covered Trip.

This coverage is secondary to any coverage provided by a Common Carrier.

There is a per article limit shown in the Schedule of Benefits.

There will be a combined maximum limit shown in the Schedule of Benefits for the following:
- jewelry; watches; articles consisting in whole or in part of silver, gold or platinum; furs; articles trimmed with or made mostly of fur; personal computers, cameras and their accessories and related equipment.
The Company will pay the lesser of the following:
   (a) Actual Cash Value at time of loss, theft or damage to baggage and personal effects, less depreciation as determined by
       the Company; or
   (b) the cost of repair or replacement.

EXTENSION OF COVERAGE
If You checked Your property with a Common Carrier and delivery is delayed, coverage for Baggage/Personal Effects will be
extended until the Common Carrier delivers the property.

<table>
<thead>
<tr>
<th>EMERGENCY SICKNESS MEDICAL EXPENSE</th>
</tr>
</thead>
</table>

The Company will pay benefits up to the maximum shown on the Schedule of Benefits, if You incur Covered Medical Expenses as a
result of Emergency Treatment of a Sickness that first manifests itself during the Covered Trip.

Emergency Treatment means necessary medical treatment, including services and supplies, which must be performed during the
Covered Trip due to the serious and acute nature of the Sickness.

Covered Medical Expenses are necessary services and supplies that are recommended by the attending Physician. They include but are not limited to:
   (a) the services of a Physician;
   (b) charges for Hospital confinement and use of operating rooms;
   (c) charge for anesthetics (including administration); x-ray examinations or treatments, and laboratory tests;
   (d) ambulance service; and
   (e) drugs, medicines, prosthetics and therapeutic services and supplies.

The Company will not pay benefits in excess of the reasonable and customary charges. Reasonable and customary charges means
charges commonly used by Physicians in the locality in which care is furnished. The Company will not cover any expenses provided
by another party at no cost to You or already included within the cost of the Trip.

The Company will advance payment to a Hospital, up to the maximum shown on the Schedule of Benefits, if needed to secure Your
admission to a Hospital because of Sickness.

If You are hospitalized due to a Sickness which first occurred during the course of the scheduled Trip beyond the date of the
Scheduled Return Date, coverage will be extended until You are released from the Hospital or until maximum benefits under the
Policy have been paid.

<table>
<thead>
<tr>
<th>EMERGENCY ACCIDENT MEDICAL EXPENSE</th>
</tr>
</thead>
</table>

The Company will pay benefits up to the maximum shown on the Schedule of Benefits, if You incur Covered Medical Expenses for
Emergency Treatment of an Accidental Injury that occurs during the Covered Trip.

Emergency Treatment means necessary medical treatment, including services and supplies, which must be performed during the
Covered Trip due to the serious and acute nature of the Accidental Injury.

Covered Medical Expenses are necessary services and supplies that are recommended by the attending Physician. They include, but are not limited to:
   (a) the services of a Physician;
   (b) charges for Hospital confinement and use of operating rooms;
   (c) charges for anesthetics (including administration); x-ray examinations or treatments, and laboratory tests;
   (d) ambulance service; and
   (e) drugs, medicines, prosthetic and therapeutic services and supplies.

The Company will not pay benefits in excess of the reasonable and customary charges. Reasonable and customary charges means
charges commonly used by Physicians in the locality in which care is furnished. The Company will not cover any expenses provided
by another party at no cost to You or already included within the cost of the Trip.

The Company will pay benefits, up to $750.00, for emergency dental treatment for Accidental Injury to sound natural teeth.

The Company will advance payment to a Hospital, up to the maximum shown on the Schedule of Benefits, if needed to secure Your
admission to a Hospital because of Accidental Injury.
If You are hospitalized due to an Accidental Injury which first occurred during the course of the scheduled Trip) beyond the date of the Scheduled Return Date, coverage will be extended until You are released from the Hospital or until maximum benefits under the Policy have been paid.

**ACCIDENTAL DEATH AND DISMEMBERMENT**

The Company will pay the percentage of the Principal Sum shown in the Table of Losses when You, as a result of an Accidental Injury occurring during the Covered Trip, sustain a loss shown in the Table below. The loss must occur within 180 days after the date of the Accident causing the loss. The Principal Sum is shown on the Schedule of Benefits. The maximum benefits for any one single Accident is limited to $15,000,000 for all persons insured under the Policy. If more than one loss is sustained, as the result of an Accident, the amount payable shall be the largest amount of a sustained loss shown in the Table of Losses.

<table>
<thead>
<tr>
<th>Loss of:</th>
<th>Percentage of Principal Sum:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>100%</td>
</tr>
<tr>
<td>Both hands or both feet</td>
<td>100%</td>
</tr>
<tr>
<td>Sight of both eyes</td>
<td>100%</td>
</tr>
<tr>
<td>One hand and one foot</td>
<td>100%</td>
</tr>
<tr>
<td>Either hand or foot and sight of one eye</td>
<td>100%</td>
</tr>
<tr>
<td>Either hand or foot</td>
<td>50%</td>
</tr>
<tr>
<td>Sight of one eye</td>
<td>50%</td>
</tr>
<tr>
<td>Speech and hearing in both ears</td>
<td>100%</td>
</tr>
<tr>
<td>Speech</td>
<td>50%</td>
</tr>
<tr>
<td>Hearing in both ears</td>
<td>50%</td>
</tr>
<tr>
<td>Thumb and index finger of same hand</td>
<td>25%</td>
</tr>
</tbody>
</table>

"Loss" with regard to:
1. hand or foot, means actual complete severance through and above the wrist or ankle joints; and
2. eye means an entire and irrecoverable loss of sight;
3. speech or hearing means entire and irrecoverable loss of speech or hearing of both ears; and
4. thumb and index finger means actual severance through or above the joint that meets the finger at the palm.

“Principal Sum” means the full amount of the benefit paid for losses listed in the Table of Losses. The Principal Sum is shown in the Schedule of Benefits. Where less than 100% is shown, that portion of the full amount (Principal Sum) is payable.

**EXPOSURE**

The Company will pay benefits for covered losses that result from Your being unavoidably exposed to the elements due to an Accident. The loss must occur within 365 days after the event that caused the exposure.

**DISAPPEARANCE**

The Company will pay benefits for loss of life if Your body cannot be located one year after Your disappearance due to an Accident.

**ACCIDENTAL DEATH AND DISMEMBERMENT COMMON CARRIER (AIR ONLY)**

The Company will pay benefits for Accidental Injuries resulting in a loss as described in the Table of Losses below, that occurs while You are riding as a passenger in or on, boarding or alighting from, any air conveyance operated under a license for the transportation of passengers for hire during the Covered Trip. The loss must occur within 180 days after the date of the Accident causing the loss. The Principal Sum is shown Schedule of Benefits. The maximum benefits for any one single Accident is limited to $10,000,000 for all persons insured under the Policy. If more than one loss is sustained, as the result of an Accident, the amount payable shall be the largest amount shown in the Table of Losses.

<table>
<thead>
<tr>
<th>Loss of:</th>
<th>Percentage of Principal Sum:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>100%</td>
</tr>
<tr>
<td>Both hands or both feet</td>
<td>100%</td>
</tr>
<tr>
<td>Sight of both eyes</td>
<td>100%</td>
</tr>
<tr>
<td>One hand and one foot</td>
<td>100%</td>
</tr>
<tr>
<td>Either hand or foot and sight of one eye</td>
<td>100%</td>
</tr>
<tr>
<td>Either hand or foot</td>
<td>50%</td>
</tr>
<tr>
<td>Sight of one eye</td>
<td>50%</td>
</tr>
<tr>
<td>Speech and hearing in both ears</td>
<td>100%</td>
</tr>
<tr>
<td>Speech</td>
<td>50%</td>
</tr>
<tr>
<td>Hearing in both ears</td>
<td>50%</td>
</tr>
<tr>
<td>Thumb and index finger of same hand</td>
<td>25%</td>
</tr>
</tbody>
</table>
"Loss" with regard to:
1. hand or foot, means actual complete severance through and above the wrist or ankle joints; and
2. eye means an entire and irrecoverable loss of sight;
3. speech or hearing means entire and irrecoverable loss of speech or hearing of both ears; and
4. thumb and index finger means actual severance through or above the joint that meets the finger at the palm.

“Principal Sum” means the full amount of the benefit paid for losses listed in the Table of Losses. The Principal Sum is shown in the Schedule of Benefits. Where less than 100% is shown, that portion of the full amount (Principal Sum) is payable.

EXPOSURE
The Company will pay benefits for covered losses that result from You being unavoidably exposed to the elements due to an Accident of an air conveyance operated under a license for the transportation of passengers for hire during the Covered Trip. The loss must occur within 365 days after the event that caused the exposure.

DISAPPEARANCE
The Company will pay benefits for loss of life if Your body cannot be located one year after Your disappearance due to forced landing, stranding, sinking, or wrecking of an air conveyance operated under a license for the transportation of passengers for hire during the Covered Trip in which he/she was a passenger.

PLAN DEFINITIONS
Accident means a sudden, unexpected, unusual, specific event that occurs at an identifiable time and place, but shall also include exposure resulting from a mishap to a conveyance in which You are traveling.

Accidental Injury means Bodily Injury caused by an accident (of external origin) being the direct and independent cause in the loss.

Actual Cash Value means purchase price less depreciation.

Bodily Injury means identifiable physical injury which: is caused by an Accident, and is independent of disease or bodily infirmity.

Checked Baggage means a piece of baggage for which a claim check has been issued to You by a Common Carrier.

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

Company means Nationwide Mutual Insurance Company.

Covered Expenses shall mean expenses incurred by You which are for medically necessary services, supplies, care, or treatment; due to Illness or Injury; prescribed, performed or ordered by a Physician; reasonable and customary charges; incurred while insured under the Group Policy; and which do not exceed the maximum limits shown in the Schedule of Benefits, under each stated benefit.

Covered Trip means any class of scheduled trips, tours or cruises You request coverage and remit the required premium.

Dependent means lawful spouse or civil union relationship or Your child by blood or by law, who is less than 26 years of age, is unmarried and is a resident of New Hampshire or is enrolled as a student at a public or private institution of higher education.

Domestic Partner means a person with whom the Insured resides and can show evidence of cohabitation (including the shared responsibility for basic living expenses) for at least the previous six months and has an affidavit of domestic partnership, if recognized by the jurisdiction within which the Insured resides.

Economy Fare means the lowest published rate for a round trip economy ticket.

Effective Date means 12:01 A.M. local time, at the location of the Insured, on the day after the required premium for such coverage is received by the Company or its authorized representative.


Home Country means the country where the Insured Person has his/her true, fixed and permanent home and principal establishment.
Hospital means a facility that:
(a) holds a valid license if it is required by the law;
(b) operates primarily for the care and treatment of sick or injured persons as in-patients;
(c) has a staff of one or more Physicians available at all times;
(d) provides 24-hour nursing service and has at least one registered professional nurse on duty or call;
(e) has organized diagnostic and surgical facilities, either on the premises or in facilities available to the hospital on a pre-arranged basis; and
(f) is not, except incidentally, a clinic, nursing home, rest home, or convalescent home for the aged, or similar institution.

Host at Destination means a person with whom You are sharing pre-arranged overnight accommodations at the host’s usual principal place of residence.

Individual Coverage Term means the period of time beginning when You have been enrolled for coverage under this Policy and for whom the required premium has been paid.

Insured means the person who has enrolled for and paid for coverage under the Group Policy.

Land/Sea Arrangements means land and/or sea arrangements made by the Participating Organization.

Loss means injury or damage sustained by You in consequence of happening of one or more of the occurrences against which the Company has undertaken to indemnify You.

Maximum Benefit means the largest total amount of Covered Expenses that the Company will pay for Your covered losses.

Medically Necessary means a service or supply which: (a) is recommended by the attending Physician; (b) is appropriate and consistent with the diagnosis in accord with accepted standards of community practice; (c) could not have been omitted without adversely affecting an Insured’s condition or quality of medical care; (d) is delivered at the most appropriate level of care and not primarily for the sake of convenience; and (e) is not considered experimental unless coverage for experimental services or supplies is required by law.

Participating Organization means a travel agency, tour operator, cruise line, airline or other organization that applies for coverage under the Group Policy and remits the required premium to the Company.

Physician means a licensed practitioner of medical, surgical or dental services acting within the scope of his/her license. The treating Physician may not be You, a Traveling Companion or a Family Member.

Pre-Existing Condition means an illness, disease, or other condition during the (60) day period prior immediately prior to the Effective Date for which the Insured: 1) exhibited symptoms which would have caused one to seek care or treatment; or 2) received or received a recommendation for a test, examination, or medical treatment or 3) took or received a prescription for drugs or medicine. Item (3) of this definition does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription through the 60 day period before the Effective Date.

Scheduled Departure Date means the date on which You are originally scheduled to leave on the 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.

Sickness means an illness or disease which is diagnosed or treated by a Physician after the effective date of insurance and while You are covered under the Group Policy.

Terrorist Incident means an incident deemed a terrorist act by the United States Government that causes property damage or loss of life.

Travel Supplier means tour operator, cruise line, hotel etc. who has made the land and/or sea arrangements.

Trip means any Trip outside the Insured’s Home Country.

You or Your refers to the Insured.
EXCLUSIONS AND LIMITATIONS
The following exclusions apply to Baggage/Personal Effects:
The Company will not provide benefits for any loss or damage to:
1. animals;
2. automobiles and automobile equipment;
3. boats or other vehicles or conveyances;
4. trailers;
5. motors;
6. motorcycles;
7. aircraft;
8. bicycles (except when checked as baggage with a Common Carrier);
9. household effects and furnishing;
10. antiques and collector’s items;
11. eye glasses, sunglasses or contact lenses;
12. artificial teeth and dental bridges;
13. hearing aids;
14. prosthetic limbs;
15. prescribed medications;
16. keys, money, stamps, securities and documents;
17. tickets;
18. credit cards;
19. professional or occupational equipment or property, whether or not electronic business equipment;
20. personal computers telephones, computer hardware or software;
21. sporting equipment if loss or damage results from the use thereof.

Any loss caused by or resulting from the following is excluded:
1. breakage of brittle or fragile articles;
2. wear and tear or gradual deterioration;
3. insects or vermin;
4. inherent vice or damage while the article is actually being worked upon or processed;
5. confiscation or expropriation by order of any government;
6. war or any act of war whether declared or not;
7. theft or pilferage while left unattended in any vehicle;
8. mysterious disappearance;
9. property illegally acquired, kept, stored or transported;
10. insurrection or rebellion;
11. imprudent action or omission;
12. property shipped as freight or shipped prior to the Scheduled Departure Date.

The following exclusions apply to Accidental Death & Dismemberment, Accidental Death & Dismemberment – Common Carrier (Air Only), Emergency Sickness Medical Expense and Emergency Accident Medical Expense:
Loss caused by or resulting from:
1. participation in any war, invasion, acts of foreign enemies, hostilities between nations (whether declared or not), civil war;
2. participation in any military maneuver or training exercise any loss starting while the Insured is in the service of the armed forces of any country. Orders to active military service for training purposes of two months or less will not constitute service in the armed forces. Upon notice to the Company of entering the armed forces, the Company will return to the Insured pro-rata any premium paid, less any benefits paid, for any period during which the Insured is in such service;
3. piloting or learning to pilot or acting as a member of the crew of any aircraft;
4. participation as a professional in athletics;
5. commission or the attempt to commit a criminal act;
6. dental treatment except as a result of an injury to sound natural teeth limited to $750;
7. any non-emergency treatment or surgery, routine physical examinations, hearing aids, eye glasses or contact lenses;
8. curtailment or delayed return for other than covered reasons;
9. traveling for the purpose of securing medical treatment;
10. services not shown as covered;
11. Care or treatment that is not medically necessary;
12. Care or treatment for which compensation is payable under Worker’s Compensation Law, any Occupational Disease law; or similar legislation;
13. Injury or Sickness when traveling against the advice of a Physician;
14. Cosmetic surgery except for: reconstructive surgery incidental to or following surgery for trauma, or infection or other covered disease of the part of the body reconstructed, or to treat a congenital malformation of a child.
GENERAL PROVISIONS

EXTENDED COVERAGE: Coverage will be extended under the following conditions:

(a) When the Insured commences air travel from his/her origination point: within two (2) days before the commencement of the Land/Sea Arrangements, coverage shall apply from the time of departure from the origination point; or (ii) greater than two (2) days before the commencement of the Land/Sea Arrangements, the extension of coverage shall be provided only during his/her air travel.

(b) If the Insured returns to his/her origination point: within two (2) days after the completion of the Land/Sea Arrangements, coverage shall apply until the time of return to the origination point; or (ii) greater than two (2) days after the completion of the Land/Sea Arrangements, the extension of coverage shall be provided only during his/her air travel.

(c) If the Insured is a passenger on a scheduled common carrier that is unavoidably delayed in reaching the final destination coverage will be extended for the period of time needed to arrive at the final destination.

In no event will coverage be extended for unscheduled extensions to Your Covered Trip for which premium has not been paid in advance.

ARBITRATION: Notwithstanding anything in the Group Policy to the contrary, any claim arising out of or relating to this contract, or its breach, will be settled by arbitration administered by the American Arbitration Association in accordance with its Commercial rules except to the extent provided otherwise in this clause. Judgment upon the award rendered in such arbitration may be entered in any court having jurisdiction thereof. All fees and expenses of the arbitration shall be borne by the parties equally.

However, each party will bear the expense of its own counsel, experts, witnesses, and preparation and presentation of proofs. The arbitrators are precluded from awarding punitive, treble or exemplary damages, however so denominated. If more than one Insured is involved in the same dispute arising out of the same Group Policy and relating to the same loss or claim, all such Insureds will constitute and act as one party for the purposes of the arbitration. Nothing in this clause will be construed to impair the rights of the Insureds to assert several, rather than joint, claims or defenses.

LEGAL ACTIONS: No legal action for a claim can be brought against the Company until sixty (60) days after the Company receives proof of loss. No legal action for a claim can be brought against the Company more than two (2) years after the time required for giving proof of loss.

CONTROLLING LAW: Any part of the Group Policy that conflicts with the state law where the Group Policy is issued is changed to meet the minimum requirements of that law.

SUBROGATION: To the extent the Company pays for a loss suffered by You, the Company will take over the rights and remedies You had relating to the loss. This is known as subrogation. You must help the Company to preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over Your rights, You must sign an appropriate subrogation form supplied by the Company.

PAYMENT OF CLAIMS: The Company, or its designated representative, will pay a claim after receipt of acceptable proof of loss. Benefits for loss of life are payable to Insured’s beneficiary. If a beneficiary is not otherwise designated by the Insured, benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

a) the Insured’s spouse:
   b) the Insured’s child or children jointly:
   c) an Insured’s parents jointly if both are living or the surviving parent if only one survives:
   d) an Insured’s brothers and sisters jointly: or
   e) the Insured’s estate.

All other claims will be paid to the Insured. In the event the Insured is a minor, incompetent or otherwise unable to give a valid release for the claim, the Company may make arrangement to pay claims to the Insured's legal guardian, committee or other qualified representative.

All or a portion of all other benefits provided by the Group Policy may, at the option of the Company, be paid directly to the provider of the service(s). All benefits not paid to the provider will be paid to the Insured.

Any payment made in good faith will discharge the Company's liability to the extent of the claim.

The applicable benefit amount will be reduced by the amount of benefits, if any, previously paid by other Insurance Policies. In no event will the Company reimburse the Insured for an amount greater than the amount paid by the Insured.

NOTICE OF CLAIM: Written notice of claim must be given by the Claimant (either You or someone acting for You) to the Company or its designated representative within twenty (20) days after a covered loss first begins or as soon as reasonably possible. Notice should include Your name, the Participating Organization’s name and the Group Policy number. Notice should be sent to the
Company’s administrative office, at the address shown on the cover page of the Group Policy, or to the Company's designated representative.

PROOF OF LOSS: The Claimant must send the Company, or its designated representative, proof of loss within ninety (90) days after a covered loss occurs or as soon as reasonably possible.

PHYSICAL EXAMINATION AND AUTOPSY: The Company, or its designated representative, at their own expense, have the right to have You examined as often as reasonably necessary while a claim is pending. The Company, or its designated representative, also has the right to have an autopsy made unless prohibited by law.

The following provisions apply to Baggage/Personal Effects coverage:

NOTICE OF LOSS: If Your property covered under the Group Policy is lost, stolen or damaged, You must:
(a) notify the Company, or its authorized representative as soon as possible;
(b) take immediate steps to protect, save and/or recover the covered property;
(c) give immediate notice to the carrier or bailee who is or may be liable for the loss or damage;
(d) notify the police or other authority in the case of robbery or theft within twenty-four (24) hours.

PROOF OF LOSS: You must furnish the Company, or its designated representative, with proof of loss. This must be a detailed sworn statement. It must be filed with the Company, or its designated representative within ninety (90) days from the date of loss. Failure to comply with these conditions shall invalidate any claims under the Group Policy.

SETTLEMENT OF LOSS: Claims for damage and/or destruction shall be paid after acceptable proof of the damage and/or destruction is presented to the Company and the Company has determined the claim is covered. Claims for lost property will be paid after the lapse of a reasonable time if the property has not been recovered. You must present acceptable proof of loss and the value involved to the Company.

VALUATION: The Company will not pay more than the actual cash value of the property at the time of loss. Damage will be estimated according to actual cash value with proper deduction for depreciation as determined by the Company. At no time will payment exceed what it would cost to repair or replace the property with material of like kind and quality.

DISAGREEMENT OVER SIZE OF LOSS: If there is a disagreement about the amount of the loss either You or the Company can make a written demand for an appraisal. After the demand, You and the Company will each select Your own competent appraiser. After examining the facts, each of the two appraisers will give an opinion on the amount of the loss. If they do not agree, they will select an arbitrator. Any figure agreed to by 2 of the 3 (the appraisers and the arbitrator) will be binding. The appraiser selected by You is paid by You. The Company will pay the appraiser they choose. You will share equally with the Company the cost for the arbitrator and the appraisal process.

UNDERWRITER: Nationwide Mutual Insurance Company.

COVERAGE #2: EMERGENCY MEDICAL EVACUATION/REPATRIATION COVERAGE
The benefits outlined in this section are services provided by International SOS.

SCHEDULE OF BENEFITS:

<table>
<thead>
<tr>
<th>All Coverages and Benefits are in U.S. Dollar Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medical Evacuation</td>
</tr>
<tr>
<td>Medically Necessary Repatriation</td>
</tr>
<tr>
<td>Repatriation of Mortal Remains</td>
</tr>
<tr>
<td>Visit by Family Member or Friend</td>
</tr>
<tr>
<td>Return of Dependent Children</td>
</tr>
<tr>
<td>Visit by Family Member or Friend due to Felonious Assault</td>
</tr>
<tr>
<td>Necessary Repatriation due to Felonious Assault</td>
</tr>
</tbody>
</table>

EMERGENCY TRANSPORTATION SERVICES:

Emergency Evacuation: If you or your dependent suffer an Injury or Sickness and adequate medical facilities are not available locally in the opinion of International SOS’s Medical Director, International SOS will arrange and provide emergency evacuation (under medical supervision, if necessary) by whatever means necessary to the nearest facility capable of providing adequate care. Services include arranging and paying for transportation and related medical services (including cost of medical escort, if necessary) and medical supplies necessarily incurred in connection with the emergency evacuation.
Medically Necessary Repatriation: After initial treatment and stabilization for an Injury or Sickness, if the attending Physician and International SOS’s Medical Director deem it medically necessary, International SOS will arrange and transport you back to your permanent place of residence for further medical treatment or to recover. Services include arranging for transportation and related medical services (including cost of medical escort, if necessary) and medical supplies necessarily incurred in connection with the repatriation.

Repatriation of Mortal Remains: In the event of your death, International SOS will render assistance and provide for the return of mortal remains. Services include arranging for the following: location of a sending funeral home; transportation of the body from the site of death to the sending funeral home to the airport; minimally necessary casket or air tray for transport; coordination of consular services (in the case of death overseas); procuring death certificates; transport of the remains from the airport to the receiving funeral home. International SOS will also arrange and provide roundtrip economy airfare and lodging expenses (lodging and meal expenses not to exceed $500 per day up to a maximum of fourteen (14) days) for a family member or designated person to identify and accompany the Insured’s body to their Home Country.

Visit by Family Member or Friend: If you are hospitalized for more than three (3) days, International SOS will arrange and provide your family member or friend with transportation to visit you. Visit by Family Member or Friend services are subject to a maximum coverage limit, to include meals and accommodations subject to a daily maximum.

Return of Dependent Children: If you are hospitalized for more than seven (7) days, International SOS will arrange and provide the return of your minor children who are under eighteen (18) years of age, and, if necessary, accompany him/her with an attendant.

EMERGENCY TRANSPORTATION SERVICE AS THE RESULT OF FELONIOUS ASSAULT:
Necessary Repatriation due to Felonious Assault: If you are the victim of a felonious assault that has been documented by the local authorities and it has been determined by the participating organization that you are unable to continue with your trip, International SOS will arrange and transport you back to your permanent place of residence.

Visit by Family Member or Friend due to Felonious Assault: If you are the victim of a felonious assault that has been documented by the local authorities, International SOS will arrange and provide transportation for a family member or Friend of your choice to come and comfort you during your ordeal. The plan will provide up to a maximum coverage limit of $5,000, to include coverage for round-trip economy transportation, meals and accommodations subject to a daily maximum of up to $500, up to a maximum of five (5) days.

EXCLUSIONS AND LIMITATIONS:
A. International SOS shall not provide services enumerated if the coverage is sought as a result of: participation in any war, invasion, acts of foreign enemies, hostilities between nations (whether declared or not) or civil war, rebellion, revolution, and insurrection, military or usurped power; participation in any military maneuver or training exercise; traveling against the advice of a Physician; traveling for the purpose of obtaining medical treatment; piloting or learning to pilot or acting as a member of any aircraft; commission or the attempt to commit a criminal act; skydiving; hang gliding; parachuting; mountain climbing; any race; bungee cord jumping; speed contests; spelunking or caving, heliskiing, extreme skiing; dental treatment except as a result of accidental Injury to sound, natural teeth; any non-emergency treatment or surgery, routine physical examinations, hearing aids, eyeglasses or contact lenses; pregnancy and childbirth (except for complications of pregnancy); curtailment or delayed return for other than covered reasons; services not shown as covered.

B. The services described above currently are available in every country of the world. Due to political and other situations in certain areas of the world, International SOS may not be able to respond in the usual manner. It is your responsibility to inquire whether a country is "open" for assistance prior to your departure and during your stay. International SOS also reserves the right to suspend, curtail or limit its services in any area in the event of rebellion, riot, military uprising, war, terrorism, labor disturbance, strikes, nuclear accidents, Acts of God or refusal of authorities to permit International SOS to fully provide services.

C. If you request a transport related to a condition that has not been deemed medically necessary by a Physician designated by International SOS in consultation with a local attending Physician, or to any condition excluded hereunder, and you agree to be financially responsible for all expenses related to that transport, International SOS will arrange for such transport to a medical facility or to your residence and will make such arrangements using the same degree of care and completeness as if International SOS was providing service under this agreement. A waiver of liability will be required prior to arranging these transportation services.

All transportation benefits provided hereunder must be by the most direct and economical route possible.

For the purposes of this Agreement, the following definitions shall apply; “Injury” means identifiable injury caused by an Accident. “Accident” means a sudden, unexpected, unusual, specific event, which occurs at an identifiable time and place. “Sickness” means a sickness of the Participant declares itself during the period when services are available under this Agreement.
International SOS is not responsible and cannot be held liable for any malpractice performed by a local Physician or attorney who is not an employee of International SOS; or for any loss or damage to your vehicle during the return of vehicle; or for any loss or damage to any personal belongings.

IMPORTANT: The individual or their representative must contact International SOS to arrange for any services provided herein. Failure to contact International SOS, and failure to utilize International SOS to make arrangements for services shall render the expenses ineligible.

COVERAGE #3: POLITICAL & NATURAL DISASTER EVACUATION COVERAGE

The benefits outlined in this section are services provided by International SOS.

SCHEDULE OF BENEFITS:

<table>
<thead>
<tr>
<th>All Coverages and Benefits are in U.S. Dollar Amounts</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Political Evacuation</td>
<td>$100,000</td>
</tr>
<tr>
<td>Natural Disaster Evacuation</td>
<td>$100,000</td>
</tr>
<tr>
<td>Aggregate Benefit any one occurrence</td>
<td>$500,000</td>
</tr>
</tbody>
</table>

$100,000 Emergency Political Evacuation/Repatriation

A. Emergency Political Evacuation/Repatriation: In the event of a threatening security or political emergency situation due to governmental or social upheaval at the Member’s location (as defined in the definition of Emergency Political Repatriation outlined in Section B), International SOS will arrange (and pay for in accordance with the terms set forth herein) for the evacuation of the Member from the area. Evacuation services are provided by International SOS security personnel to the nearest safe location and then to Member’s Resident Country. The decision to evacuate will be made by International SOS security personnel in consultation with local governments and security analysts and in accordance with the Definition of Emergency Political Repatriation outlined in Section B. International SOS may use any or all appropriate resources to evacuate the Member, including but not limited to charter aircraft and ground and sea transportation in such circumstances where the point of departure may not be an international airport.

Covered Expenses: All reasonable expenses incurred for your transportation to the nearest place of safety, and then to your Resident Country, are covered up to a maximum of $100,000. Arrangements will be by the most appropriate and economical means available and consistent with your health and safety. All transportation and arrangements must be coordinated by International SOS. Expenses incurred without the authorization of International SOS are not covered. No claims for reimbursement will be accepted.

B. Definitions:

“Emergency Political Repatriation” is an evacuation for the following reasons:

1. Officials of the Foreign Country or the embassy of the country with which the Member is a national has issued for reasons other than medical, a recommendation that categories of persons which include the Member should leave the Foreign Country; and/or
2. Member is being expelled or declared persona non grata on the written authority of the recognized government of the Foreign Country; and/or
3. The political and military events in the Foreign Country has created a situation in which the Member is in danger of imminent bodily harm to the extent that the Member must be removed from the Foreign Country; and
4. Member cannot obtain commercial transportation to the nearest safe location within a time period which will enable the Member to leave the Foreign Country in time to avert imminent bodily harm or to comply with the time allowed to leave the Foreign Country pursuant to the orders of the recognized government of that Foreign Country.

“Imminent Bodily Harm” means imminent bodily injury to a Member caused solely and directly by violent and external means.

“Covered Event” is the Emergency Political Repatriation of a Member. In order to qualify as a Covered Event, the Emergency Political Repatriation must occur within 10 (ten) days of the event or events set forth in the definition of Emergency Political Repatriation.

“Repatriation” is the return of a Member to his or her Resident Country or in the event of death the return of remains.

“Resident Country” is the domiciliary country of the Member.

C. Exclusions and Limitations:

International SOS shall not cover any services in connection with an event arising from or attributable to:

1. Violation by a Member of the laws or regulations of the country in which the Covered Event takes place;
2. The failure of a Member to properly procure or maintain immigration, work, residence or similar visas, permits, or other documentation;
3. The debt, insolvency, commercial failure, or the repossession of any property by a title holder or any other financial default by a Member;
4. The failure of a Member to honor any contractual obligation or bond to obey any condition of a license;
5. The Emergency Political Repatriation of a Member who is in his or her Resident Country;
6. Any medical expenses incurred by a Member;
7. The kidnap and/or ransom of a Member;
8. Any expenses not related or incident to an Emergency Political Repatriation.

Limitations: In the event a covered Member is in an area in which an act of rebellion, riot, military uprising, war, terrorism, labor disturbance, strike, nuclear accident, or interference by authorities inhibits International SOS’s ability to fully provide services, International SOS shall nonetheless use its best efforts to provide its services, recognizing that obstacles beyond its control will affect the level of service. International SOS cannot be held responsible for failure to provide services or for delays caused by strikes or other conditions beyond its control including, but not limited to, flight conditions, or where rendering of service is prohibited by local laws or regulatory agencies.

International SOS, at its sole discretion, will assist Members on a fee-for-service basis for interventions falling under the Limitations. Any such services shall be paid for by the Member and International SOS agrees that it shall be responsible for securing the agreement from such Members to pay International SOS directly. International SOS reserves the right, at its sole discretion, to request additional financial guarantees or pre-payment or indemnification from the Member prior to rendering such service on a fee-for-service basis. If an evacuation is impossible due to hostile conditions, International SOS will use security resources to maintain contact with the Member until evacuation becomes possible or the emergency is concluded. All arrangements must be arranged and coordinated by International SOS. Services rendered without the coordination and approval of International SOS are not covered.

International SOS retains the discretion to limit one (1) emergency evacuation and or repatriation attributable to any single political emergency situation.

$100,000 Natural Disaster Evacuation
A. Natural Disaster Evacuation: In the event of a Natural Disaster Situation, We will on a best-effort basis arrange for your evacuation from a safe departure point we designate to a safe haven of our selection. We will pay for your evacuation up to and including seven (7) days from the date of the official disaster declaration issued by the relevant host country. We will assist with and pay for ground, water and/or air transportation, as may be warranted, to a safe haven. If evacuation becomes impractical due to hostile or dangerous conditions, we will maintain contact with and advise you until evacuation becomes viable or the natural disaster situation has passed.

B. Definitions
“Natural Disaster Situation” means an event occurring directly out of a event of natural cause, including wildfire, earthquake, windborne dust or sand, volcanic eruption, tsunami, snow, rain or wind, that results in widespread and severe damage such that the government of the host country issues an official disaster declaration and determines the affected area to be uninhabitable. Natural Disaster does not include the direct or indirect affect of rain, wind or water associated with named storms meeting the definition of hurricane or typhoon, except in instances where:
   a. the path of the named storm deviates by a distance of greater than 200 miles within a 72-hour period from the path forecast by a national recognized meteorological service; or
   b. less than 72 advance hours notice of a potential landfall for a named storm exists.

In no event, shall a Natural Disaster be deemed to apply to a marine vessel, ship or watercraft of any kind.

C. Exclusions and Limitations:
We shall not be responsible for any costs or expenses arising from:
1) Travel arrangements that were neither coordinated nor approved by International SOS in advance.
2) Natural disaster evacuations when the natural disaster situation or the event directly giving rise to it precedes your arrival.
3) Services not otherwise shown as covered in the program description to which this amendment is attached.

Limitations: Our obligation to pay for a natural disaster evacuation will be limited to a maximum of $100,000 per event per person. Eligible expenses shall include transportation and, if required, costs to protect your safety during assembly and transit. Food, lodging and incidental expenses at the safe haven are not included. Should the U.S. Government intervene and provide for evacuation services, this action will supersede any paid evacuation benefit.
COVERAGE #4: ISOS CASE FEES

The benefits outlined in this section are provided by International SOS.

ANNEX II
SCHEDULE OF FEES (USD)

This schedule of fees is attached to and forms part of the Scholastic Comprehensive Service Terms and Conditions. The following schedule of fees shall only be applicable to the Services where the Subscriber, Member or Authorized Person has requested Intl.SOS to deliver the Services.

1. MEDICAL EVACUATION AND REPATRIATION

1.1 By air ambulance

Where Intl.SOS organizes the transportation of a Member, by chartering a pre-configured air ambulance aircraft from an Intl. SOS accredited aviation service provider, including Air Rescue International.

The airport-to-airport quotation from the aviation service provider includes aircraft and medical team costs but excludes any other service provider charges, which may be applied and will be billed to the Subscriber at cost.

i. **Medical Coordination Fee** of 15% of the total costs paid to service providers will be charged to the Subscriber.

1.2 By air charter

Where Intl.SOS organizes the transportation of a Member, by chartering an aircraft made suitable for patient transportation, by the provision of portable medical equipment and medical staff from Intl.SOS.

i. **Medical Escort Fee inclusive of portable medical equipment** (refer to Table 1)

ii. **Medical Coordination Fee** of 15% of the total costs paid to service providers, not inclusive of Medical Escort Fees, will be charged to the Subscriber.

1.3 By scheduled airline

Where Intl.SOS organizes the transportation of a Member, on commercial aircraft or scheduled airline, made suitable for patient transportation by the provision of portable medical equipment and medical staff from Intl.SOS.

i. **Medical Escort Fee inclusive of portable medical equipment** (refer to Table 1)

ii. **Medical Coordination Fee** (refer to Table 2)

iii. Where applicable, **Ground Handling Fee(s)** will be applied (refer to Table 3)

1.4 Other modes of surface transportation– ground or maritime

Where Intl.SOS organizes the transportation of a Member, by road ambulance, train, boat, ferry, or other means of surface or maritime transportation, made suitable for patient transfer by the provision of portable medical equipment and medical staff from Intl.SOS.

i. **Medical Escort Fee inclusive of portable medical equipment** (refer to Table 1)

ii. **Medical Coordination Fee** of 15% of the total costs paid to service providers, not inclusive of Medical Escort Fees, down to a minimum of USD 155, will be charged to the Subscriber.

2. REPATRIATION OF MORTAL REMAINS AND/OR LOCAL FUNERAL SERVICES

2.1 Repatriation of Mortal Remains

Where Intl.SOS organizes the repatriation of a deceased Member's mortal remains, from the place of death to the Member's home country.

i. **Repatriation of Mortal Remains Coordination Fee** of USD 1,945 will be charged to the Subscriber, in addition to the costs charged by the service provider(s).
ii. Intl.SOS staff may be deployed on a case by case basis. The applicable fees will be agreed with the Subscriber prior to deployment.

2.2 Local Funeral Services
Where Intl.SOS arranges for a local burial or cremation at the Member’s place of death, when permitted by applicable laws and procedures and if the service is available and practicable.

   i. **Local Funeral Services Coordination Fee** of USD 1,945 will be charged to the Subscriber, in addition to the costs charged by the service provider(s).
   ii. Intl.SOS staff may be deployed on a case by case basis. The applicable fees will be agreed with the Subscriber prior to deployment.

Where services described in 2.1 and 2.2 are provided in conjunction for the same deceased Member, only the Repatriation of Mortal Remains Coordination Fee described above applies.

3. MONITORING OF MEDICAL CARE, MEDICAL EXPENSE GUARANTEE AND PAYMENT

3.1 Outpatient care

An outpatient is defined as a patient who receives medical services and is not admitted as an inpatient by the treating physician.

Outpatient treatment commences the day of the first appointment with a treating medical practitioner.

The last outpatient day is the day of the last appointment for the same episode of care.

   i. **Outpatient Service Fee**: where Intl.SOS monitors the progress of outpatient medical care provided to a Member by a medical practitioner and/ or guarantees and pays service provider costs associated with a Member’s outpatient medical care, the Outpatient Service Fee will be charged to the Subscriber, as follows:

<table>
<thead>
<tr>
<th>Treatment Duration</th>
<th>Outpatient Service Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 14 Days</td>
<td>USD 195 per case*</td>
</tr>
<tr>
<td>Additional days above 14 and up to 60 consecutive days</td>
<td>An additional fee of USD 125 per case will be charged</td>
</tr>
<tr>
<td>61 consecutive days and over</td>
<td>Quote provided on a case by case basis</td>
</tr>
</tbody>
</table>

4. OTHER SERVICES EXCEPT FOR ITEMS 1, 2 AND 3 ABOVE

Where Intl.SOS arranges for the delivery of other travel and medical assistance services, not listed in items 1, 2 and 3 above.

   i. **Coordination Fee** of 15% of the total costs paid to service providers, or a minimum of USD 155, whichever is greater, will be charged to the Subscriber.

Service provider expenses incurred on behalf of the Subscriber, are supported by an invoice, receipt or voucher and recharged at cost. Intl.SOS reserves the right to revise this schedule of fees from time to time.

ATTACHMENTS

**Table 1 – Medical Escort Fees (Daily rates)**

The Medical Escort Fees are based on the type of medical escort personnel and equipment required, and are charged in half-day increments, starting with a minimum of one day (24 hrs). Intl.SOS reserves the right to select a medical team befitting the real time clinical status and medical condition of the patient.

The below Medical Escort Fees are inclusive of the following:
- Medical escort crew charges
- Drugs, disposables, portable medical equipment and surgical sundries costs required during the transportation
- Relevant insurance provisions.
<table>
<thead>
<tr>
<th>Medical Team originating from:</th>
<th>Asia</th>
<th>Americas, Europe, Middle East</th>
<th>Australia Africa, CIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist/Anaesthetist</td>
<td>USD 4,145</td>
<td>USD 6,555</td>
<td>USD 4,300</td>
</tr>
<tr>
<td>General Practitioner</td>
<td>USD 2,865</td>
<td>USD 6,300</td>
<td>USD 3,685</td>
</tr>
<tr>
<td>ICU Nurse</td>
<td>USD 1,585</td>
<td>USD 4,200</td>
<td>USD 2,200</td>
</tr>
<tr>
<td>Nurse</td>
<td>USD 1,435</td>
<td>USD 3,790</td>
<td>USD 2,050</td>
</tr>
</tbody>
</table>

The Medical Escort Fees above do not include the following ancillary costs which may be applied and will be billed to the Subscriber at cost:
- Room and board for patient, medical escort team and accompanying person(s);
- Additional / non-standard equipment / crew required

Table 2 – Medical Coordination Fee for medical evacuations and repatriations by scheduled airline

The Medical Coordination Fee is based on the patient’s total flight time, excluding layover time, as detailed on the patient’s airline ticket and itinerary.

<table>
<thead>
<tr>
<th>Flight Time (excluding layover time)</th>
<th>Seated patients</th>
<th>Stretcher patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Totaling 2 hours and below</td>
<td>USD 255</td>
<td>USD 770</td>
</tr>
<tr>
<td>Totaling over 2 hours and 6 hours or less</td>
<td>USD 770</td>
<td>USD 1,535</td>
</tr>
<tr>
<td>Totaling over 6 hours and 10 hours or less</td>
<td>USD 1,280</td>
<td>USD 2,305</td>
</tr>
<tr>
<td>Totaling over 10 hours</td>
<td>USD 1,790</td>
<td>USD 3,070</td>
</tr>
</tbody>
</table>

Table 3 – Ground Handling Fees

The ground handling support includes the facilitation of on the ground administration, logistics or operational support. This support may include:
- Immigration and customs clearance assistance
- Meeting service at points of arrival/departure
- Wheelchair assistance at points of arrival/departure
- Check-in/Departure assistance
- Tarmac access application

i. Where ground handling support is rendered by a service provider, the service provider expenses will be charged at cost.
ii. In locations where ground handling support is delivered directly by Intl.SOS personnel, a Ground Handling Fee will be charged to the Subscriber, in accordance with the table below.

<table>
<thead>
<tr>
<th>Americas, Europe, Middle East</th>
<th>Asia, Australia, Africa, CIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>USD 1,435</td>
<td>USD 975</td>
</tr>
</tbody>
</table>
24-HOUR EMERGENCY ASSISTANCE:
WHAT TO DO IN THE EVENT OF AN EMERGENCY
Upon enrollment into a study abroad program travelers should visit their school’s online portal with International SOS to familiarize themselves with the services that International SOS offers students while they are abroad.

Please go to www.internationalsos.com and at the prompt for the Members’ website log in enter your school’s International SOS membership number.

If you have a pre-trip medical or security related question or emergency while overseas, please call collect to the 24-hour International SOS alarm center in Philadelphia: 1-215-942-8478

The alarm center is staffed by doctors, logistics coordinators and security experts. International SOS alarm centers can provide medical advice, assistance in your location, or arrange for an evacuation.

International SOS services include the following:

- Medical Evacuation and Repatriation coordinated through International SOS.
- Political and Natural Disaster Evacuation coordinated through International SOS.
- Payment of overseas Medical Bills coordinated through International SOS and Consolidated Health Plans.
- One call to International SOS coordinates all benefits with the Plan Administrator.
- Full coordination with the International SOS credentialed medical provider network worldwide.
- Transportation to join a hospitalized member, accommodation while visiting hospitalized member, return of minor children, and return of traveling companion are services coordinated through with International SOS.
Nationwide® Privacy Statement

Thank you for choosing Nationwide
Our privacy statement explains how we collect, use, share, and protect your personal information. So just how do we protect your privacy? In a nutshell, we respect your right to privacy and promise to treat your personal information responsibly. It’s as simple as that. Here’s how.

Confidentiality and security
We follow all data security laws. We protect your information by using physical, technical, and procedural safeguards. We limit access to your information to those who need it to do their jobs. Our business partners are legally bound to use your information for permissible purposes.

Collecting and using your personal information
We collect personal information about you when you ask about or buy one of our products or services. The information comes from your application, business transactions with us, consumer reports, medical providers, and publicly available sources. Please know that we only use that information to sell, service, or market products to you.

We may collect and use the following types of information:
• Name, address, and Social Security number
• Assets and income
• Account and policy information
• Credit reports and other consumer report information
• Family member and beneficiary information
• Public information

Sharing your information for business purposes
We share your information with other Nationwide companies and business partners. When you buy a product, we share your personal information for everyday purposes. Some examples include mailing your statements or processing transactions that you request. You cannot opt out of these. We also share your information where federal and state law requires.

Sharing your information for marketing purposes
We don’t sell your information for marketing purposes. We have chosen not to share your personal information with anyone except to service your product. So there’s no reason for you to opt out. If we change our policy, we’ll tell you and give you the opportunity to opt out before we send your information.

Using your medical information
We sometimes collect medical information. We may use this medical information for a product or service you’re interested in, to pay a claim, or to provide a service. We may share this medical information for these business purposes if required or permitted by law. But we won’t use it for marketing purposes unless you give us permission.

Accessing your information
You can ask us for a copy of your personal information. Please call the number on your insurance ID card if applicable, contact your customer service representative, or send a letter to the address below and have your signature notarized. This is for your protection so we may prove your identity. We don’t charge a fee for giving you a copy of your information now, but we may charge a small fee in the future.

We can’t update information that other companies, like credit agencies and third parties, provide to us. So you’ll need to contact these other companies to change and correct your information.

Send your privacy inquiries to the address below. Please include your name, address, and policy number. If you know it, include your agent’s name and number.

Consolidated Health Plans
On Behalf of Nationwide Insurance Company and Affiliated Companies
2077 Roosevelt Avenue
Springfield, MA 01104

A parting word...
These are our privacy practices. They apply to all current and former clients of Nationwide Specialty Insurance. They also apply to joint policy or contract holders. This includes the following companies:

Nationwide Life Insurance Company
Nationwide Mutual Insurance Company
National Casualty Company
Allied Property and Casualty Insurance Company