

TravelCare Policy Wording

PART I: GENERAL PROVISIONS

1. Definition

In this Policy Wording, unless otherwise required by the context, the following terms shall have the meanings set forth below:

Company

Means Chubb Assurance Vietnam Limited.

Policyholder

An organization or individual that enters into an Insurance Policy with the Company and pays the required premium.

Insured

An eligible individual whose insurance coverage has been confirmed by the Company through the issuance of a Policy Schedule/Certificate of Insurance identifying them as an insured person under the Insurance Policy.

Application Form

A duly completed form presenting information relating to the insurance request, medical questionnaires, and other relevant data in the format prescribed by the Company from time to time, for the purpose of Policyholder/Insured applying for TravelCare.

Endorsement

A duly completed form issued by the Company presenting changes and/or supplements to the Insurance Policy according to agreements between the Company and the Policyholder and/or the Insured.

Certificate of Insurance

For the Single Trip Insurance Policy, the certificate of insurance issued by the Company to the Policyholder and/or the Insured. The certificate of insurance can also be issued for an Annual Insurance Policy, as the case may be.

Policy Schedule

For the Annual Insurance Policy, the policy schedule issued by the Company to the Policyholder and/or the Insured. The policy schedule can also be issued for the Single Trip Insurance Policy, as the case may be.

Benefits Plans

The table of benefits attaches to the Insurance Policy, is a part of the Insurance Policy and is referenced together with the Insurance Policy/Certificate of Insurance.

Insurance Policy

As specified in Part I – General Provisions, Article 2 (Insurance Policy) of this Policy Wording.

Single Trip Insurance Policy

Means the Insurance Policy for one Trip.

Annual Insurance Policy

Means a policy of which the Insurance Period is one year and under which the Insured will be covered for each Trip the Insured takes during the Insurance Period and there is no limit on the number of Trips the Insured makes during the Insurance Period. However, the scope of insurance is limited to a maximum of ninety (90) days for any one Trip.

Insurance Period

Means the period as stated in the Policy Schedule/Certificate of Insurance.

For an Insured, the Insurance Period for each Trip is the period that begins at the Start Time and ends at the Expiry Time.

Insurance Period is calculated according to Vietnam standard time.

Trip

Means the journey undertaken by the Insured and insured by the Company under this Insurance Policy. The Trip starts at the Start Time and ends at the Expiry Time.

The Start Time of each Trip is:

The time when the Insured completes the security check procedures to leave the international check-out point in Vietnam to travel to the Overseas destination (hereinafter referred to as the “**Check-out Time**”), provided that, the Check-out Time is not prior to the starting time of the Insurance Period as stated in the Policy Schedule/Certificate of Insurance.

The Expiry Time of each Trip is:

- (a) The expiring time of the Insurance Period stated in the Policy Schedule/Certificate of Insurance; or
- (b) The time of arrival in Vietnam from the completion of the security check procedures at the international arrival point (check-in point) in Vietnam;

whichever comes first.

Time limit for notification of insurance events

Is within the period of thirty (30) days from the end of the Trip. Except for force majeure, if the Insured or his/her legal representative fails to notify of the insurance event within the aforementioned 30-day period, the Company shall be entitled to impose a penalty in the following proportions, calculated on the total amount of compensation:

- Notifying of the insurance event from the 31st day to the 90th day after the date of the insurance event: 10%
- Notifying of the insurance event from the 91st day to the 210th day after the date of the insurance event: 20%
- Notifying of the insurance event from the 211th day to the 365th day after the date of the insurance event: 30%

Time limit for claim payment

When an insurance event occurs, the Company shall settle the claim payment within the time limit as agreed under the Insurance Policy; if there is no mutual agreement on this time limit, the Company shall settle the claim payment within 15 working days from the date the Company receives complete and accurate claim documents.

Physician

A person legally licensed and recognized by the laws of the country of practice to engage in the diagnosis and treatment of medical conditions within the scope of their training and licensure.

Chinese Herbalist

Means a Physician or medical practitioner licensed in Chinese medicine in accordance with the laws of the country in which they practice.

Medical Facility

Any hospital, clinic, dispensary, and/or healthcare institution that is licensed and operates legally to provide medical examination and/or treatment in the country in which it is incorporated.

Accident

An unexpected event caused by an external and visible force acting upon the Insured's body occurring during the Insurance Period. This event must result in physical harm to the Insured, be unintentional, beyond the Insured's control, and be the direct and sole cause of the Insured's Injury or Death.

Sudden Incident or unexpected

Means any unexpected event or incident that happens suddenly, unintentionally and unpredictably and occurs when the Trip is being taken during the Insurance Period.

Injury

A bodily injury that sustained by the Insured, occurred in the Travel Regions, caused solely by an Accident and not by Sickness/Disease or gradual deterioration of mental or physical health, age, disability, or degenerative processes.

Sickness/Disease

A deviation from the normal healthy state of the body of the Insured.

Age

A person's Age is determined as of their most recent past birthday. It is verified using one of the following documents: birth notification, birth certificate, national ID, citizenship card, household registration book, passport, other papers/documentations (if any).

Age Limit

From a minimum of zero (0) year of age since the birthday to a maximum of eighty (80) years of age.

Minor Child/Children

Means a child living legally dependent on the Insured (including stepchild and legally adopted child) who is:

- (a) travelling in a Trip with the Insured and/or the Insured's legal spouse (unless otherwise agreed by the Company); and
- (b) living wholly dependent on the Insured for financial support and not gainfully employed in any way; and
- (c) unmarried; and
- (d) between the age of zero (0) and seventeen (17) years.

Family Member(s) means:

- (a) For Single Trip Insurance Policy – Applicable to a maximum of 2 adults and unlimited number of Minor Children. The 2 adults need not be of the same blood relationship but the Minor Child(ren) must have a blood or foster relationship with either of the adults as provided for in the definition of Minor Child. All the Insureds must depart from and return to Vietnam together at the same time.
- (b) For Annual Insurance Policy – Applicable to one Insured, the legal spouse of the Insured with no limit to the number of Minor Child(ren). However, the Minor Child(ren) must have a blood or foster relationship with either of the adults and be accompanied by either of the insured adults for any Trips taken during the Insurance Period.

For the purposes of this definition of "Family Member(s)", "adult(s)" means the person(s) from 18 years of age to 80 years of age.

Relatives

Means spouses, children, parents, father-in-laws/mother-in-laws, siblings, paternal and maternal grandparents of the Insured, or person(s) accompanying the Insured during the Trip.

Natural Disaster means earthquake, volcanic eruption, storms, fog and the like.

Cash

Means cash or valuable papers that are convertible into cash, not including credit cards and valuable loyalty cards.

Pair/ set

If insurance covers many Insured's items which form a pair or a set, the Company's liability shall not exceed the value of the part(s) that is lost or damaged irrespective of the special value that the item(s) would have had if they are a pair or a set.

Items which form part of one (1) set or pair: Where the item forming part of a set or pair is lost or damaged, the Company will only pay the replacement value of the item that is lost, damaged or stolen. The Company will not pay for the cost of replacing the entire set or pair.

Valuables

Means articles of gold, silver or other precious metal, jewellery, furs, watches and precious and semi-precious gems.

Public Places

Means any place that the public can enter and exit, including airports, stores, restaurants, hotel lobbies, beaches, golf courses, racetracks, offices, and other places that the public can enter and exit.

Hospital Services/Hospitalization

Medical services provided to the Insured when admitted to a Medical Facility for at least 24 hours or overnight for the treatment of a Sickness/Disease, Injury, and only when appropriate diagnostic and/or treatment procedures are not available for Outpatient Services, requiring admission as a registered inpatient or Day Case Treatment patient at a Medical Facility. If the Medical Facility is unable to issue an admission/discharge letter, then medical records or invoices clearly indicating the treatment dates shall be accepted as alternative documentation. A hospitalization "day" is defined as a 24-hour period and is based on the room and board charges listed in the discharge letter or detailed medical billing documentation.

Hospital Services include Reasonable and Customary charges in the location where treatment is provided, including hospital accommodation, room and meal charges, use of medical equipment and facilities, and all treatments and medical services prescribed by a Physician and/or Medical Facility, including intensive care unit charges when medically necessary.

For the avoidance of doubt, any word or expression used in this Insurance Policy that is linguistically similar to "Hospital Services" or "Hospitalization" (including, without limitation, hospital stay, admission, confinement, or any comparable term) shall be construed to have the same meaning as set out above.

Outpatient Services

Medical treatment provided to the Insured when not registered as an inpatient or Day Case Treatment patient in a Medical Facility. Laboratory testing, radiographic and nuclear medicine procedures are to diagnose and treat medical conditions. Laboratory and x-ray services have to be prescribed by a Physician and/or Medical Facility.

Outpatient Services also include prescribed medication, the sale and use of which must be prescribed by a Medical Facility. Over-the-counter medication is not covered.

Inpatient Treatment

Coverage for Sickness/Disease/Injury, occurring during the Insurance Period that requires the Insured to admit into a Medical Facility for inpatient treatment and/ or inpatient surgery.

Day Case Treatment

Medically Necessary treatment, including non-Emergency outpatient surgery due to Accident and Sickness/Disease, carried out in a Medical Facility where the Insured is admitted for at least six (6) consecutive hours and incurs room and board charges, but does not exceed twenty-four (24) consecutive hours and does not stay overnight. The consecutive six-hour minimum stay is not required for Emergency outpatient surgery resulting from Accident and Sickness/Disease. If the Insured undergoes surgical treatment at a Medical Facility due to Accident and Sickness/Disease, the Company shall reimburse the Reasonable and Customary charges actually incurred, subject to the applicable limits of liability as specified in the Insurance Policy. In cases of minor surgeries/microscopies for the purposes of diagnosis of sickness/disease/injury within a day will be settled according to the Outpatient Services.

Medically Necessary

Any treatment, service, or procedure which, in the opinion of the attending Physician and/or Medical Facility, is appropriate and consistent with the diagnosis and accepted medical standards. Specifically, medical services or treatments must: (a) align with medical diagnosis and standard treatment practice for the related disease or injury; and (b) commonly follow accepted medical standards; and (c) be necessary and performed in a Medical Facility; and (d) not be for testing, diagnosis, research, prevention, or screening purposes; and (e) involve a hospital stay that is reasonable in length and in line with standard medical practice for the related disease or injury. The Company reserves the right to apply and adjust the number of hospital admission days which are considered Medically Necessary from time to time.

Reasonable and Customary

No benefit shall be paid for charges exceeding the general level of charges made by other providers of similar standing in the locality where the charges are incurred, for comparable treatment, services or supplies for similar Injury or Sickness/Disease. The Company will determine such Reasonable and Customary charges based on its own experience in handling similar cases and quotations received from similar standard Medical Facilities within the region.

Emergency Conditions

Refers to a bona fide situation where there is a sudden and accidental change in the Insured's health status requiring urgent medical or surgical intervention to prevent serious threat to the Insured's life or health.

Infectious Disease

Means a disease that the World Health Organization recommends as contagious.

Congenital Disease

Any disease, malformation, birth defect, or abnormality formed during fetal development due to environmental influences on the fetus. These may be referred to by various terms (with or without the word "congenital"), such as congenital diseases, birth defects, congenital abnormalities, or chromosomal disorders. Diagnosis must be made by a Physician or in accordance with applicable laws /health authorities.

Genetic Disease

Any disease occurring among blood relatives or inherited genetically from parents to children and/or passed from generation to generation among relatives. Diagnosis must be made by a Physician or in accordance with applicable laws.

Pre-existing Condition:**(a) For Single Trip Insurance Policy:**

Any Sickness/Disease/Injury which:

- (i) existed before the Start Time of each Trip with symptoms the Insured was aware of or reasonably should have been aware of; or
- (ii) for which the Insured received or sought treatment, medication, advice, or diagnosis within twelve (12) months prior to the Start Time of each Trip; or
- (iii) was known to the Insured to exist prior to the Start Time of each Trip, regardless of whether treatment, medication, advice, or diagnosis was obtained by the Insured.

(b) For Annual Insurance Policy:

Any Sickness/Disease/Injury which:

- (i) an Insured Person has made a claim on a previous Trip;
- (ii) existed before the Start Time of each Trip with symptoms the Insured was aware of or reasonably should have been aware of; or
- (iii) for which the Insured received or sought treatment, medication, advice, or diagnosis within twelve (12) months prior to the Start Time of each Trip; or
- (iv) was known by the Insured to exist prior to the Start Time of each Trip, regardless of whether treatment, medication, advice, or diagnosis was obtained by the Insured.

Terrorism

Means an act, including use of force or violence and/or the threat thereof, of any persons or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s), for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear. An act of Terrorism also includes any act that is confirmed or acknowledged by the (relevant) government as an act of terrorism.

Unforeseen Circumstances means:

- (a) the Insured's or a Relative's death;
- (b) Injury or Sickness that requires Inpatient Treatment for five (5) consecutive days or more which results in that Physician certifying in writing that the Insured or a Relative is unfit to begin or continue the Trip;
- (c) unexpected outbreak of strike or riot at the travel destination of the Trip;
- (d) natural disasters at the travel destination of the Trip; or
- (e) the Insured's residential home in Vietnam being in a fire (i) causing seriously damage to people (causing death; or causing injure or damage to the Insured's/Relatives' health with bodily disablement of 61% or more) or (ii) causing damage to assets of one hundred

million (100,000,000) Dong or more; provided that this fire is confirmed by the competent authorities.

Home Country

The country of which the Insured holds nationality. If the Insured holds more than one nationality, Home Country is the one the Insured declared in the Application Form.

Usual Country of Residence

The country in which the Insured resides regularly at the start of the Insurance Period. Foreigners residing in Vietnam on tourist visas shall not be considered as having Vietnam as their Usual Country of Residence.

Overseas

Means any place or country other than Vietnam.

Travel Regions

The covered travel area is subject to the coverage area as listed in the Policy Schedule/ Certificate of Insurance and for which the appropriate area premium has been paid.

Southeast Asia/ASEAN

Countries/territories of Brunei, Cambodia, East Timor, Indonesia, Laos, Malaysia, Myanmar, the Philippines, Singapore and Thailand.

Asia Pacific

Southeast Asia/ASEAN, countries/territories such as China, Hong Kong, Taiwan, South Korea, Japan, India, Sri Lanka, Pakistan, Australia and New Zealand.

Worldwide

Any locations/destinations in the world outside of Vietnam (except for countries/territories that are sanctioned under the sanction limitation exclusion clause).

Medical Assistance Provider

An emergency medical assistance organization or any similar provider as notified by the Company to the Policyholder from time to time.

2. Insurance Policy

The Insurance Policy is an agreement between the Policyholder/Insured and the Company, whereby the Policyholder must pay the premium, and the Company must pay claims as agreed in the Insurance Policy.

The Insurance Policy includes this Insurance Policy Wording, the Certificate of Insurance, the Benefit Plans, the Policy Schedule, and any endorsements which collectively form the entire agreement ("Insurance Policy") between the Company, the Policyholder and the Insured. These documents shall be applied in the following order of priority:

- (a) the Application Form / Quotation / Renewal Notice / Renewal Quotation;
- (b) the Endorsements;

- (c) the Certificate of Insurance and/or the Policy Schedule;
- (d) the Benefit Plans (as specified in Part XV of this Policy Wording);
- (e) this Insurance Policy Wording;
- (f) Summary of policy wording, terms and conditions of **TravelCare** insurance product (as specified in Part XIV of this Policy Wording).

3. Prevailing Language

This Insurance Policy is drafted and issued in Vietnamese and may be translated into other foreign languages for reference purposes. In the event of any discrepancy between the Vietnamese version and the foreign language version, the Vietnamese version shall prevail.

4. Governing Law

The parties hereto agree that the law of the Socialist Republic of Vietnam shall govern and control in the event of any conflict or dispute between the parties with regard to the Insurance Policy.

Any dispute or conflict arising under or in connection with this Insurance Policy shall first be resolved by the parties through negotiation and amicable conciliation. If no amicable settlement is reached within thirty (30) days from the date one party notifies the other of such dispute, the parties agree to submit the dispute to the exclusive venue and jurisdiction of the competent courts of the Socialist Republic of Vietnam for resolution.

5. Sanction Limitation Exclusion

The Company shall not provide cover and shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the Company to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United State of America.

6. Interest

The benefit amounts payable are non-interest bearing.

7. Co-ordination of Benefits/Overlapping insurance/ Other insurance

All Insureds who are covered under any other medical or accident insurance policies must notify the Company of such participation and provide the Company with a copy of the relevant insurance policy and a summary of benefits under such insurance policies.

In the event that medical expenses related to the same Injury or Sickness/Disease covered under this Insurance Policy are also claimable under other types of insurance or insurance policies, the Company shall only be liable for the amount exceeding the compensation received from such other insurance or in proportion to the insured amount of this Insurance Policy compared to the total limits of liability under all insurance policies. Accordingly, if the Company pays the Insured or the Beneficiary an amount greater than the actual liability, the Insured/Beneficiary shall be obliged to reimburse the excess amount to the Company.

In the event that an Injury to the Insured arises from the act or negligence of a third party, the Policyholder and/or the Insured shall use their best efforts to claim full compensation for the

loss from such third party. The Policyholder and/or the Insured must promptly notify the Company in any case where a claim against a third party is possible.

This principle does not apply to Article 1, Part III – Scope of Insurance, under which benefits are paid in addition to any benefit by other insurance companies to which the Insured is entitled.

PART II – THE INSURED OBJECT, THE POLICYHOLDER, THE INSURED

1. The Insured Object is the health, assets, damages of the Insured, civil liability of the Insured to the third party and other insured objects (if any) within the scope of insurance of the Insurance Policy.
2. The Policyholder (i) is an organization legally established and licensed to operate in Vietnam, or an individual residing in Vietnam aged 18 and above with full civil capacity at the time of concluding the Insurance Policy; (ii) meets the conditions to purchase the insurance under the Insurance Policy; and (iii) must have an insurable interest with respect to the Insured as prescribed by law. The Policyholder should provide proofs to prove the insurable interest once requested by the Company (The conditions precedent)
3. The Insured is the person whose health, assets, damages, civil liability to the third party and other insured objects (if any) is covered under the Insurance Policy; a Vietnamese citizen or foreigner residing in Vietnam, aged within the Age Limit. The Company will only accept coverage for a Minor Child if the Policyholder has the insurable interest in the Minor Child, including being a father/mother, adoptive father/mother, legal guardian or other people having insurable interests (The conditions precedent).

During the period when the Insured is a foreign national residing in Vietnam, the Insured is required to continuously maintain a valid and legal visa and/or temporary residence card in accordance with the law. The Company reserves all rights to withhold/defer the processing of the Insured's claim until the Insured provides the Company with a valid and legal visa and/or temporary residence card, or to reject the claim and/or terminate the Insurance Policy with respect to that Insured from the expiration date of the most recent visa and/or temporary residence card, as the case may be, if the Insured fails to provide any valid and legal updated visa and/or temporary residence card. The Company will not refund the premium if it unilaterally terminates the Insurance Policy for that Insured and has already paid any claim for that Insured.

4. Citizens of countries subject to sanctions by the United Nations, the United States of America, the European Union and the United Kingdom shall not be eligible to be the Policyholder/ the Insured under this Insurance Policy (the conditions precedent).

PART III - SCOPE OF INSURANCE

Subject to the terms and conditions of this Insurance Policy Wording, and the applicable limits of liability, the Company will pay the Insured for the Reasonable and Customary expenses incurred to the Insured relating to Personal Accident and Medical Expenses for the treatment

of the Insured's bodily injury, Sickness or Disease, during the Insurance Period for all benefits listed in the Benefit Plans, provided always that such expenses are actual and limited to Reasonable and Customary charges in the country/ area where the treatment is provided.

In the case of losses related to Personal Liability, Inconveniences, Losses and other extension benefits, the Insurer will pay the Insured the expense(s) incurred during the Trip up to the maximum amount for these benefits as specified in the Benefit Plans.

Article 1 – Personal Accident

1.1 - When the Company will pay

Subject to the provisions of Term 1.2 and the limits in Term 1.3 of this Article 1, the Company will indemnify the Personal Accident benefit if the Insured has suffered Injury or death primarily and directly resulting from an Accident occurring in the Trip during the Insurance Period. The Insured can also claim if the Insured sustains an Accidental Injury which results in death or Permanent Disability within one hundred and eighty (180) days from the date of the Accident.

If the Insured sustains an Accident and the Insured's body has not been found within one (1) year from the date of the Insured's disappearance, sinking or from the date of wrecking or disappearance of the aircraft or other conveyance in which the Insured was travelling during the Trip and it is reasonable to believe that the Insured has died as a result of the Accident, the death benefit shall become payable subject to an undertaking signed by a legal successor that if this belief is subsequently found to be wrong, such legal successor shall refund the amount paid to the Company.

1.2 - What the Company will pay

The amount of Personal Accident benefit will be paid depends on the Injury the Insured has sustained. The amount the Company pays for each contingency is listed below and expressed as a percentage of the maximum amount the Insured can receive under Term 1.3 below.

The maximum Injury compensation rate shall be paid in accordance with the benefit table below ("Rating Table"):

1.	Accidental Death.....	100%
2.	Permanent Total Disablement due to Accident.....	100%
3.	Permanent Disablement due to Accident resulting in:	
	Loss of one or more Limbs.....	100%
	Total paralysis	100%
	Total Loss of Sight of one eye or both eyes	100%
	Total Loss of Speech and Hearing	100%
	Loss of Hearing in both ears	75%
	Loss of Hearing in one ear	15%
	Loss of Speech	50%

For the purposes of this Article:

“Loss” means the complete severance or permanent functional disablement of any body parts.

“Loss of Sight” means total and irrecoverable loss of sight of an eye rendering the Insured absolutely blind in that eye beyond remedy by surgical or other treatment.

“Loss of Limb” means physical severance of a hand at or above the wrist or of a foot above the ankle joint, or the total and permanent functional disablement of an entire hand, arm, foot or leg.

“Permanent Disablement” means Injury which:

- (a) falls into one of the categories in item 3 above; or
- (b) causes a malfunction that has lasted for a continuous period of twenty-four (24) calendar months from the date of the Accident, is at the expiry of that period, beyond hope of improvement.

“Permanent Total Disablement” means Injury which, having lasted for a continuous period of twenty-four (24) consecutive calendar months from the date of the Accident, entirely prevents the Insured from engaging in gainful employment of any and every kind and from which there is no hope of improvement.

“Loss of Speech” means disability in articulating any three of the four sounds which contribute to the speech such as the Labial sounds, the alveololabial sounds, the palatal sounds and the velar sounds or total loss of vocal cord or damage of speech centre in the brain resulting in aphasia.

“Loss of Hearing” means permanent irrecoverable loss of hearing where:

If a dB = Hearing loss at 500 Hertz

If b dB = Hearing loss at 1000 Hertz

If c dB = Hearing loss at 2000 Hertz

If d dB = Hearing loss at 4000 Hertz

$1/6$ of $(a+2b+2c+d)$ is above 80dB

If the Insured suffers more than one of the above permanent disablement, the percentage for each disablement will be added up to calculate the benefit amount the Insured can receive. However, the total amount the Company will pay is limited to 100% of the maximum amount payable under this Part. Where the Injury is not specified in the above Rating Table, the Company will adopt a percentage of disablement payable which in the Company's opinion is not inconsistent with the above contingencies.

1.3 - Limits on what the Company will pay

The maximum amount that the Company will pay for the insurance benefits under Article 1 for each Trip is specified in the Benefit Plans.

Article 2 – Medical Expenses

2.1 - Overseas Medical Expenses

2.1.1 When the Company will pay

Subject to the provisions of Point 2.1.2, the exclusions specified in Point 2.1.3 and the limits specified in Point 2.1.4, the Company will pay the Insured for Overseas medical expenses which are necessary in respect of medication and payable because the Insured sustains an Accidental Injury or suffers a Sickness while on an insured Trip.

2.1.2 What the Company will pay

The medical expenses specified in Point 2.1.1 that the Company will pay for:

- (a) medical, surgical, diagnosis tests, hospital or nursing treatment given or prescribed by a Physician or a Chinese Herbalist in his/her professional capacity;
- (b) ambulance related costs; and
- (c) dental fees directly incurred as a result of Accidental Injury to the Insured's sound natural teeth.

2.1.3 Exclusions

The medical expenses specified in Point 2.1.1 will not include:

- (a) cosmetic dental restoration, bridge, crown, implanting dentures, dentures, tooth capping, dental implant; and
- (b) expenses recoverable from any medical fund or Medical Facility;
- (c) any medical expenses arising 30 days after the termination of this Insurance Policy in the event the Insured is unable to return to the country of origin or final destination if different from the point of origin;
- (d) medical expenses which are payable by any other insurance or for which a third party is liable;
- (e) all the expenses for treatment or services undertaken without the specifications of a Physician; routine physical examination or health check-up not incidental to the treatment or diagnosis of a covered disability; physiotherapy, chiropractor and acupuncture; home nursing;
- (f) expenses excluded under General Exclusions.

2.1.4 Limits on what the Company will pay

The maximum amount the Company will pay for the insurance benefits under Term 2.1 – Overseas Medical Expenses for each Trip shall not exceed the maximum amount for these benefits as specified in the Benefit Plans.

In addition to the above limits, the maximum amount that the Company will pay for Chinese Herbalist in relation to these benefits is VND7 million for each Trip, and for each treatment is VND900,000 at maximum.

2.2 – Medical Expenses Incurred Upon Return To Vietnam

2.2.1 When the Company will pay

Subject to the limits under Point 2.2.2, the Company will pay the Insured for medical expenses necessarily incurred due to an Accidental Injury or Sickness indemnifiable under Term 2.1 – Overseas Medical Expenses of this Insurance Policy, and the medical expenses are incurred in Vietnam when the Insured returns to Vietnam, provided that: the medical expenses incurred in Vietnam is to follow-up treatment following the indications of the attending Physician Overseas within thirty-one (31) days from the date of the Insured's return to Vietnam following discharge from an Overseas Medical Facility where the Insured was hospitalized due to an Accidental Injury or Sickness indemnifiable under Term 2.1 – Overseas Medical Expenses of this Insurance Policy, provided that the treatments in Vietnam has been indicated by the attending Physician Overseas.

2.2.2 Limits on what the Company will pay

The maximum amount the Company will pay for the insurance benefits specified in this Term 2.2 for each Trip shall not exceed the maximum amount for these benefits as specified in the Benefit Plans.

In addition to the above limits, the maximum amount that the Company will pay for Chinese Herbalist in relation to these benefits is VND7 million for each Trip, and for each treatment is VND900,000 at maximum.

2.3 – Overseas Hospital Visits

2.3.1 What the Company will pay

Subject to the limits under Point 2.3.2, if the Insured is hospitalised Overseas other than the Insured's Home Country and/or Usual Country of Residence as a result of an Accidental Injury or Sickness indemnifiable under Term 2.1 – Overseas Medical Expenses of this Insurance Policy Wording, within more than five (5) days while on a Trip during the Insurance Period, the Company will pay for the cost of transportation for one of the Insured's Relatives or friends to visit the Insured PROVIDED THAT as judged by the Company and/or an independent specialist Physician, the visit is necessary on the basis of the Insured's health and the request of the visit. These benefits will be only paid upon the Company's prior approval.

2.3.2 Limits on what the Company pay

The maximum amount the Company will pay is the equivalent cost of one economy class return fare, up to and not exceeding the maximum amount for these benefits as specified in the Benefit Plans.

2.4 – Additional Accommodation Expenses

2.4.1 What the Company will pay

Subject to the limits specified in Point 2.4.2, if the Company agrees to pay for the benefits specified in Term 2.3 – Overseas Hospital Visits above, the Company will arrange and pay for the accommodation expenses incurred by one Relative or friend who is visiting the Insured whilst the Insured is hospitalised Overseas as provided for in Term 2.3 – Overseas Hospital Visits.

2.4.2 Limits on what the Company pay

The Company will pay the amount specified in the Benefit Plans for each twenty-four (24) hour period of hotel accommodation stay.

2.5 – Overseas Compassionate Visit

2.5.1 What the Company will pay

Subject to the limits under Point 2.5.2, in the event of the Insured's death as a result of an Accident or Sickness indemnifiable under Article 1 – Personal Accident or Term 2.1 – Overseas Medical Expenses of this Insurance Policy, the Company will pay for the cost of transportation for one Relative or friend of the Insured who assists the Insured in the arrangement for the mortal remains and/or Overseas funeral rituals.

2.5.2 Limits on what the Company pay

The maximum amount the Company will pay is the equivalent cost of one economy class return fare, up to and not exceeding the maximum amount for the benefits specified in the Benefit Plans.

2.6 – Return of Minor Child(ren) to the Home Country/ Usual Country of Residence

2.6.1 What the Company will pay

Subject to the limits in Point 2.6.2, If the Insured's Minor Child(ren) is left unattended as a result of the Insured Overseas Accidental Injury or Sickness indemnifiable under Term 2.1 – Overseas Medical Expenses of this Insurance Policy Wording whilst the Insured and the Insured's Minor Child(ren) are on a Trip Overseas during the Insurance Period or whilst the Insured are being medically evacuated for the treatment resulting from the Insured's Overseas Injury, Accident or Sickness indemnifiable under Term 2.1 – Overseas Medical Expenses of this Insurance Policy Wording, the Company will arrange and pay for the cost of returning the insured's Minor Child(ren) to his or her Home Country or Usual Country of Residence. An escort will be provided by the Company subject to the approval of the Insured and/or the Minor Child(ren)'s legal guardian, when required, on the basis of the Insured's health and the need and benefits of the Insured's Minor Child(ren).

The benefits will be only paid after the Company judges the return of the Insured's Minor Child(ren) to his or her Home Country or Usual Country of Residence is necessary. The benefits will be paid upon the Company's prior approval.

2.6.2 Limits on what the Company will pay

The maximum amount the Company will pay is the equivalent cost of one economy class one way airfare, up to and not exceeding the maximum amount for the benefits specified in the Benefit Plans.

2.7 – Overseas Hospital Daily Benefit

2.7.1 What the Company will pay

Subject to the limits in Point 2.7.2, the Company will pay the Insured a daily benefit amount for each and every twenty-four (24) hour period of hospital confinement if:

- (a) the Insured is Confined in a Medical Facility Overseas as a result of Accidental Injury or Sickness sustained indemnifiable under Term 2.1 – Overseas Medical Expenses of this Insurance Policy Overseas; and
- (b) the Insured's confinement is considered necessary by a Physician in his/her professional capacity; and
- (c) The Insured is an in-patient at a Medical Facility Overseas for a continuous uninterrupted period of at least twenty-four (24) hours.

2.7.2 Limits on what the Company will pay

The Company will pay the amount specified in the Benefit Plans for each twenty-four (24) hour period of hospital confinement. The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

2.8 - Hospital Daily Income Benefit in Vietnam

2.8.1 Benefits the Company will pay

Subject to the limits in Point 2.8.2, the Company will pay the Insured a daily benefit amount for each and every twenty-four (24) hour period of hospital confinement if:

- (a) the Insured is hospitalised in a Medical Facility in Vietnam where indemnifiable as provided for in Term 2.2 - Medical Expenses Incurred Upon Return To Vietnam of this Insurance Policy Wording; and
- (b) the Insured's confinement is considered necessary by a Physician in his/her professional capacity; and
- (c) the Insured is an in-patient at a Medical Facility in Vietnam for a period of consecutive five (5) days or more.

2.8.2 Limits on what the Company will pay

The Company will pay the amount specified in the Benefit Plans for each twenty-four (24) hour period of hospital confinement. The maximum amount the Company will pay will not exceed

the maximum amount for this benefit as specified in the Benefit Plans.

2.9 – Medical Expenses for Pregnancy Related Sickness

2.9.1 When the Company will pay

Subject to the exclusions in Point 2.9.2 and the limits in Point 2.9.3, the Company will pay for the medical expenses necessarily and unavoidably incurred while on a Trip Overseas during the Insurance Period for pregnancy related Sickness.

2.9.2 Exclusions

The medical expenses specified in Point 2.9.1 will not comprise:

- (a) expenses of treatment for the pregnancy related sickness occurring within the 1st trimester of pregnancy (i.e. from 0 to 12 weeks);
- (b) all expenses incurred related to all forms of delivery;
- (c) expenses of treatment for the pregnancy related sickness being only discovered upon return to Vietnam;
- (d) any expenses resulting from the pregnancy related sickness if the Insured has not arrived to Vietnam or returned to Vietnam within the period provided for in the Insurance Policy; and
- (e) any expenses resulting from the pregnancy related sickness if the Overseas Trip or the activities carried out during the Overseas Trip are undertaken against medical advices of the Insured's Physician in Vietnam.

2.9.3 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

2.10 – 24-hour Medical Assistance

Whilst on a Trip Overseas during the Insurance Period, the Insured may contact the Company Medical Assistance Provider for the following:

- (a) medical advice;
- (b) referral to medical or dental facilities worldwide;
- (c) arrangement of appointment with a Physician;
- (d) arrangement for Hospital admission; and
- (e) monitoring of the Insured's medical condition during Hospitalization.

Please note that the services provided by the Company's Medical Assistance Provider under this Article are strictly on a referral or arrangement basis. The Company and/or the Company's Medical Assistance Provider will not be held responsible for any third party expense and any consequential loss suffered by the Insured.

2.11 – Emergency Telephone Expenses

2.11.1 What service is provided

Subject to the limits in Point 2.11.2, if the Insured calls the Company's Medical Assistance Provider as a result of a medical emergency while on a Trip Overseas during the Insurance Period, the Company will pay for the personal mobile expenses incurred under the Insured's Vietnam registered personal mobile phone.

However, this benefit is payable only if the telephone calls are related to the benefits paid under Term 2.1 – Overseas Medical Expenses, Term 2.9 - Medical Expenses for Pregnancy Related Sickness or Term 3.1 – Emergency Medical Evacuation. And the Company will not pay for telephone calls not made via the Insured's Vietnam registered personal mobile phone.

2.11.2 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

Article 3 - Medical Evacuation

3.1 – Emergency Medical Evacuation

3.1.1 Benefits the Company will provide

Subject to the limits in Point 3.1.2, if the Insured sustains an Injury or a Sickness occurring while the Insured is on a Trip Overseas other than the Insured's Home Country and/or Usual Country of Residence during the Insurance Period, the Insured can contact the Company's Medical Assistance Provider to be provided the following assistance and services:

(A) Emergency Medical Evacuation

In the event that the Injury or Sickness causes a Serious Medical Condition to the Insured, the Company will arrange and pay for the medically necessary expense of air and/or surface transportation, medical care during transportation, communications and all usual ancillary charges incurred in moving the Insured to the nearest Medical Facility where appropriate medical care is available.

“**Serious Medical Condition**” means a condition which, in the Company's opinion based on information provided by the Medical Facility/attending Physician, constitutes a serious medical emergency requiring urgent remedial treatment to avoid death or serious impairment to the Insured immediate or long-term health prospects. The seriousness of the medical condition will be judged within the context of the Insured's geographical location, the nature of the available medical emergency and the appropriate medical care or facility.

(B) Repatriation

The Company will arrange and pay for the medically necessary expenses unavoidably incurred in returning the Insured to Vietnam following an emergency medical evacuation under Item (A) above.

Please note that in relation to Items A and B above, the Company reserves the right to decide, based on all the events and circumstances the Company knows at the relevant time:

- (a) whether the Insured's Injury or Sickness is sufficiently serious to warrant emergency medical evacuation; and
- (b) the place to which the Insured will be evacuated; and
- (c) the means or method of such evacuation and/or repatriation.

3.1.2 Benefit Limits

- (a) The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.
- (b) This benefit is not available to the Insureds aged 70 or above.

3.2 – Repatriation of Mortal Remains

3.2.1 Benefits the Company will pay

Subject to the limits in Point 3.2.2, in the event of the Insured's death while Overseas within thirty (30) days of an Accidental Injury or Sickness indemnifiable under Article 1 – Personal Accident or Term 2.1 – Overseas Medical Expenses of this Insurance Policy, the Insured's Relatives can contact the Company's Medical Assistance Provider for the arrangement and payment of all Reasonable and Customary and unavoidable expenses for either:

- (a) transporting the Insured's mortal remains from the place of death to the Insured's Home Country or Usual Country of Residence; or
- (b) the cost of a local burial at the place of death as approved by the Company in advance.

3.2.2 Benefit Limits

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

Article 4 – Extensions

4.1 – Automatic Extension

If the Insured is unable to return to Vietnam while on a Trip Overseas within the Insurance Period, because:

- (a) a Physician advises the Insured in writing to suspend the Insured's Trip due to an Accident or the Insured's medical condition; or

- (b) the transport on which the Insured is booked to travel to Vietnam is delayed as a result of circumstances outside the Insured's control which do not arise from the faults of the Insured and only including the delay due to the cause of strike, adverse weather conditions, equipment breakdowns, and structural errors of the transport vehicles or operational faults by the carriers.

The Company will extend the Insurance Period of the Insured's Trip for a period of seven (7) days that is reasonably necessary to allow the Insured to complete the Insured's Trip. No additional premium will be charged for this extension.

However, in all cases, the maximum length of Trip including the automatic extensions will not exceed 186 consecutive days for the Single Trip Insurance Policy and 90 consecutive days to the Annual Insurance Policy.

4.2 – Hijack Benefit

4.2.1 Benefits the Company will pay

If:

- (a) the aircraft the Insured is travelling on while on a Trip during the Insurance Period is Hijacked;
- and
- (b) the Hijack continues uninterrupted for at least twelve (12) hours.

Subject to the limits specified in Point 4.2.2, the Company will pay the Insured an allowance specified in the Benefit Plans for each twelve (12) hour period of Hijack.

For the purposes of this Term, "Hijack" means any aircraft seizure, or exercise of control by force or violence by threat of force and with wrongful intent. The Insured can only make a claim if the Insured gives the Company written proof of the Hijack from the transport provider stating the number of hours of the Hijack.

4.2.2 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

4.3 – Disruption/Withdrawal of Hotel Services

4.3.1 When the Company will pay

Subject to the limits specified in Point 4.3.2, the Company will pay the Insured a daily benefit amount for inconveniences resulting from disruption and withdrawal of services at the hotel in which the Insured is staying as a result of strike or riot while the Insured is on a Trip during the Insurance Period.

4.3.2 Limits on what the Company will pay

The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

Article 5 – Legal Liability

5.1 – Personal Liability

5.1.1 Benefits the Company will pay

Subject to the exclusions in Point 5.1.2 and the limits in Point 5.1.3, the Company will indemnify the Insured for the Insured's legal liability during the Insured's Trip Overseas for:

- (a) the death of or injury to someone else; or
- (b) loss of or damage to property owned or controlled by a third party.

PROVIDED THAT:

- (i) Such legal liability arising from an effective judgment of a competent court that requires the Insured to pay for the claim; or
- (ii) Given the sufficient and valid documents, the Company accepts that the Insured must have been liable for and the indemnification has actually occurred.

5.1.2 Exclusions

The legal liabilities indemnifiable under Point 5.1.1 will not include any legal liability arising from:

- (a) the death of or Injury to the Insured, a spouse, children (including foster children and biological children), foster children of a spouse, parents (including foster parents), father-in-law, mother-in-law, siblings, paternal and maternal grandparents, or relatives, the Insured's companion during the Trip or any of the Insured's employees;
- (b) loss or damage caused to any properties or animals possessed, managed, cared or controlled by the Insured, a spouse, children (including foster children and biological children), foster children of a spouse, parents (including foster parents), father-in-law, mother-in-law, siblings, paternal and maternal grandparents, or relatives, the Insured's companion during the Trip or any of the Insured's employees;
- (c) the Insured's business, profession or occupation;
- (d) failure to perform the Insured's duty or violation of any contract binding the Insured;
- (e) the Insured's voluntarily accept liability without the Company's prior approval;
- (f) unlawful, malicious, deliberate or intentional acts;
- (g) a court judgment, if that judgment is not recognized and enforced in Vietnam in accordance with the procedures and regulations of Vietnamese law;
- (h) legal costs resulting from any criminal proceedings;

- (i) any fines, penalties, punitive or exemplary damages;
- (j) the use of motor vehicles, watercraft, hovercraft, aircraft or aircraft landing areas, aerial devices, firearms or animals;
- (k) the vibration, removal or weakening of the support of any land or building;
- (l) the transmission of any disease;
- (m) liability provided for in the Vietnam labour regulations;
- (n) the Insured engaging in races; or
- (o) penalty for breach of contracts, compensation for damages caused provided for in the contracts.

5.1.3 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

Article 6 – Inconveniences

6.1 - Trip Cancellation/Postponement

6.1.1 Benefits the Company will pay

Subject to the payments in Point 6.1.2, the exclusions in Point 6.1.3 and the limits in Point 6.1.4, the Insured can claim for Trip cancellation/postponement and accommodation expenses or the Insured's Trip cancellation/postponement fee if within thirty (30) days before the Start Time of the Trip:

- (a) the Trip or accommodation is cancelled/postponed due to any Unforeseen Circumstances which are beyond the Insured's control; and
- (b) these Unforeseen Circumstances affect the Insured or a Relative companioning the Insured during the Trip; and
- (c) the Insured is legally liable for the expenses the Insured is claiming for; and
- (d) the Insured has already paid for these expenses; and
- (e) the Insured has taken all necessary steps to recover the expenses from the third parties; and
- (f) the Insured cannot recover these expenses from anyone else or any other party.

The Insured can also claim for Trip cancellation/postponement and accommodation expenses or the Insured's Trip cancellation/postponement fee if within seven (7) days before the Start Time of the Trip:

- (a) the Trip or accommodation is cancelled/postponed due to an outbreak of Infectious Disease at the Trip destination as declared and classified by the World Health Organisation (WHO); and
- (b) the outbreak of Infectious Disease affects the Insured or a Relative; and
- (c) the Insured is legally liable for the expenses the Insured is claiming for; and
- (d) the Insured has already paid for these expenses; and
- (e) the Insured has taken all necessary steps to recover the expenses from the third

- parties; and
- (f) the Insured cannot recover these expenses from anyone else or any other party.

6.1.2 What the Company will pay

The Company will pay for:

- (a) the non-refundable portion of Trip costs paid in advance for the Trip cancellation/postponement; or
- (b) the administrative charges charged for the Trip cancellation/postponement.

6.1.3 Exclusions

The Company will not be liable for paying any benefits under Term 6.1 if the Trip is cancelled/postponed because:

- (a) the Insured changes the Insured's mind about going on the Trip; or
- (b) the travel agent is negligent or at fault; or
- (c) there were not enough people to go on the group Trip; or
- (d) any immigration or government regulations; or
- (e) the Insured is aware or ought to be aware of any circumstances which could lead to possible cancellation/postponement of the Trip prior to purchasing the insurance.

6.1.4 Limits on what the Company will pay

The maximum amount the Company will pay for the benefits under this Term 6.1 shall not exceed the following amounts:

- (a) The maximum amount the Company will pay under Point 6.1.1 – Trip Cancellation as a result of an outbreak of Infectious Disease is 20% of the maximum amount specified in the Benefit Plans.
- (b) The maximum amount under Term 6.1 – Trip Cancellation/Postponement up to the amount specified in the Benefit Plans.
- (c) The maximum amount the Company will pay under Term 6.1 – Trip Cancellation/Postponement is payable up to maximum of VND5,000,000 (Classic plan), VND6,000,000 (Executive Plan) and VND10,000,000 (Premier plan).

6.2 - Trip Curtailment

6.2.1 Benefits the Company will pay

Subject to the payments in Point 6.2.2, the exclusions in Point 6.2.3 and the limits in Point 6.2.4, the Insured can claim if the Insured has to cut short the Trip Overseas after the Trip has started and return to Vietnam from Overseas during the Insurance Period because:

- (a) The Insured is unable to complete the Insured's intended Trip while the Insured's ticket or tour is still valid because the Insured or a Relative accompanying the Insured suffers

- an Injury or Sickness and a Physician has certified in writing that the Insured or the Relative is unfit to continue the Trip; or
- (b) The Insured has to return to the Insured's home in Vietnam because of the unexpected death, sudden serious Injury or Sickness of a Relative accompanying the Insured; or
 - (c) of natural disaster at the Trip destination; or
 - (d) of an unexpected outbreak of strike or riot at the travel destination the Insured is visiting;
 - (e) of an outbreak of Infectious Disease at the travel destination the Insured is visiting; or
 - (f) of a quarantine order upon medical advice.

6.2.2 What the Company will pay

The Company will pay for the pro-rata expenses the Insured paid for days of the planned Trip but not used due to Trip Curtailment.

6.2.3 Exclusions

The Company will not be liable to pay the insurance benefits under Term 6.2 if the Trip is curtailed because:

- (a) The Insured changes the Insured's mind about continuing the Trip; or
- (b) Of the negligence or fault of the travel agent; or
- (c) The Insured is aware or ought to be aware of any circumstances which could lead to possible curtailment of the Trip prior to embarking on the Trip or purchasing the insurance.

6.2.4 Limits on what the Company will pay

- (a) The maximum amount the Company will pay under Point 6.2.1 (e) – Trip Curtailment as a result of an outbreak of Infectious Disease is 20% of the maximum amount specified in the Benefit Plans.
- (b) The maximum amount under Point 6.2.1 (except for Point 6.2.1 (e)) – Trip Curtailment as a result of other causes specified in Article 6.2.4 is the maximum amount specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.2 and 6.3 in respect of the same event.

6.3 - Trip Disruption

6.3.1 Benefits the Company will pay

Subject to the payment levels in Point 6.3.2 and the limits in Point 6.3.3, the Insured can claim for disruption of the Trip if the Insured or the Insured's travelling companion Relative is hospitalized in a Medical Facility Overseas for more than five (5) days.

6.3.2 What the Company will pay

The Company will pay for the pro-rata amount for the pre-paid travelling expenses, hotels or

penalties after the Insured started the Trip but had not used for the days of the planned Trip disrupted.

6.3.3 Limits on what the Company will pay

The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.2 and 6.3 in respect of the same event.

6.4 - Flight Misconnection

6.4.1 When the Company will pay

Subject to the exclusions in Point 6.4.2 and the limits in Point 6.4.3, the Company will pay the Insured if:

- (a) The Insured misses the Insured's confirmed and connecting onward initially scheduled conveyance at the transfer point as a result of late arrival of the Insured's confirmed and incoming initially scheduled conveyance; and
- (b) there is no alternative onward conveyance available to the Insured within six (6) consecutive hours upon the Insured's arrival.

The Insured can only claim if:

- (a) The Insured gives the Company written proof of the late arrival of the Insured's conveyance provided by the transport provider stating the hours of late arrival.

6.4.2 Exclusions

The Company will not be liable to pay the insurance benefits under Term 6.4 if the flight is misconnected because:

- (a) the Insured fails to check in on time according to the Insured's itinerary; or
- (b) the negligence or fault of the travel agent.

6.4.3 Limits on what the Company will pay

The Company will pay an amount equivalent to the maximum amount for this benefit as specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.4 and 6.5 in respect of the same event.

6.5 - Travel Delay

6.5.1 When the Company will pay

Subject to the payments in Point 6.5.2, the exclusions in Point 6.5.3 and the limits in Point 6.5.4, the Company will pay the Insured if:

- (a) the Insured's scheduled transport departure is delayed or cancelled without alternative conveyance for six (6) hours or more while the Insured is Overseas from the departure dates and times listed in the scheduled transport departure until the departure dates and times in reality; and
- (b) the cause of the delay is due to natural disaster at the Trip destination, mechanical breakdown or derangement or structural defect of the conveyance the Insured has arranged to travel on, or strike or other job action by the employees of the transport provider.

The Insured can only claim for Travel Delay if:

- (a) The Insured gives the Company written proof of the delay of the Insured's scheduled transport departure from the transport provider stating the hours of delay and the reasons for such delay.

6.5.2 What the Company will pay

The Company will pay the amount as specified in the Benefit Plans for each six (6) hours of delay during the Insurance Period.

6.5.3 Exclusions

The Company will not be liable to pay the insurance benefits under this Term 6.5 if:

- (a) The cause of delays is:
 - (i) The Insured's failure to check in on time according to the Insured's itinerary; or
 - (ii) the negligence or fault of the travel agent; or
 - (iii) the change of the scheduled itinerary by the airlines upon the request of the Insured due to personal reasons.
- (b) the Insured was aware of or reasonably should have been aware of any circumstances leading to Travel Delay prior the Start Time of the Trip.

6.5.4 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.4 and 6.5 in respect of the same event.

6.6 - Travel Overbooking

6.6.1 When the Company will pay

Subject to the payments in Point 6.6.2, the exclusions in Point 6.6.3 and the limits in Point 6.6.4, the Company will pay the Insured for accommodation, meals and travel expenses while the Insured is Overseas if:

- (a) The Insured cannot board the Insured's intended scheduled flight due to overbooking; and
- (b) The Insured has confirmed air tickets.

The Insured can only claim for these expenses if:

- (a) they are not recoverable from the transport provider or travel agent; and
- (b) they are necessarily incurred while on a Trip during the Insurance Period; and
- (c) the Insured provides the Company with written proof from the transport provider on overbooking; and
- (d) the Insured provides the Company with original receipts of the expenses.

6.6.2 What the Company will pay

The Company will reimburse the Insured for the reasonable accommodation, meals and travel expenses.

6.6.3 Exclusions

The Company will not pay the insurance benefits under this Term 6.6 if the flight overbooking is due to the negligence or fault of the travel agent.

6.6.4 Limits on what the Company will pay

The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

6.7- Emergency Purchases

6.7.1 When the Company will pay

Subject to the payments in Point 6.7.2 and the limits in Point 6.7.3, the Company will pay for the emergency purchase of essential personal items needed if while on a Trip Overseas during the Insurance Period:

- (a) the Insured's baggage is stolen or it has been declared by the transport provider that the Insured's baggage is lost; and
- (b) the Insured cannot recover the expenses incurred from anyone else or any other party.

The Insured can only make a claim if:

- (a) the Insured provides the Company with written proof of the loss from the police or local government authority or the transport provider that the Insured's baggage is lost while in transit; and
- (b) the Insured gives the Company official receipts for the purchases the Insured has made.

6.7.2 What the Company will pay

The Company will only pay for the necessary and reasonable purchases.

6.7.3 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.7 and 6.8 in respect of the same event.

6.8 - Baggage Delay

6.8.1 When the Company will pay

Subject to the payments in Point 6.8.2, the exclusions in Point 6.8.3 and the limits in Point 6.8.4, the Company will pay according to the limits as defined in the Benefit Plans for each six (6) consecutive hours as specified in the Benefit Plans/Certificate of Insurance if the Insured's checked-in baggage of the Insured has been delayed, misdirected or temporarily misplaced by the transport provider while the Insured is on a Trip during the Insurance Period, PROVIDED THAT (i) the baggage(s) is checked-in along with the Insured at the same time of boarding procedures to the scheduled destination Overseas; and (ii) the Insured's baggage is delayed while Overseas and the Insured's baggage is not returned to the Insured within six (6) consecutive hours upon the Insured's arrival at the airport, seaport, transport terminal of the scheduled destination Overseas of the Trip.

In all circumstances, the maximum numbers of consecutive hours to calculate the amount the Company pays for the Insured shall not be calculated beyond the Expiry Time of the Trip.

However, the Insured can only make a claim if the Insured gives the Company written proof of the delay (due to the temporary loss or other causes) of the Insured's baggage from the transport provider stating the hours of delay.

6.8.2 What the Company will pay

If the Insured's baggage is delayed at the Insured's scheduled destination Overseas, the Company will pay the Insured up to the amount specified in the Benefit Plans for each six (6) hours of delay during the Insurance Period.

6.8.3 Exclusions

The Company will not be liable to pay the insurance benefits under Term 6.8 if the cause of delay is due to a result of detention or confiscation by customs or other governmental agencies.

6.8.4 Limits on what the Company will pay

The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.7 and 6.8 in respect of the same event.

The Insured cannot claim under both Terms 6.8 and 7.3 in respect of the same event.

6.9 - 24-hour Travel Assistance

Whilst on a Trip Overseas during the Insurance Period, the Insured may contact the Company's Medical Assistant Provider for the following:

- (a) inoculation and visa requirement information;
- (b) embassy referral;
- (c) weather information assistance;
- (d) exchange rate information assistance;
- (e) lost luggage assistance;
- (f) lost passport assistance; and
- (g) emergency message transmission.

Please note that the services provided by the Medical Assistant Provider under this Term are strictly on a referral or arrangement basis. The Company will not be held responsible for any third party expense and any consequential loss suffered by the Insured arising out of and in relation to the assistance services provided by the Medical Assistant Provider.

Article 7 – Losses

7.1 - Loss of Personal Money

7.1.1 When the Company will pay

Subject to the payments in Point 7.1.2, the exclusions in Point 7.1.3 and the limits in Point 7.1.4, the Company will pay for the Insured's loss of cash and travellers' cheques owned by the Insured and having been kept, watched and managed by the Insured while the Insured is on a Trip Overseas during the Insurance Period if:

- (a) they were stolen; or
- (b) they were taken from the Insured by force, by violent means, or by threat of violence;
 or
- (c) due to natural disaster at the travel destination of the Trip.

However, the Insured can only make a claim if:

- (a) The Insured makes a report to the police or local government authority within twenty four (24) hours of becoming aware of the theft or plunderage by force, by violent means, or by threat of violence and has the confirmation of the police or local government authority of such incidents; and
- (b) The Insured provides the Company with a written confirmation from the police or local government authority; and
- (c) The Insured has taken all reasonable precautions to prevent the theft or plundering; and
- (d) The Insured has taken all reasonable steps to minimize the Insured's loss due to those incidents.

7.1.2 What the Company will pay

The Company will pay for:

- (a) the Insured's loss of cash; and
- (b) the cost of replacing the Insured's travellers' cheques.

7.1.3 Exclusions

The Company will not be liable to pay the insurance benefits under this Term 7.1 for the following:

- (a) Loss or shortage due to error, omission, fluctuation of the rate of currency exchange, confiscation or devaluation;
- (b) The Insured's cash or travellers' cheques left unattended in any vehicle or public place or as a result of the Insured person's failure to take reasonable care and precautions for the safeguard and security of such property;
- (c) The Insured's cash or travellers' cheques are not carried on the Insured's person;
- (d) The dropping or losing because the Insured does not take precautions or is unaware of the specific moment of loss;
- (e) The Insured's cash or travellers' cheques are placed in luggage, suitcase, trunk and the like; and
- (f) This benefit is not applied to the Insured aged below 18.

7.1.4 Limit on what the Company will pay

The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

7.2 - Loss of Travel Documents

7.2.1 When the Company will pay

Subject to the payment levels in Point 7.2.2, the exclusions in Point 7.2.3 and the limits in Point 7.2.4, the Company will pay for the Insured's loss of personal documents (passports, visas

and/or similar legally valid documents (such as: APEC cards, ect.), valid international driving/riding licenses) while on a Trip Overseas during the Period of Insurance if:

- (a) they were stolen; or
- (b) they were taken from the Insured by force, by violent means, or by threats of violence; or
- (c) due to natural disaster at the travel destination.

However, the Insured can only make a claim if:

- (a) The Insured makes a report to the police or local government authority within twenty four (24) hours of becoming aware of the theft or plunderage by force, by violent means, or by threat of violence and has the confirmation of the police or local government authority on such incidents; and
- (b) The Insured provides the Company with a written confirmation from the police or local government authority or nearest Vietnam Embassy; and
- (c) The Insured has taken all reasonable precautions to prevent the theft or plunderage; and
- (d) The Insured has taken all reasonable steps to minimize the Insured's loss due to those incidents.

7.2.2 What the Company will pay

The Company will pay for:

- (a) the cost of replacing the Insured's travel documents lost (passports, visas, and/or similar legally valid documents (such as: APEC card, etc.), valid international driving/riding licenses), including the additional travel and hotel accommodation expenses necessarily incurred to replace lost travel documents; and
- (b) The reimbursement cost for air ticket will be limited to economy class only.

7.2.3 Exclusions

The Company will not be liable to pay the insurance benefits under this Term 7.2 if the Insured leaves the passports, visas, and/or similar legal valid documents (such as: APEC card, etc.), air tickets, valid international driving/riding licenses in the situation of being:

- (i) forgotten, unattended/unsupervised in public transportation or public places; or
- (ii) dropped, lost due to carelessness or not being aware of the specific time of losses.

7.2.4 Limits on what the Company will pay

The maximum amount the Company will pay will not exceed the maximum amount for this benefit as specified in the Benefit Plans.

7.3 - Loss of or Damage to Baggage and Personal Effects (including golfing equipment and lap-top computer)

7.3.1 When the Company will pay

Subject to the payments in Point 7.3.2, the exclusions in Point 7.3.3 and the limits in Point 7.3.4, the Company will pay the Insured if the Insured's baggage and personal effects (including golfing equipments and lap-top computers) that the Insured:

- (a) takes with the Insured during the Trip; and/or
- (b) buys on the Trip Overseas

which are damaged or stolen due to a Sudden Incident occurring while the Insured is on a Trip Overseas during the Insurance Period. For the purposes of this Term 7.3, "**Golfing Equipment**" shall include golf clubs and golf bags and "**Lap-top Computer**" shall mean the complete lap-top including accessories or attachments that come as standard equipment with the laptop.

All baggage and personal effects must be the property of the Insured, not rented, borrowed, deposited, held for others, or entrusted for use (except in the case of a laptop computer provided by the Insured's employer to the Insured for the purpose of performing work for that employer).

However, the Insured can only make a claim for the loss, damage or theft of the baggage and personal effects if:

- (a) The Insured has made a report to the police or local government authority or a responsible officer of the transport provider within twenty four (24) hours of a loss or damage becoming known to the Insured; and
- (b) The Insured provides the Company with a valid certified copy of that report; and
- (c) The Insured gives us original receipts for the Insured's lost or damaged purchases.

The claims due to the Insured's loss caused by the faults of the carriers or a third party must be filed with and compensated by the carriers or third parties first. Any amount is paid under this Insurance Policy will be deducted by the amount that the Insured has already been compensated by the carriers or third parties.

7.3.2 What the Company will pay

Repair

If the Company agrees to pay the Insured's claim under this Term, the Company will pay for the cost of repairing those items if it costs less to repair the item than to replace it.

Replacement

If the article cannot be repaired with a cost less to repair the article than to replace it, the Company may choose to either:

- (a) get the Insured a replacement item; or

- (b) pay the Insured the amount it would cost the Company to replace the item of the Insured on a depreciated basis,

Any depreciation the Company applying will be based on the age and condition of the item. The Company will not apply depreciation to items which are less than twelve (12) months old.

The insurance payment for damaged or stolen items will be based on the value of the item purchased by the Insured before the loss occurred ("Original Price") after deducting depreciation costs. Depreciation costs will be calculated by multiplying the depreciation rate by the Original Price.

The number of using years is calculated from the date the Insured purchased the items until the time of incurring loss. The depreciation rate will be calculated according to the period of use as follows:

Number of using years	Depreciation rates
Below 1 year	Not applicable
From 1 year to below 3 years	50%
From 3 years to below 5 years	75%
5 years or more	100%

Articles which form part of a set or pair

Where the article forming part of a set or pair is lost or damaged, the Company will only pay the replacement value of the article that is lost, damaged or stolen. The Company will not pay for the cost of replacing the entire set or pair.

7.3.3 Exclusions

The Company will not be liable to pay insurance benefits under Term 7.3 for loss of, damage to, or theft of the Insured's baggage and personal effects due to:

- (a) wear and tear or gradual deterioration or depreciation;
- (b) insects, moths or vermin;
- (c) mechanical or electrical breakdown or derangement;
- (d) defective materials or craftsmanship;
- (e) any process of alteration, cleaning or restoration;
- (f) confiscation, nationalization, requisition or wilful destruction by any government, public, municipal, local or customs authority;
- (g) the Insured's baggage or personal effects left unattended in any vehicle or public place or as a result of the Insured person's failure of or not taking care and precautions for the safeguard and security of such baggage and personal effects; or
- (h) baggage or personal effects specifically insured elsewhere or recovered/repared by a third party or compensated by any other sources.
- (i) the claims of the Insured due to losses or damages caused by faults of the carrier or a third party have not been claimed/ requested for compensation from the carriers or the third parties first. Any amount paid under this Insurance Policy will deduct the amount the Insured has already been compensated.

Furthermore, the Company will not be liable to pay for loss of, damage to or theft of any of the following properties:

- (a) cash or cheques of any kind;
- (b) papers, bonds, purchase vouchers/reward vouchers, stamps, documents that can be converted into money, texts, manuscripts, various types of securities, loss or replacement of credit cards, identity cards, driving licenses, food, beverages; vitamins, supplements, cosmetic pharmaceuticals;
- (c) mobile phone (including accessories), portable telecommunication equipment, tablet, music player, camera, computer accessories, software and related accessories; technological and telecommunications devices;
- (d) precious assets;
- (e) contact or corneal lenses;
- (f) stamps of any kind, manuscripts and documents of any description;
- (g) medals, coins;
- (h) bonds, securities;
- (i) travellers' samples or camping equipment;
- (j) works of art, paintings, fine art products, antiques, rare items, or musical instruments;
- (k) any glass, fragile, or brittle items; or as diving apparatus, skiing apparatus, etc.;
- (l) household items, crockery, porcelain; household goods;
- (m) manuscripts or documents of any kind, or data recorded on tapes, disks, or any other medium;
- (n) motor vehicles including their accessories, motorcycles, bicycles and their accessories, boats, motors;
- (o) animals, living creatures;
- (p) items that were sent in advance, through post office or shipped separately; or the items were not shipped in the same conveyance with the Insured;
- (q) business goods or sample or equipments of any kind;
- (r) Souvenirs, cosmetics, perfumes, clothes, bridges for tooth or teeth, dentures;
- (s) Wheelchairs, artificial teeth or limbs;
- (t) Luggage or property which is not declared in the report to the police or local authorities or the transport service provider.

The Company shall not be liable to pay for any loss or damage to golfing equipment if:

- (a) loss of or damage to golf balls and clubs whilst in golf courses or in practice; or
- (b) loss or damage due to wear and tear or damage due to any process of repair or while being worked upon resulting therefrom.

7.3.4 Limits on what the Company will pay

The maximum amount the Company will pay for insurance benefits under this Term 7.3 shall not exceed the following amounts:

- (a) The maximum amount the Company will pay for each item, or set or pair of items is VND5,000,000.

- (b) The maximum limit for Lap-top Computer is VND20,000,000 and subject to only one Lap-top Computer per Insurance Policy.
- (c) The maximum aggregated amount for all the benefits under this Term 7.3 shall not exceed the amount for this benefit specified in the Benefit Plans.

The Insured cannot claim under both Terms 6.8 and 7.3 in respect of the same event.

7.4 - Insurance for deductibles or liabilities excess cover for rental vehicle

7.4.1 When the Company will pay

Subject to the limits specified in Point 7.4.2, the Insured can claim for the limit of liability excess beyond the coverage or the deductible which the Insured may become liable to pay in respect of loss of or damage to rental vehicle by an accident or theft during the rental period whilst on the Trip Overseas during the Period of Insurance PROVIDED THAT:

- (a) the rental vehicle is rented from a licensed rental agency;
- (b) as part of the rental vehicle arrangement, the Insured must take up comprehensive rental vehicle insurance against loss of or damage to the rental vehicle;
- (c) the Insured complies with all requirements of the rental organization under the rental vehicle agreement and the policy of the insurer in respect of the rental vehicle and use of the rental vehicle as well as the laws of the country where the rental vehicle is registered and/or used;
- (d) the rental vehicle is driven by the Insured, provided the Insured is permitted in accordance with the licensing or other laws or regulations to drive the rental vehicle and the Insured is not disqualified by order of the court of law or by reason of any enactment or regulation from driving the rental vehicle; and
- (e) the Insured provides documentary evidence of the limit excess beyond the coverage or the deductible that the Insured is liable for and has borne in respect of the accident or theft.

7.4.2 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

7.5 - Closure of Travel Agent

7.3.1 When the Company will pay

Subject to the limits specified in Point 7.5.3 and the exclusions specified in Point 7.5.2, the Insured can claim for loss of travel related expenses paid as a result of bankruptcy or winding up due to the breach in law of the travel agent in Vietnam who had made the Insured's travel arrangements, if such bankruptcy or winding up due to the breach in law of the travel agent in Vietnam takes place within thirty (30) days before the commencement date of the Insured's Trip Overseas.

7.3.2 Exclusions

The Company will not pay for any loss recoverable from any other source including, but not limited to, any government programs, insurance schemes, airlines and travel agencies.

7.3.3 Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

7.6 – Home Guard

7.6.1. When the Company will pay

Subject to the payment rates in Point 7.6.2, the exclusions in Point 7.6.3 and the limits in Point 7.6.4, the Insured can claim for physical loss of or damage due to fires to the Contents, Valuables and/or stamp collections, works of art based in the Insured's residence in Vietnam that was left vacant because of the Insured's Trip during the Insurance Period, provided that the fire and the consequential loss is only after the Insured has left Vietnam for the Trip.

“**Contents**” means household furniture and furnishing, clothing and personal effects belonging to the Insured or to members of the Insured's family or domestic servants residing with the Insured and fixtures and fittings the Insured owns, excluding deeds, bonds, bills of exchange, promissory notes, cheques, travellers' cheques, money, documents of any kind, cash and currency notes.

7.6.2. What the Company will pay

Repair

If the Company agrees to pay the Insured's claim under this Section, the Company will pay for the cost of repairing those items which can cost less to repair the item than to replace it.

Replacement

If the Company selects not to pay the cost of repairing as defined above, the Company may choose to either:

- (a) get the Insured a replacement item; or
- (b) pay the Insured the amount it would cost the Company to replace the item for the Insured on a depreciated basis.

Any depreciation the Company applying will be based on the age and condition of the item. The Company will not apply depreciation to items which are less than twelve (12) months old.

Articles which form part of a set or pair

In case of the loss or damage to the item forms part of a set or pair, the Company will only pay the replacement value of the item that is lost or damaged. The Company will not pay for the cost of replacing the entire set or pair.

7.6.3. Exclusions

The Company will not be liable to pay for insurance benefits under this Term 7.6 for:

- (a) any wear, tear, depreciation, the process of cleaning, dyeing, repairing or restoring any article, the action of light or atmospheric conditions, moth, insects, vermin or any other impact causing damage over time;
- (b) any loss or damage occasioned through the Insured's wilful act or with the Insured's connivance or members of the Insured's family or domestic servants permanently residing with the Insured;
- (c) loss (whether temporary or permanent) of the Insured's property or any part thereof by reason of confiscation, requisition, detention or legal or illegal occupation of such property or of any premises, vehicle or thing containing the same by any government authorities;
- (d) electrical or mechanical breakdown or derangement;
- (e) consequential loss or damage;
- (f) photographic and sporty equipment and accessories and musical instruments for business or professional use; or
- (g) motor vehicles, motorcycle, boats, livestock, bicycles and any equipment or accessories relating thereto.

7.6.4. Limits on what the Company will pay

The maximum amount the Company will pay shall not exceed the maximum amount for this benefit as specified in the Benefit Plans.

PART IV – GENERAL EXCLUSIONS

Regardless of other provisions of this Insurance Policy, in all circumstances, the Company will not pay claims arising from:

1. Any "Pre-Existing Condition", or Congenital Diseases, Genetic Diseases, or the following and all illnesses/conditions caused thereby and/or related thereto, including the consequences of treatment whether occurring prior to or during the Insurance Period: asthma, hemorrhoids, hernia, tonsil diseases and disorders, pathological abnormalities of nasal septum or turbinate, hyperthyroidism, eye diseases and refraction, glaucoma, cataracts, aging and degeneration of all body parts, treatment of natural degeneration, treatment for restoring hearing or vision, sinusitis, uterus diseases and disorders, endometriosis, tuberculosis, anal fistulae, cholecystitis, renal diseases and disorders, pancreatitis, liver diseases and disorders, calculi of all kinds, ureter abnormalities or disease, hypertension or cardiovascular diseases, chest pain, cerebrovascular accident/transient ischemic attack, gastric tumors or gastritis, gastric and duodenal ulcers, GERD,

ulcerative colitis, rectum, intestinal ulcers, constipation, irritable bowel syndrome (IBS), various types of polyps, hallux valgus, all kinds of cancers, tumors, cysts, malignancies, blood diseases and disorders, diseases and disorders of vascular, blood and bone marrow, diabetes mellitus, musculoskeletal and joint diseases, osteoporosis, arthritis, osteoarthritis, Acute Mountain Sickness (AMS); thermal shock; gout; paraneesthesia, lupus erythematosus, pneumonia, lung failure, pneumothorax, pulmonary embolism; autoimmune and metabolic disorders; otitis media requiring surgery, sternum surgery, phlebitis and venous thrombosis/obstruction, varicose veins of limbs, carpal tunnel syndrome, lymphatic vessels/nodes, hemorrhoids.

2. Treatment arising from mental illnesses, behavioural disorders, mental disorders including depression, eating disorders, sleep disorders, insomnia, asthenia, stress, treatments of stress, anxiety, nervous, depression, emotional, psychiatric, behavioral and mental conditions or disorder; mental/neurological disorders, epilepsy or developmental disorders, attention deficit disorders, autism. Treatment of sleep disorders, insomnia, snoring, sleep apnea, neurasthenia/asthenia, dementia or memory impairment or diseases associated with that syndrome, or functional neurological disorders and psychological or neurological manifestations of functional neurological disorders, and other mental illnesses, Alzheimer's disease.
3. The Insured intentionally causes self-Injury, attempts suicide or commits suicide, self-inflicts Injuries while in a normal state or while in dementia, suffering from mental illness, psychiatric disorders, neurological disorders, or other conditions that impair the ability to recognize, control behavior, or engage in fights, brawls, or deliberately put themselves in dangerous situations (except for the purpose of human life saving or as confirmed by the competent authorities as an act of self-defense).
4. Direct or indirect results from use of medications without Physician's indications, poisoning, drugs, alcohol or other similar stimulants.
5. HIV (Human Immunodeficiency Virus) or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) or any mutant derivative or variations or their complications;
6. Sexually transmitted diseases.
7. Contraception, miscarriage, delivery, pregnancy, or abortion or complications of pregnancy; implementation of family planning measures, male/females infertility treatments, reproductive assistance, Intrauterine insemination, treatment of impotence/erectile dysfunction, sexual dysfunctions and any related diseases, treatment of perimenopause, menopause, pre-andropause, andropause, gender transition, and any consequences or complications arising from these treatments.
8. Any expenses in respect of treatment or operation undertaken as a preventative measure e.g. circumcision, vaccination, medication used for the purpose of prevention, prophylaxis, boosting immune system, immune enhancement; treatments which is not scientifically recognized, experimental treatments.

9. The Insured proceeds the Trip despite being certified by a Physician to be unfit for travel.
10. An event that occurs in a country/location for which the Insured is not covered.
11. Hijacking/kidnap/ransom, except for benefits payable under Article 1 - Personal Accident, Term 2.1 - Overseas Medical Benefits, and Term 2.2 - Medical Expenses upon returning to Vietnam.
12. Treatments of Injuries/Sicknesses/Diseases due to war, invasion, act of foreign enemy, hostilities or war-like operations (whether war is declared or not), terrorism, riots, civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, military actions or actions by any leader of an organization aimed for overthrowing, threatening the government, controlling by force, terrorism, or violent acts.
13. Any claim(s) in any way caused or contributed to by Terrorism, involving the use or release or the threat of any nuclear weapon or device or chemical or biological agent.
14. Radioactivity or the use, existence or escape of any nuclear fuel, nuclear material, nuclear weapon or nuclear waste.
15. Any of the Insured's illegal or unlawful acts, violation of the law by the insured within the host country, or confiscation, detention, destruction by customs or other authorities.
16. Any of the Insured's physical impairments or deformities.
17. Any prohibition or regulation of any authorities, the state, the government; or other competent authorities.
18. The Insured's engagement or involvement in naval, military or air-force service or military operations.
19. Engagement in caving, mountaineering, hiking, trekking, hill climbing, rock climbing necessitating the use of guides or ropes, backpacking, hiking regardless terrain, hitchhiking, backpacking necessitating the use of ropes or guides to engage in caving, parachuting, skydiving, parasailing, skiing, ice-skiing, bungee-jumping, ballooning, hang gliding, wrestling, boxing, acrobatics or participating in similar kind of body-contact sports, hunting, horse riding, or any kind of motor racing, scuba diving or any underwater activities involving the use of underwater breathing apparatus or martial arts.
20. Engaging in any kind of sport or racing, competitive or professional capacity or where the Insured would or could earn or receive remuneration, donation, sponsorship or award of any kind.
21. Flying and taking part in aerial activities as an aircrew or cabin crew or for the purpose of any trade or technical operation in or on the aircraft.

22. Engaging in the courses of carrying out duties as test pilots or drivers.
23. Involving in activities as stevedores, manual workers in non-hazardous conditions but related to the use of lightweight tools or machines (e.g. tool makers, delivery services), dangerous job (e.g. heavy manual work related to the use of heavy tools or equipment, construction workers), construction supervisor, construction site visit or ship crew.
24. Participation in activities as professional divers.
25. Any liability whatsoever for any claim or claims in respect of loss or losses directly or indirectly arising out of or in consequence of or aggravated by asbestos in whatever form or quantity.
26. This Insurance Policy will not cover any claim directly or indirectly arising from trips to or through/transit in the countries and territories provided in the sanction list of the United Nations, the U.S., UK or European Union (the list of sanctioned countries as amended from time to time).
27. The Company will also not be liable to pay claims:
 - (a) for medical expenses incurred for continuing treatment including medication the Insured began taking before the Insured bought this insurance;
 - (b) for medical expenses incurred for the purpose of seeking treatment Overseas; or
 - (c) for medical, hospital or dental expenses incurred after the Insured returns to the Insured's home in Vietnam (except those payable under Term 2.2 - Medical Expenses Incurred Upon Return To Vietnam) or for any Injury or Sickness that recurs after the Insurance Policy expires.
28. Expenses arising after the Insurance Policy expires, except for the following benefits: Term 2.2 – Medical Expenses Incurred Upon Return To Vietnam, and Term 4.1 – Automatic Extension.
29. Micronutrient supplements, supplements, dietary supplements, medical nutrition foods, the supplementary or replaceable substances which supports for the dietary purposes, dietary supplementation and substances which are available naturally and that can be purchased without prescription, including vitamins, minerals, supplements, foods for medical purposes, cosmeceuticals, cosmetics.
30. Prostheses, corrective devices and medical appliances, as well as artificial heart implantation, mono or bi-ventricular assist device(s), except standard surgical implants. Charges for the procurement or use of special braces, appliances, wheel chairs, crutches or other equipments.

For the purpose of the right above paragraph:

- Rehabilitation devices are equipment and machinery that assist treatment to help the Insured recover bodily functions impaired by Accident, Congenital Diseases, Genetic Diseases or other causes. Different individuals require different treatment therapies and different corresponding supportive equipment and machinery.
 - Medical devices are instruments and medical equipment used as part of a treatment process, including surgeries, performed by a Physician and/or Medical Facility, deemed Medically Necessary and prescribed for the Insured, including cranial helmets/cranial protective helmets, nebulizers, ventilator and oxygen masks, hearing aids, splint, insulin pumps, infusion pumps, blood glucose monitors and test strips, orthosis/braces and orthopedic supports, voice prosthesis, rubber prosthetic feet, orthotic footbeds, diabetic test strips, colostomy bags, and other medical devices used by Physicians.
 - Mobility aids are the following items and their accessories deemed Medically Necessary and prescribed by a Physician to the Insured following surgical treatment due to Accident and/or Disease: crutches, canes, rollators, manual wheelchairs.
 - Other devices are not Rehabilitation devices, Medical devices, or Mobility aids.
31. Medical examination, medical tests, tests and medical expenses not incident to treatment or diagnosis of a covered Disease or Injury; or any treatment which is not Medically Necessary according to professional advices of a Physician engaged by the Company for such advices; treatment by a family member; the Policyholder/Insured as Physician treating themselves or Relatives in the Medical Facility where they are working.
 32. Failure to make all reasonable efforts to safeguard the Insured's property or to avoid injury or minimize any loss.
 33. Any unexplained loss or mysterious disappearance.
 34. Any payment of hijack, kidnap or ransom.
 35. All forms of cosmetic or plastic surgeries, orthopedics, treatments for the purposes of weight or height controls, treatments of hyperpigmentation, acne, hair loss, baldness, grey hair.
 36. Acquisition cost of the transplanted organ and all expenses incurred by the organ donor.
 37. Tests and treatments relating to Congenital Diseases, Genetic Diseases, birth defects, genetic deformities, and all complications and all illnesses/conditions caused thereby and/or related thereto, resulting from such diseases, including surgeries for those diseases occurring prior to the Starting time of the Trip; such as congenital heart defects, psoriasis, Down syndrome, cleft lip, cleft palate, hydrocephalus, anal stenosis, phimosis, congenital septal deviation, autism spectrum disorder, attention deficit disorder, attention deficit hyperactivity disorder, and other disabilities/congenital diseases/genetic disorders.

Treatment of learning problems or speech defects of a dependent child. Foetal surgery while still being in the womb.

38. Any illness that is declared or assessed as a pandemic by the World Health Organization (WHO) and/or any other competent authority. The insurance benefits under this Insurance Policy shall immediately cease from the date of such announcement and will be reinstated once the pandemic status is officially lifted by the World Health Organization (WHO) or any other competent authority.
39. Expenses and/or events arising from or relating to or consequences of natural disasters such as earthquakes, volcanoes, tsunamis; radioactive contamination, pandemics as declared by competent authorities (including SARS, H5N1, Ebola, other pandemics as declared by competent authorities).
40. Expenses relating to dental treatments, including gingivitis, scaling, periodontitis, fillings, root canal treatment, tooth extraction, apicoectomy surgery; cosmetic dental restorations, bridges, crowns, dentures, tooth caps, except expenses covered by the Company under Item c) Point 2.1.2, Part III of this Insurance Policy.
41. Other exclusions as agreed with the Insured and as set forth in the Policy Schedule/Certificate of Insurance.

Please note that these general exclusions will be applicable to all the insurance benefits set out in this Insurance Policy.

PART V – AGGREGATE LIMIT

For travel group Insurance Policies (which mean all policies with the same Policyholder, Insurance Period, flight and destination), in all circumstances, the Company's maximum liability under those Insurance Policies shall not exceed one hundred twenty billion Vietnamese dong (VND120,000,000,000) for any one event combining the benefits of Personal Accident (Article 1 – Personal Accident) and Medical Expenses (Article 2 – Medical Expenses). All claims under these Insurance Policies occurring directly as a result of one event shall be aggregated for the purpose of this limitation and the relevant benefits shall be paid on a pro-rata basis according to the amount of loss and the limit stipulated under this clause, maximum liability will not exceed one hundred twenty billion Vietnamese dong (VND120,000,000,000).

PART VI: MAKING A CLAIM

Article 1 - Claims documents

Upon the happening of any insurance event, the Insured or the Insured's legal representative shall as soon as possible after the Insured returns to Vietnam or within thirty (30) days of the end of the Trip, must send to the Company, and bear the sending costs, the claims documents. The claims documents include the following specific materials and information:

- Fully completed claim form which is prescribed by the Company;

- Certificate of Insurance (original document), if any;
- Copy of passport;
- Copy of air ticket/ boarding pass;
- Documents of the period of the Trip: page(s) of immigration stamps showing dates of departure from and arrival to Vietnam in passport or other documents proving the same.
- Documents of loss and claim amount;
- Other documents upon the request of the Company.

Article 2 - When the Company has the right to refuse paying a claim

The Company has the right to refuse paying a claim if:

- (a) The Insured fails to notify the Company of anything that is expected under the Insured's duty of disclosure;
- (b) The Insured makes any untruthful statement intentionally;
- (c) The Insured commits a fraud in providing information related to the claims;
- (d) The Insured fails to make available to the Company the documents and information the Company needs to help the Company decide on any amount the Company may pay the Insured;
- (e) The Insured makes any offer of settlement or payment, or in any other way admits liability with third parties without the Company's prior agreement; or
- (f) The Insured does not return to Vietnam within one (1) year from the date of happening of insurance event.

Article 3 – The Company only settles claims if the Insured has already arrived to Vietnam.

Article 4 – Medical Evaluation

The Company reserves the right to request additional tests and/or evaluations if it determines that a claimed condition may be directly or indirectly related to an excluded terms/conditions and the Company shall bear the cost of such tests or evaluations.

PART VII: CANCELLATION, TERMINATION OF THE INSURANCE POLICY AND REFUND

Article 1 - Single Trip Insurance Policy

For a Single Trip Insurance Policy, no refund of premium is allowed once the Insurance Policy is issued, except one of the following cases:

The visa to the country where the Insured intends to travel is denied to grant. In this case, the

Insured shall have the right to terminate the Insurance Policy by sending the Company a written notice together with the letter of the relevant foreign embassy/foreign consulate/foreign country/other competent authority denying the granting of a visa.

Or the Insured cannot make the Trip due to Emergency Conditions. In this case, the Insured shall have the right to terminate the Insurance Policy by sending the Company a written notice together with the medical documents related to above-mentioned Emergency Conditions.

In all cases, the Company will refund the Insured the premium the Insured paid less two hundred thousand Vietnamese dong (VND200,000) of administrative fee and less the pro-rata portion premium for the days the Insurance Policy has been effective (from the start date of the Insurance Period). The Insured has to bear any bank fees when the Company refund the premium by bank transfer.

Article 2 - Annual Insurance Policy

- (a) Subject to Point (c) below, If the Policyholder/Insured cancels the Insurance Policy at any time by written notice to the Company and agreed by the Company to this request, the Company will refund the Insured the premium the Insured paid less two hundred thousand Vietnamese dong (VND200,000) of administrative fee and less the pro-rata portion premium for the days the Insurance Policy has been effective (from the start date of the Insurance Period). The Policyholder/Insured has to bear any bank fees when the Company refund the premium by bank transfer.
- (b) If the Company cancels the Insurance Policy at any time by written notice to the Policyholder/Insured and agreed by the Policyholder/Insured to this request, the Company will refund the Insured a pro-rata portion of the premium for the days the Insurance Policy has been effective (from the start date of the Insurance Period).
- (c) If the Policyholder/Insured cancels the Insurance Policy when the Company has agreed to pay any claim under the Insurance Policy or there has been an occurrence of any event for which may be payable under the Insurance Policy, there will be no refund of the premium the Policyholder/Insured has paid. Sending a notice by Policyholder/Insured to cancel the Insurance Policy under Point (a) above shall be deemed to waive the right to claim for all insurance events under the Insurance Policy which has arisen prior to the termination of the Insurance Policy.

PART VIII - PREMIUM PAYMENT WARRANTY

This Insurance Policy shall automatically terminate if the premium is not paid to the Company prior to or on the Insurance Policy issuance date.

PART IX – LIABILITY OF THE POLICYHOLDER AND THE INSURED IN RELATION TO THE INSURANCE POLICY

1. Duty of disclosure

The Insurance Policy is based on the information given in the Application Form and other information provided to the Company together with the Application Form. The accuracy and completion of the information provided by the Policyholder and/or the Insured(s) to the Company in the Application Form or in other ways, will form the basis of and be part of this Insurance Policy.

Before entering into the Insurance Policy, the Policyholder and/or the Insured(s) must disclose the Company everything the Policyholder and/or the Insured(s) know or could reasonably be expected to know which will affect the Company's decision to define the scope of insurance, the premium, and other terms and conditions of the insurance. If the Policyholder and/or the Insured(s) are uncertain about whether a fact is relevant or not, the Policyholder and/or the Insured(s) must inform the Company of it. If the Policyholder and/or the Insured(s) do not provide such information to the Company, the Company may:

- (i) reduce the amount payable for the claim; or
- (ii) refuse to pay the claim that may arise; or
- (iii) cancel the Insurance Policy from the effective date of the Insurance Policy/ the start date of the Insurance Period and the Company shall refund the premium paid by the Insured after deducting the Insurance Policy administrative fee of VND 200,000 (two hundred thousand dong) plus applicable taxes (if any).

Upon the happening of any event giving rise or likely to give rise to a claim under this Insurance Policy, the Insured or the Insured's legal representative shall as soon as possible after the Insured returns to Vietnam or within thirty (30) days of the end of the Trip:

- (a) render the Company a fully completed claim form which is prescribed by the Company; and
- (b) make available to the Company at the Insured's expense all relevant information the Company asks for (which may include official receipts, reports, certificates and other written or photographic evidence the Company requires as supporting documents/ information for the claims); and
- (c) the Insured or the Insured's legal representative must not admit, deny or negotiate any claim settlement without the Company's written consent.

In the event of death, the Company reserves the right to arrange for a postmortem examination where this is not forbidden by law or religious belief. The Company shall bear the expenses incurred for such examinations.

2. Reasonable Precautions

The Policyholder and the Insured(s), at their own cost, must take reasonable precautions to prevent the occurrence of insurance events, and must comply with regulatory requirements and obligations as well as any reasonable suggestions of the Company.

3. General conditions for paying a claim

Claims payments under any Articles of this Insurance Policy is subject to the coverage,

conditions, exclusions and all other terms of this Insurance Policy. In addition, the Company will only be liable to pay a claim if all the following additional conditions are fully met:

- (i) The Insured has Vietnam as the Usual Country of Residence; and
- (ii) The Insured must not be over the age of eighty (80) at the Start Time of a Trip; and
- (iii) The insurance coverage is limited to a maximum of one hundred and eighty six (186) days for any single Trip; and
- (iv) The Insured(s) are only covered if the Insurance Policy's scope includes the Travel Regions in which the event giving rise to a claim occurs, unless the Insured(s) provides the Company with evidence to show the Insured(s) are in another country solely for the purpose of transit and the Insured(s) remain within the transit area of the airports; and
- (v) In the event of a claim, the Company will pay the Insured Reasonable and Customary and actual expenses incurred and included in the limits of the maximum amounts paid for each benefit and these limits are specified in the Benefit Plans; and
- (vi) The Company will not pay the Insured for claims which arise out of or in connection with items which are listed under General Exclusions or separate exclusions for each benefit or any other exclusions; and
- (vii) In the event of the Insured's death, the Company will make payment to the Insured's legal representative as designated in the Application Form or other legal documents. The proof of payment of compensation for the legal representative shall be a valid discharge to the Company; and
- (viii) The Company and the Company's Medical Assistance Provider shall not be held responsible for failure to provide services or for delays caused by strikes or conditions beyond the control of the Company and/or the Medical Assistance Provider, including but not limited to, flight conditions or where local laws or regulatory agencies prohibit the Company, the Medical Assistance Provider or the Company's services provider(s) rendering such services; and
- (ix) Failure by the Insured to comply with the claim request procedure or to assist in claim investigation may result in denial of the claim and if any claim is found to be fraudulent or intentionally exaggerated or falsely declared by the Company, then the Insurance Policy shall be void and no claim shall be payable; and
- (x) For reimbursement, the Company only accepts the original document(s), including invoice, receipt, medical report(s), and relevant documents validly issued in accordance with the law of the country where those documents are issued; and
- (xi) In case the documents relating to claim documents are not in Vietnamese or English, they must be translated and notarized legally and the translation fee will be paid by the Insured.

PART X – REASONABLE PRECAUTIONS AND MATERIAL CHANGES

The Policyholder/Insured must read this Policy Wording and other documents of the Insurance Policy entirely and carefully to make sure:

- (i) to understand the insurance coverage under this Insurance Policy (including exclusions that are not insured); and

- (ii) to be aware of and understand the limits on the amounts the Company will pay the Insured where the insurance event occurs; and all other terms and conditions of the Insurance Policy.

In case the Policyholder/Insured has any question about this Insurance Policy, the Policyholder/Insured needs to call/ write to/ inform the Company. Contact details are shown in the Benefit Plans and/or the Certificate of Insurance and/or other documents of the Insurance Policy.

The Policyholder, the Insured needs to inform the Company immediately of any change in address of the Policyholder, the Insured and of any other changes affecting the Policyholder, the Insured which requires an alteration to the Insurance Policy's contents.

Subject to Part VI - Making A Claim of this Policy Wording, where the Insured may be entitled to receive a benefit under this Insurance Policy, the Insured or the Insured's legal representative needs to notify the Company as quickly as possible. All delays in notification would affect the Insured's claim request/ settlement.

PART XI - CONDITIONS PRECEDENT TO LIABILITY

1. Any liability of the Company towards the Insured shall arise only if all following conditions precedent are fully satisfied:
 - (a) The Company must be provided with all required statements and declarations made by the Policyholder and/or the Insured (or the parent or legally appointed guardian if the Insured is a Minor Child) through the Application Form and any accompanying information/documents; and all such statements and declarations must be entirely accurate, truthful, and complete. If the Policyholder/Insured provides information on behalf of a Minor Child, such information must also be accurate, truthful, and complete.
 - (b) The Insured complies with the duty of disclosure as specified in the Insurance Policy.
 - (c) The Check-out Time does not come before the start time of the Insurance Period as specified in the Policy Schedule/Certificate of Insurance.
 - (d) Other conditions precedent as specified in the Insurance Policy.
2. If any of the above conditions precedent are not fulfilled, the Company shall bear no liability towards the Insured, the Company reserves the right to deny claim payment and/or terminate, cancel the Insurance Policy.

PART XII - FRAUD AND HANDLING METHODS

If any claim is in any way false or fraudulent, or if fraudulent means or devices are used by the Insured or anyone acting on his/her behalf to obtain benefits under this Insurance Policy, the Policy shall be immediately terminated, all benefits shall be forfeited, and the Company shall have the right to retain (deduct) an amount of five hundred thousand (500,000) Dong or premium of the Insurance Policy, whichever is lesser, plus tax (if applicable) per Insurance

Policy and/or each Trip before refunding any premium.

PART XIII - CONVERSION FROM GROUP INSURANCE POLICY TO INDIVIDUAL INSURANCE POLICY

The Policyholder/Insured under a group Insurance Policy has the right to request the Company to convert their coverage to an individual Insurance Policy after at least one consecutive (1) year of coverage under the group Insurance Policy. Accordingly, the Company reserves the right to review, request the Policyholder/Insured to provide additional information, documents and determine the terms and conditions of the individual Insurance Policy in accordance with the request of the Policyholder/Insured; any changes related to benefits and terms and conditions of the insurance (if any) shall be notified in writing to the Policyholder/Insured. The Company reserves the right to refuse the conversion to an individual Insurance Policy if such conversion is not in accordance with the provisions of the Insurance Policy, the Company's insurance products or at the Company's sole discretion.

PART XIV – SUMMARY OF POLICY WORDING, TERMS AND CONDITIONS OF TRAVELCARE INSURANCE PRODUCT

1. Benefits Plans of TravelCare insurance product, eligibility criteria for product offerings

As specified in Part XV – BENEFIT PLANS of this Insurance Policy Wording.

2. General Exclusions

As specified in Part IV – GENERAL EXCLUSIONS of this Insurance Policy Wording.

3. Insurance Period, Premium payment warranty

A. The Insurance Period under the Insurance Policy:

means the period as stated in the Policy Schedule/Certificate of Insurance.

For an Insured, the Insurance Period for each Trip is the period that begins at the Start Time and ends at the Expiry Time.

Insurance Periods are calculated according to Vietnam standard time.

Trip

Means the journey undertaken by the Insured and insured by the Company under this Insurance Policy. The Trip starts at the Start Time and ends at the Expiry Time.

The Start Time of each Trip is:

The time when the Insured completes the security check procedures to leave the international check-out point in Vietnam to travel to the Overseas destination (hereinafter referred to as the “**Check-out Time**”), provided that, the Check-out Time is not prior to the starting time of the Insurance Period as stated in the Policy Schedule/Certificate of Insurance.

The Expiry Time of each Trip is:

- (a) The expiring time of the Insurance Period stated in the Policy Schedule/Certificate of Insurance; or
- (b) The time of arrival in Vietnam from the completion of the security check procedures at the international arrival point (check-in point) in Vietnam;

whichever comes first.

B. Premium payment warranty:

As specified in Part VIII – PREMIUM PAYMENT WARRANTY of this Insurance Policy Wording.

4. The obligations of information declaration truthfully and legal consequences for breach of information disclosure obligations truthfully of the Policyholder

As specified in Part IX – LIABILITY OF THE POLICYHOLDER AND THE INSURED IN RELATION TO THE INSURANCE POLICY, Part XI – CONDITIONS PRECEDENT TO LIABILITY and Part XII - FRAUD AND HANDLING METHODS of this Insurance Policy Wording.

5. Benefits in case of termination of Insurance Policy during the Insurance Period and refunded premium

As specified in Part VII - CANCELLATION, TERMINATION OF THE INSURANCE POLICY AND REFUND of this Insurance Policy Wording.

6. Address of company website, how to log in to review product information in website, to download the Insurance Policy in case of providing insurance product in the online environment

The Insurance Policy Wording and Insurance Policy documents can be reviewed and downloaded at:

chubb.com/vn-vn/bao-hiem-du-lich

7. Other notes

This document is to summarize the policy wording, terms and conditions of the insurance product; the complete terms and conditions of the Insurance Policy are specified in in the documents forming the Insurance Policy listed in Part I – General Provisions, Article 2 (Insurance Policy) of this Insurance Policy Wording.

PART XV – BENEFIT PLANS

Unit: VND

MAXIMUM COVERAGE		Details of Coverages	BENEFIT PLANS					
			CLASSIC		EXECUTIVE		PREMIER	
			<i>Individual</i>	<i>Family</i>	<i>Individual</i>	<i>Family</i>	<i>Individual</i>	<i>Family</i>
PERSONAL ACCIDENT								
1	Accidental death or permanent disablement	The Personal Accident benefit if the Insured has suffered Injury or death primarily and directly resulting from an Accident occurring during the Trip as specified in the Policy Wording for the maximum Injury compensation rate shall be paid in accordance with the benefits table ("Rating Table")	Adult		Adult		Adult	
			1,000,000,000		2,000,000,000		3,000,000,000	
			Children		Children		Children	
			500,000,000		1,000,000,000		1,500,000,000	

MEDICAL EXPENSES								
2	Overseas Medical Expenses	Overseas medical expenses incurred because the Insured sustains an Accidental Injury or suffers a Sickness/Disease while on an insured Trip	1,000,000,000	1,700,000,000	1,600,000,000	2,400,000,000	2,400,000,000	3,600,000,000
3	Medical Expenses Incurred Upon Return To Vietnam	To follow-up treatment following the indications of the attending Physician Overseas within thirty-one (31) days from the date of the Insured's return to Vietnam following discharge from an Overseas Medical Facility	100,000,000	200,000,000	200,000,000	400,000,000	300,000,000	600,000,000

4	Overseas Hospital Visit	Transportation cost of one relative or friend to visit the Insured if the Insured is hospitalised for more than 5 days while overseas	60,000,000	60,000,000	90,000,000	90,000,000	120,000,000	120,000,000
5	Additional Accommodation Expenses	Hotel accommodation incurred by one relative or friend if the insured is hospitalised for more than 5 days while overseas	20,000,000	20,000,000	24,000,000	24,000,000	40,000,000	40,000,000
		Daily Limit	5,000,000	5,000,000	6,000,000	6,000,000	10,000,000	10,000,000
6	Overseas Compassionate Visit	Transportation cost of one Relative or friend to assist the Insured in the arrangement for the mortal remains and/or Overseas funeral rituals	40,000,000	40,000,000	60,000,000	60,000,000	100,000,000	100,000,000

7	Returning children to home country or country of residence	Cost of returning unattended children to their home country or country of residence	60,000,000	60,000,000	80,000,000	80,000,000	120,000,000	120,000,000
8	Overseas Hospital Daily Benefit	Daily cash benefit of VND1,000,000 while hospitalised overseas	16,000,000	16,000,000	20,000,000	20,000,000	50,000,000	50,000,000
9	Hospital Daily Income Benefit in Vietnam	Daily cash benefit of VND500,000 while hospitalised in Vietnam immediately upon return	5,000,000	5,000,000	6,000,000	6,000,000	10,000,000	10,000,000
10	Medical Expenses for Pregnancy Related Sickness	Pay for the medical expenses necessarily and unavoidably incurred while on a Trip Overseas for pregnancy related Sickness	24,000,000	24,000,000	30,000,000	30,000,000	60,000,000	60,000,000
11	24-hour Medical Assistance		Contact EUROP Assistance Hotline: +84 28 3512 2324					

12	Emergency Telephone Expenses	Telephone charges as a result of medical emergency	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
MEDICAL EVACUATION								
13	Emergency Medical Evacuation	The medically necessary expense incurred in emergency medical evacuation of the Insured to the nearest Medical Facility where appropriate medical care is available	As Incurred					
14	Repatriation of Mortal Remains	Transportation of mortal remains or burial at place of death.	As Incurred					
LIABILITY								
15	Personal Liability	Pay the Insured for the Insured's legal liability for the death of or injury to someone else or loss of or damage to property owned or controlled by a third party during the Trip	1,000,000,000	1,000,000,000	1,500,000,000	1,500,000,000	2,000,000,000	2,000,000,000

		Overseas of the Insured						
INCONVENIENCES								
16	Trip Cancellation/Postponement	Reimbursement of the non-refundable portion of travel costs paid in advance or administrative charges incurred due to Unforeseen Circumstances or the outbreak of Infectious Disease at the Trip destination	50,000,000	80,000,000	80,000,000	120,000,000	120,000,000	160,000,000
17	Trip Curtailment	A pro-rated amount will be paid for each complete day of the planned trip lost due to medical conditions of the Insured or accompanying Relative or other circumstances such as a quarantine order upon medical advice, natural disaster,	50,000,000	80,000,000	80,000,000	120,000,000	120,000,000	160,000,000

		strike, outbreak of Infectious Disease, etc at the Trip destination						
18	Trip Disruption	A pro-rated amount will be paid for each complete day of the planned trip lost if the Insured or the Relative accompanying with the Insured is hospitalised overseas for more than 5 days.	30,000,000	40,000,000	40,000,000	60,000,000	60,000,000	100,000,000
19	Travel/Flight Misconnection	For 6 full consecutive hours or above of delay due to flight misconnection as defined in Policy Wording while overseas, maximum up to 3,000,000 VND per Trip	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000

20	Travel Delay	Maximum VND2,400,000 for each full 6 consecutive hours your scheduled transport is delayed while oversea.	12,000,000	12,000,000	12,000,000	12,000,000	12,000,000	12,000,000
21	Travel Overbooking	Pay the Insured for accommodation , meal and travel expenses while the Insured is Overseas if the Insured cannot board the Insured's intended scheduled flight due to overbooking	1,600,000	3,200,000	2,000,000	4,000,000	10,000,000	20,000,000
22	Emergency Purchases	Pay for the emergency purchase of essential personal items needed if while on a Trip Overseas if the Insured's baggage is stolen or it has been declared	2,000,000	5,000,000	2,400,000	6,000,000	6,000,000	10,000,000

		by the transport provider that the Insured's baggage is lost						
23	Baggage Delay	Pay up to VND2,400,000 for every 6 consecutive hours that the Insured's baggage is delayed while overseas if the Insured's checked-in baggage has been delayed, misdirected or temporarily misplaced by the transport provider while the Insured is on a Trip	6,000,000	6,000,000	10,000,000	10,000,000	16,000,000	16,000,000
24	24-hour Travel Assistance		Contact EUROP Assistance Hotline: +84 28 3512 2324					

LOSSES								
25	Loss of Personal Money	Pay for the Insured's loss of cash and travellers' cheques owned by the Insured due to theft, robbery by threat of violence or travel disaster at the Trip's destination while the Insured is on the Trip Overseas	2,000,000	5,000,000	3,000,000	6,000,000	6,000,000	12,000,000
26	Loss of Travel Documents	Pay for the cost of replacing the Insured's travel documents lost including the additional travel and hotel accommodation expenses necessarily incurred to replace lost travel documents during the Trip while the	24,000,000	24,000,000	24,000,000	24,000,000	24,000,000	24,000,000

		Insured is Overseas						
27	Loss of or Damage to Baggage & Personal Effects	Pay the Insured if the Insured's baggage and personal effects (including golfing equipments and lap-top computers) which are damaged or stolen due to a Sudden Incident occurring while the Insured is on a Trip Overseas, maximum up to VND5,000,000 for each item or set or pair of items; and up to VND20,000,000 for a laptop computer	30,000,000	30,000,000	40,000,000	40,000,000	60,000,000	60,000,000
28	Rental Vehicle Excess Cover	Covers for any excess or deductible which the	10,000,000	10,000,000	12,000,000	12,000,000	24,000,000	24,000,000

		Insured may be required to pay for accidental loss or damage to their rental vehicle during the Trip while the Insured is Overseas						
29	Closure of Travel Agent	Compensate for loss of travel related expenses paid as a result of bankruptcy or winding up due to the breach in law of the travel agent in Vietnam happening within thirty (30) days prior the commencement date of the Trip Overseas	30,000,000	40,000,000	50,000,000	60,000,000	70,000,000	80,000,000
30	Home Guard	Covers for physical losses or damages due to fires to the Contents, Valuables and/or stamp collections, works of art	20,000,000	20,000,000	30,000,000	30,000,000	60,000,000	60,000,000

		based in the Insured's residence in Vietnam that was left vacant because of the Insured's Trip Overseas						
EXTENSIONS								
31	Hijack Benefit	Pays an allowance if the aircraft in which the Insured is travelling during the Trip is hijacked for at least 12 consecutive hours.	20,000,000	20,000,000	24,000,000	24,000,000	30,000,000	30,000,000
		Limit per 12-hour period	1,300,000	1,300,000	2,000,000	2,000,000	2,600,000	2,600,000
32	Automatic Extension	Extend the Insurance Period for a period of seven (7) days without of charges if the Insured is unable to return to Vietnam at the expiry date of the Insurance Period while on a Trip Overseas due to Disease/Accident or the means	7 days	7days	7 days	7days	7 days	7 days

		of transportation that the Insured booked to return to Vietnam is delayed due to circumstances out of control of the Insured						
33	Disruption/ Withdrawal of Hotel Services	Pays VND1,500,000 for each 24-hour period in the event of disruption or withdrawal of hotel services as a result of strike or riot at travel destination of the Trip	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000	3,000,000

Endorsements of TravelCare Policy Wording, version UW-T00-W-001-12-E

(This material is an inseparable part of the insurance policy)

Part I - GENERAL PROVISION, Article 1 - Definition - Southeast Asia/ASEAN is amended as follows:

Southeast Asia/ASEAN

Countries/territories of Brunei, Cambodia, East Timor, Indonesia, Laos, Malaysia, the Philippines, Singapore and Thailand.