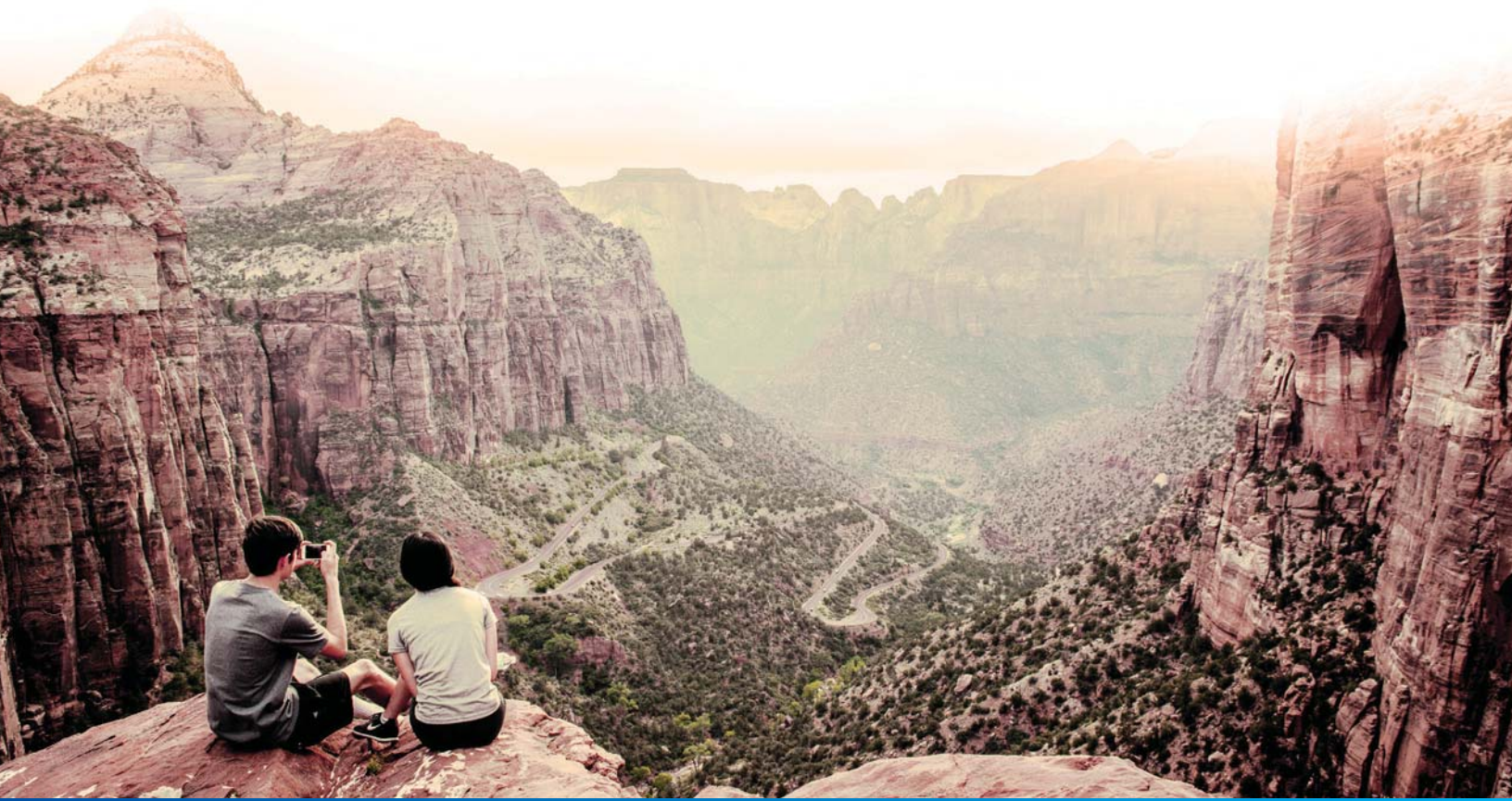




TOKIO MARINE  
HCC



# Atlas Travel<sup>®</sup>

The Atlas Travel plan from Tokio Marine HCC – MI Group (MI Group), a member of Tokio Marine HCC, is with you almost anywhere in the world you may travel for vacation, study abroad, corporate travel, or mission work.

Distributed by:



## Good Neighbor Insurance

690 East Warner Road, Suite 117, Gilbert, Arizona, 85296 USA

Toll Free: [866-636-9100](tel:866-636-9100) Phone: [480-813-9100](tel:480-813-9100) Fax: [480-813-9930](tel:480-813-9930)

Website: [www.gninsurance.com](http://www.gninsurance.com) Email: [info@gninsurance.com](mailto:info@gninsurance.com)

# Why Choose Atlas Travel®?

---

Whatever your reason, international travel should be a pleasant experience. Complications and emergencies such as illness, injury, and natural disasters are a fact of life. While we hope none of these incidents happen, we're here to help if they do.

That's why Atlas Travel provides coverage for unexpected medical expenses as well as emergency travel benefits and multilingual travel assistance services.

---



## **Do I need travel medical insurance?**

Many times the primary medical insurance in your home country offers little or no coverage for medical expenses incurred as you travel outside of your home country. Atlas Travel provides international coverage as well as important benefits like Emergency Medical Evacuation, Hospital Room and Board, and Crisis Response for kidnap and ransom situations abroad.

**For more information about Atlas Travel, please visit [www.gninsurance.com](http://www.gninsurance.com)**

## **After purchasing coverage, how can I trust the company to be there if I need them?**

Tokio Marine HCC- MIS Group, headquartered in the United States in Indianapolis, Indiana, is a full-service company offering international medical insurance designed to meet needs of consumers worldwide.

Tokio Marine HCC is a leading specialty insurance group conducting business in

approximately 180 countries and underwriting more than 100 classes of specialty insurance. Headquartered in Houston, Texas, the company is made up of highly entrepreneurial teams equipped to underwrite special situations, companies, and individuals acting independently to deliver effective solutions. Our products and capabilities set the standard for the industry, as many of our nearly 2,500 employees are industry-leading experts. Tokio Marine HCC is part of Tokio Marine, a premier global company with a market cap of approximately \$30 billion.\*

Tokio Marine HCC holds a financial strength rating of AA- for Standard & Poor's and Fitch Ratings and A++ (Superior) by A.M. Best Company.

**For more information about Atlas Travel, please visit [www.gninsurance.com](http://www.gninsurance.com)**

## Atlas Travel Schedule of Benefits and Limits

PLAN DETAILS		
Deductibles	\$0, \$100, \$250, \$500, \$1,000, \$2,500, or \$5,000 per certificate period.	
Overall Maximum Limit	Age 80 or older - \$10,000; Age 70 to 79 - \$50,000, \$100,000, or \$250,000; All others - \$50,000, \$100,000, \$250,000, \$500,000, \$1,000,000, or \$2,000,000.	
Coinsurance – Claims Incurred in U.S.	Within the PPO: We will pay 100% of eligible expenses, after the deductible, to the overall maximum limit.	
In-Network Payment	Outside the PPO: Usual, reasonable, and customary. You may be responsible for any charges exceeding the payable amount.	
Out-of-Network Payment		
Coinsurance – Claims Incurred Outside U.S.	We will pay 100% of eligible expenses after the deductible up to the overall maximum limit.	
<b>Eligible expenses are subject to deductible, coinsurance, overall maximum limit, and are per certificate period unless specifically indicated otherwise.</b>		
BENEFIT		
LIMIT		
Hospital Room and Board	Average semi-private room rate, including nursing services.	
Local Ambulance	Usual, reasonable and customary charges when covered illness or injury results in hospitalization as inpatient.	
Intensive Care Unit	Up to the overall maximum limit.	
Emergency Room Co-payment	<b>Claims incurred in the U.S.</b> You shall be responsible for a \$200 co-payment for each use of emergency room for an illness unless you are admitted to the hospital.	
	There will be no copayment for emergency room treatment of an injury. <b>Claims incurred outside the U.S.</b> No co-payment <b>Claims incurred in the U.S.</b> For each visit, you shall be responsible for a \$25 co-payment, after which coinsurance will apply. – co-payment is waived for members with a \$0 deductible – not subject to deductible <b>Claims incurred outside the U.S.</b> No co-payment	
Urgent Care Center Co-payment	Up to \$50 maximum per day. Must be ordered in advance by a physician. – <i>not subject to coinsurance</i>	
Outpatient Physical Therapy and Chiropractic Care	Up to the overall maximum limit.	
All Other Eligible Medical Expenses	Up to the overall maximum limit.	
Acute Onset of Pre-existing Condition ( <i>excludes chronic and congenital conditions</i> ) ( <i>only available to members under age 70</i> )	Up to \$25,000 lifetime maximum for Emergency Medical Evacuation.	
Terrorism	Up to \$50,000 lifetime maximum. Eligible medical expenses only.	
Emergency Dental (Acute Onset of Pain)	Up to \$250 – <i>not subject to deductible or coinsurance</i>	
Emergency Eye Exam for a Covered Loss	Up to \$150. \$50 deductible per occurrence (plan deductible is waived). – <i>not subject to coinsurance</i>	
EMERGENCY TRAVEL BENEFITS		
LIMIT		
Emergency Medical Evacuation	Up to \$1,000,000 lifetime maximum, except as provided under Acute Onset of Pre-existing Condition. – <i>not subject to deductible, coinsurance, or overall maximum limit</i>	
Return of Minor Children	Up to \$50,000 – <i>not subject to deductible or coinsurance</i>	
Pet Return	Up to \$1,000 – <i>not subject to deductible or coinsurance</i>	
Repatriation of Remains	Up to the overall maximum limit – <i>not subject to deductible or coinsurance</i>	
Emergency Reunion	Up to \$100,000, subject to a maximum of 15 days – <i>not subject to deductible or coinsurance</i>	
Natural Disaster – Replacement Accommodations	Up to \$250 a day for 5 days – <i>not subject to deductible or coinsurance</i>	
Trip Interruption	Up to \$10,000 – <i>not subject to deductible or coinsurance</i>	
Travel Delay	Up to \$100 a day after a 12-hour delay period requiring an unplanned overnight stay. Subject to a maximum of 2 days. – <i>not subject to deductible or coinsurance</i>	
Lost Checked Luggage	Up to \$500 – <i>not subject to deductible or coinsurance</i>	
Political Evacuation	Up to \$100,000 lifetime maximum – <i>not subject to deductible or coinsurance</i>	
Accidental Death & Dismemberment ( <i>excludes loss due to common carrier accident</i> )		
\$250,000 maximum benefit any one family or group. – <i>not subject to deductible, coinsurance, or overall maximum limit</i>	<b>Ages 18 through 69</b> Lifetime Maximum - \$50,000 Death - \$50,000 Loss of 2 Limbs - \$50,000 Loss of 1 Limb - \$25,000	<b>Ages 70 through 74</b> Lifetime Maximum - \$12,500 Death - \$12,500 Loss of 2 Limbs - \$12,500 Loss of 1 Limb - \$6,250
	Optional Accidental Death & Dismemberment buy-up of \$50,000 to Lifetime max. \$100,000 (available to ages 18-69 only)	<b>Under age 18</b> Lifetime Maximum - \$5,000 Death - \$5,000 Loss of 2 Limbs - \$5,000 Loss of 1 Limb - \$2,500
Common Carrier Accidental Death		
Ages 18 through 69	\$50,000	
Under age 18	\$25,000	
Ages 70 through 74	\$12,500	
Ages 75 and older	\$6,250	
	Subject to a maximum of \$250,000 any one family or group. – <i>not subject to deductible, coinsurance, or overall maximum limit</i>	
Crisis Response - Ransom, Personal Belongings, and Crisis Response Fees and Expenses	Up to \$10,000 – <i>not subject to deductible, coinsurance, or overall maximum limit</i> Optional Crisis Response buy-up with Natural Disaster Evacuation Coverage. \$90,000 per certificate period, with \$10,000 maximum for Natural Disaster Evacuation.	
Hospital Indemnity	\$100 per day of inpatient hospitalization – <i>not subject to deductible or coinsurance</i> Up to: \$10,000 lifetime maximum \$10,000 third person injury	
Personal Liability	\$10,000 third person property \$2,500 related third person property – <i>not subject to deductible, coinsurance, or overall maximum limit</i> Optional Personal Liability buy-up of \$90,000 to Lifetime max. \$100,000	
Bedside Visit	Up to \$1,500 – <i>not subject to deductible or coinsurance</i>	
Border Entry Protection	Up to \$500 if traveling on a valid B-2 visa and denied entrance at the U.S. border – <i>not subject to deductible or coinsurance</i>	

# What's Covered by Atlas Travel®?

## International Coverage

### Emergency Medical Evacuation and Emergency Reunion

Would you know what to do if you found yourself in a life-threatening situation far from home? Tokio Marine HCC- MIS Group is experienced in arranging emergency medical evacuations. Atlas Travel will cover eligible expenses necessary to transport you from an initial treating facility to the nearest hospital qualified to treat your life-threatening condition. We also understand the importance of family support in these difficult situations. Atlas Travel will also cover the transportation, lodging, and meal costs for a relative to join you after a covered emergency medical evacuation, up to the lifetime limit.

### Repatriation of Remains

What would your family do if disaster strikes while you are away from home? The death of a loved one is never easy, no matter the circumstances. In the unfortunate event of your death while traveling abroad, Atlas Travel will arrange for and cover eligible costs associated with the repatriation of your remains.

### Return of Minor Children

If you are expected to be hospitalized for more than 36 hours due to a covered injury or illness and covered children under 18 years of age will be left unattended as a result, Atlas Travel will cover the eligible transportation cost for the children to return home.

### Terrorism

In these turbulent times, the risk of a terrorist attack is a reality. If you are in the wrong place at the wrong time, and the country or region you're visiting is NOT under a level 3 or level 4 travel advisory, Atlas Travel offers coverage for eligible medical expenses resulting from those acts. Coverage excludes countries or regions for which the U.S. Department of State has issued a level 3 ("reconsider travel") or level 4 ("do not travel") advisory.

### Political Evacuation

If, during the coverage period and after your arrival, the United States government issues a level 3 or level 4 travel advisory for your destination country, Atlas Travel will coordinate your alternate departure arrangements from that country and cover eligible associated costs.

### Natural Disaster – Replacement Accommodations

Natural disasters can happen anywhere and at any time. If a natural disaster occurs on your trip, causing you to become displaced from your accommodations, Atlas Travel will provide relief of a maximum of \$250 a day for 5 days to help cover the costs of alternative accommodations.

## Atlas Travel\* Quality Benefits

### Acute Onset of Pre-Existing Conditions

Atlas Travel provides a limited benefit up to the medical coverage lifetime maximum for eligible medical expenses. If you are younger than 70, you may be covered for an acute onset of a pre-existing condition. This also includes up to a \$25,000 lifetime maximum for emergency medical evacuation.

An acute onset of a \*\*pre-existing condition is a sudden and unexpected outbreak or recurrence of a pre-existing condition which occurs spontaneously and without advance warning either in the form of physician recommendations or symptoms. Treatment must be

obtained within 24 hours of the sudden and unexpected outbreak or recurrence. Chronic and congenital conditions are excluded from coverage.

### Hospitalization and Outpatient Treatment

If a covered illness or injury requires hospitalization, the plan provides coverage for eligible costs associated with hospitalization, including intensive care unit and outpatient treatment.

### Sports Coverage

Atlas Travel includes coverage for eligible injuries and illnesses that could occur while participating in many popular vacation sports- skiing, snowboarding, snorkeling, water skiing, and others- at no additional cost. Certain extreme sports are excluded from coverage.

### Complications of Pregnancy

Atlas Travel offers coverage for complications of pregnancy during the first 26 weeks of gestation.

### Crisis Response

Atlas Travel offers up to \$10,000 (or up to \$100,000 if \*\*additional coverage is selected) to offset costs associated with kidnapping, such as ransom, crisis response expenses, and loss of personal belongings. This benefit includes access to the services of Unity Crisis Group for advice, coordination with law enforcement, and negotiations during a kidnapping.

### Personal Liability

Atlas Travel offers up to \$10,000 (or up to \$100,000 if additional coverage is selected) to offset the following types of court-entered eligible judgments or approved settlements incurred by the member:

- Third-party injury;
- Damage/loss of a third party's personal property;
- Damage/loss of a related third party's personal property.

\*The description of coverage in these pages is for informational purposes only. Actual coverage will vary based the terms and conditions of the policy issued. The information described herein does not amend or otherwise affect the terms and conditions of any insurance policy issued by Tokio Marine HCC-MIS Group or its affiliates. In the event that a policy is inconsistent with the information described herein, the language of the policy will take precedence.

\*\*A pre-existing condition is any condition:

- for which medical advice, diagnosis, care, or treatment was recommended or received within 2 years prior to your effective date of coverage
- which would cause a reasonably prudent person to seek medical advice, diagnosis, care, or treatment within 2 years prior to your effective date of coverage
- that existed (with reasonable medical certainty) with 2 years prior to your effective date of coverage, whether or not it was known to you

\*\*\*A buy-up of an additional \$90,000 is available for selection, which includes the added benefit of a \$10,000 maximum for natural disaster evacuation.

# Enrollment and Filing a Claim

## Home Country Coverage

### Incidental Home Country Coverage

For individuals with U.S. as home country, for every three month period during which the Member is covered hereunder, medical expenses incurred in the U.S. are covered up to a maximum of 15 days for any three month period.

For individuals with a home country other than the U.S., for every three month period during which the Member is covered hereunder, medical expenses incurred in the member's home country are covered up to a maximum of 30 days for any three month period.

Any benefit accrued under a single 3 month period does not accumulate to another period. Failure of the member

to continue his or her international trip or the members return to their home country for the sole purpose of obtaining treatment for an illness or injury that began while traveling shall void any home country coverage provided under the terms of this agreement.

### Benefit Period Medical Coverage

While the certificate is in effect, the benefit period does not apply. Upon termination of the certificate, underwriters will pay eligible medical expenses, as defined herein, for up to 90 days beginning on the first day of diagnosis or treatment of a covered injury or illness while the member is outside his or her home country and while the certificate was in effect. The benefit period applies only to eligible medical expenses related to the injury or illness that began while the certificate was in effect.

### Enrollment

You may access the online quoting and purchasing system or you may complete an application and mail or fax along with your payment to your agent or to Tokio Marine HCC- MIS Group.

### Claim Filing

You may file a claim by submitting a claimant's statement and authorization form. This form may be found online, in ClientZone, or you may contact Tokio Marine HCC-MIS Group for a copy. Complete the form, attach all itemized invoices and payment receipts, and send them to the address shown on the claimant's statement.

Patient Protection and Affordable Care Act ("PPACA"): This insurance is not subject to, and does not provide certain insurance benefits required by the United States' Patient Protection and Affordable Care Act ("PPACA"). PPACA requires certain US citizens or US residents to obtain PPACA compliant health insurance, or "minimum essential coverage." PPACA also requires certain employers to offer PPACA compliant insurance coverage to their employees. Tax penalties may be imposed on U.S. residents or citizens who do not maintain minimum essential coverage, and on certain employers who do not offer PPACA compliant insurance coverage to their employees. In some cases, certain individuals may be deemed to have minimum essential coverage under PPACA even if their insurance coverage does not provide all of the benefits required by PPACA. You should consult your attorney or tax professional to determine whether this policy meets any obligations you may have under PPACA.

Atlas Travel is underwritten by Lloyd's, London. Tokio Marine HCC - Medical Insurance Services Group (MIS Group) is a service company and a member of the Tokio Marine HCC group of companies. Tokio Marine HCC - MIS Group has authority to enter into contracts of insurance on behalf of the Lloyd's underwriting members of Lloyd's Syndicate 4141, which is managed by HCC Underwriting Agency Ltd.





## Outstanding Customer Service

### Client Zone and World Service Center

Tokio Marine HCC- MIS Group Client Zone is an online account management and resource tool available to:

- Extend coverage and reprint ID cards
- Obtain details about claim filing and downloading forms
- Locate providers within the PPO Network

### Log In to Client Zone at:

<https://zone.hccmis.com/clientzone>

If you prefer to speak to a professional service representative, contact the Tokio Marine HCC- MIS Group World Service Center by calling toll-free from various countries or by calling collect. The World Service Center can provide service in many different languages.

### Worldwide Travel and Medical Assistance

Atlas Travel® includes valuable travel and medical assistance services, which are available 7 days a week, 365 days a year. Contact Tokio Marine HCC- MIS Group to access any of these services.

## Pre-Trip Destination Information

Up-to-date information regarding required vaccinations, health risks, travel restrictions, and weather conditions specific to the destination country.

### Medical Monitoring

Consultations with attending medical professionals during hospitalization and establishment of a single point-of-contact for family members to receive ongoing updates regarding medical status.

### Provider Referrals

Contact information for Western-style medical facilities, medical and dental practices, and pharmacies in the destination country.

### Travel Document Replacement

Assistance with obtaining replacement passports, birth certificates, visas, airline tickets, and other travel-related documents.

### Lost Luggage Assistance

Tracking service to assist in locating luggage or other items lost in transit.

## Other Travel Assistance Services\*

- Prescription Drug Replacement
- Emergency Travel Arrangements
- Dispatch of Physician
- Translation Assistance
- Credit Card /Traveler's Check Replacement

\*For a complete list of available assistance services or for more information, please contact Tokio Marine HCC - MIS Group. Travel and Medical Assistance Services are not insurance benefits. Any travel or medical assistance service provided is not a guarantee of any insurance benefit.

# Contact Us

## Good Neighbor Insurance

690 East Warner Road, Suite 117, Gilbert, Arizona 85296 USA

Toll Free: 866-636-9100 Phone: 480-813-9100 Fax: 480-813-9930

Website: [www.gninsurance.com](http://www.gninsurance.com) Email: [info@gninsurance.com](mailto:info@gninsurance.com)

A member of the Tokio Marine HCC group of companies

To Be a *Good Company*

## Atlas International® - For travel outside of the U.S.

**\$0 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.96	1.27	1.49	1.60	1.63	1.66
30-39	1.13	1.54	1.73	1.84	1.91	1.94
40-49	1.92	2.33	2.57	2.69	2.74	2.80
50-59	3.30	3.72	4.04	4.19	4.28	4.37
60-64	4.05	4.44	4.87	5.09	5.15	5.25
65-69	4.81	5.84	6.43	6.81	6.87	7.01
70-79	7.05	8.57	9.79	N/A	N/A	N/A
80+*	12.65	N/A	N/A	N/A	N/A	N/A

**\$1000 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.61	0.81	0.94	1.03	1.04	1.06
30-39	0.72	0.99	1.10	1.18	1.23	1.25
40-49	1.22	1.48	1.64	1.73	1.76	1.79
50-59	2.10	2.38	2.59	2.69	2.74	2.80
60-64	2.59	2.84	3.12	3.25	3.30	3.36
65-69	3.07	3.73	4.12	4.36	4.39	4.48
70-79	4.51	5.47	6.33	N/A	N/A	N/A
80+*	8.09	N/A	N/A	N/A	N/A	N/A

**\$100 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.84	1.12	1.30	1.41	1.43	1.46
30-39	1.00	1.37	1.53	1.63	1.67	1.70
40-49	1.68	2.05	2.26	2.37	2.41	2.46
50-59	2.90	3.28	3.56	3.70	3.77	3.84
60-64	3.56	3.91	4.29	4.48	4.53	4.62
65-69	4.24	5.13	5.66	5.98	6.05	6.16
70-79	6.22	7.53	8.61	N/A	N/A	N/A
80+*	11.14	N/A	N/A	N/A	N/A	N/A

**\$2500 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.53	0.71	0.83	0.90	0.91	0.92
30-39	0.63	0.87	0.97	1.04	1.07	1.09
40-49	1.07	1.31	1.43	1.50	1.53	1.56
50-59	1.84	2.08	2.27	2.35	2.39	2.44
60-64	2.27	2.48	2.73	2.85	2.88	2.94
65-69	2.69	3.27	3.61	3.81	3.84	3.92
70-79	3.95	4.79	5.63	N/A	N/A	N/A
80+*	7.08	N/A	N/A	N/A	N/A	N/A

**\$250 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.77	1.02	1.19	1.28	1.30	1.33
30-39	0.91	1.24	1.39	1.47	1.53	1.56
40-49	1.53	1.86	2.06	2.15	2.19	2.24
50-59	2.63	2.98	3.24	3.36	3.42	3.49
60-64	3.25	3.55	3.89	4.08	4.12	4.20
65-69	3.85	4.67	5.14	5.45	5.50	5.60
70-79	5.65	6.86	7.86	N/A	N/A	N/A
80+*	10.11	N/A	N/A	N/A	N/A	N/A

**\$5000 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.44	0.61	0.73	0.79	0.81	0.84
30-39	0.53	0.75	0.86	0.92	0.96	0.99
40-49	0.89	1.13	1.27	1.32	1.37	1.42
50-59	1.53	1.80	2.01	2.07	2.14	2.22
60-64	1.89	2.15	2.42	2.51	2.58	2.68
65-69	2.24	2.83	3.19	3.35	3.44	3.57
70-79	3.29	4.14	4.98	N/A	N/A	N/A
80+*	5.90	N/A	N/A	N/A	N/A	N/A

**\$500 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.69	0.91	1.06	1.14	1.17	1.19
30-39	0.82	1.12	1.24	1.33	1.38	1.40
40-49	1.38	1.67	1.85	1.94	1.98	2.02
50-59	2.38	2.68	2.92	3.02	3.08	3.14
60-64	2.92	3.19	3.50	3.66	3.71	3.78
65-69	3.46	4.19	4.64	4.90	4.95	5.05
70-79	5.08	6.15	7.07	N/A	N/A	N/A
80+*	9.10	N/A	N/A	N/A	N/A	N/A

Rates are shown in US dollars and are effective 04/01/2018. Rates are subject to change.  
 Charges will include Surplus Lines taxes and fees when applicable.

\*\$10,000 Maximum Limit for age 80 and over.

If for any reason you wish to cancel your policy, you must submit your cancellation request in writing to Tokio Marine HCC Medical Insurance Services Group in order to receive a refund or premium.

Cancellation requests received after the policy effective date will be subject to the following conditions:

- 1) a \$25 cancellation fee will apply; and
- 2) only the unused portion of the plan cost will be refunded; and
- 3) only members who have no claims are eligible for premium refund.

## Atlas America® - For Non-U.S. Citizens traveling to the U.S.

**\$0 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	1.64	2.10	2.38	2.99	3.24	3.31
30-39	2.24	3.10	3.69	3.93	4.15	4.23
40-49	3.32	4.14	4.76	5.63	6.16	6.28
50-59	4.94	6.23	7.86	8.89	9.33	9.51
60-64	5.76	7.56	10.25	11.14	11.67	11.90
65-69	6.52	8.35	11.45	12.40	12.96	13.21
70-79	9.40	12.04	13.75	N/A	N/A	N/A
80+*	14.97	N/A	N/A	N/A	N/A	N/A

**\$1,000 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	1.05	1.35	1.52	1.91	2.08	2.12
30-39	1.43	1.99	2.35	2.52	2.66	2.71
40-49	2.11	2.65	3.04	3.60	3.94	4.02
50-59	3.15	3.98	5.03	5.68	5.96	6.08
60-64	3.68	4.84	6.56	7.13	7.47	7.61
65-69	4.17	5.34	7.32	7.93	8.29	8.45
70-79	6.01	7.70	8.91	N/A	N/A	N/A
80+*	9.57	N/A	N/A	N/A	N/A	N/A

**\$100 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	1.45	1.85	2.09	2.64	2.85	2.91
30-39	1.97	2.74	3.25	3.47	3.65	3.72
40-49	2.92	3.64	4.19	4.96	5.42	5.52
50-59	4.35	5.47	6.92	7.82	8.21	8.36
60-64	5.06	6.64	9.02	9.81	10.26	10.46
65-69	5.74	7.35	10.07	10.91	11.40	11.63
70-79	8.27	10.59	12.11	N/A	N/A	N/A
80+*	13.17	N/A	N/A	N/A	N/A	N/A

**\$250 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.92	1.17	1.33	1.68	1.81	1.85
30-39	1.25	1.75	2.07	2.21	2.33	2.37
40-49	1.86	2.32	2.66	3.15	3.45	3.52
50-59	2.76	3.48	4.40	4.98	5.22	5.32
60-64	3.23	4.24	5.74	6.24	6.53	6.66
65-69	3.65	4.68	6.41	6.94	7.25	7.40
70-79	5.27	6.75	7.93	N/A	N/A	N/A
80+*	8.38	N/A	N/A	N/A	N/A	N/A

**\$250 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	1.32	1.68	1.90	2.39	2.60	2.65
30-39	1.79	2.48	2.95	3.15	3.32	3.39
40-49	2.65	3.32	3.81	4.50	4.92	5.02
50-59	3.95	4.98	6.29	7.11	7.47	7.61
60-64	4.61	6.04	8.20	8.91	9.33	9.51
65-69	5.22	6.68	9.15	9.91	10.37	10.57
70-79	7.52	9.62	11.02	N/A	N/A	N/A
80+*	11.97	N/A	N/A	N/A	N/A	N/A

**\$500 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	0.77	1.01	1.18	1.50	1.62	1.66
30-39	1.04	1.51	1.83	1.97	2.09	2.12
40-49	1.55	2.01	2.35	2.81	3.09	3.15
50-59	2.30	3.01	3.89	4.44	4.67	4.77
60-64	2.69	3.67	5.08	5.57	5.84	5.97
65-69	3.04	4.05	5.67	6.19	6.49	6.63
70-79	4.40	5.84	7.02	N/A	N/A	N/A
80+*	7.00	N/A	N/A	N/A	N/A	N/A

**\$500 Deductible**

Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1 Million	\$2 Million
Age	Daily	Daily	Daily	Daily	Daily	Daily
14d-29y	1.18	1.51	1.71	2.16	2.34	2.38
30-39	1.60	2.24	2.65	2.82	3.00	3.05
40-49	2.39	2.98	3.43	4.05	4.44	4.52
50-59	3.55	4.48	5.66	6.39	6.72	6.85
60-64	4.14	5.44	7.38	8.02	8.40	8.57
65-69	4.70	6.01	8.24	8.93	9.33	9.51
70-79	6.77	8.67	9.97	N/A	N/A	N/A
80+*	10.78	N/A	N/A	N/A	N/A	N/A

Rates are shown in US dollars and are effective 04/01/2018. Rates are subject to change.

Charges will include Surplus Lines taxes and fees when applicable.

\*\$10,000 Maximum Limit for age 80 and over.

If for any reason you wish to cancel your policy, you must submit your cancellation request in writing to Tokio Marine HCC Medical Insurance Services Group in order to receive a refund or premium.

Cancellation requests received after the policy effective date will be subject to the following conditions:

- 1) a \$25 cancellation fee will apply; and
- 2) only the unused portion of the plan cost will be refunded; and
- 3) only members who have no claims are eligible for premium refund.



**ATLAS TRAVEL® APPLICATION**  
**Tokio Marine HCC - Medical Insurance Services Group**  
**Lloyd's Coverholder**

Please print clearly and provide complete information.

Last Name		First Name		MI
Complete Mailing Address and Telephone #:		Home Country:		Requested Effective Date (mm/dd/yy):
		Countries to be visited:		Date of Return (to Home Country):
E-mail Address (required for Extension of Coverage notification):		Maximum Coverage Limit Selected:		
Beneficiary (include relationship to Applicant):		Maximum Deductible Selected:		

Please complete for <b>all</b> individuals to be covered. List applicable rates for the Maximum Limit Option Selected.					Column <b>R</b>
#	Last Name, First Name as it should appear on ID Card	Birth Date (mm/dd/yy)	Gender	Citizenship	Daily Rate*
1					
2					
3					
4					

\***FLORIDA SURPLUS (Tax):** Traveling to FL to work? Yes / No (If Yes, multiply individual rates & Buy-Ups\*\* by 1.051 x # days)

<b>A</b>	Trip Duration (# of Days)	<b>A</b>
<b>B</b>	Subtotal (add Column <b>R</b> , #1 - #4 above) *(If FL, FL Tax applies)	<b>B</b>
<b>C</b>	<b>ADD BUY-UPS?</b> <input type="checkbox"/> Accidental Death & Dismemberment <input type="checkbox"/> Crisis Response <input type="checkbox"/> Personal Liability ** (If FL, FL Tax applies)	<b>C</b>
<b>D</b>	<b>TOTAL Premium Due</b> (multiply Lines B and C by Line A) *(If FL, FL Tax applies) (Then add Lines B & C for Total for Line D)	<b>D</b>
<b>E</b>	<b>OPTIONAL Express Delivery Charge:</b> Add \$20.00 for US Delivery, \$30.00 Non-US Delivery	<b>E</b>
<b>F</b>	<b>TOTAL AMOUNT DUE</b> (Add above Lines D and E together)	<b>F</b>

Form of Payment: <input type="checkbox"/> Credit Card <input type="checkbox"/> Check/Money Order	Name as it appears on card:
Credit Card #:	Expiration Date (mm/yy):
Complete Billing Address (include daytime phone #):	
Signature:	
<b>Payment by Credit Card:</b> By signing above, the cardholder authorizes Tokio Marine HCC - Medical Insurance Services Group to debit his or her Discover, VISA, MasterCard or American Express account for the amount specified above. Please submit this completed Application by mail or by fax to your Agent or to Tokio Marine HCC - MIS Group. Tokio Marine HCC - Medical Insurance Services Group 251 North Illinois Street, Suite 600 Indianapolis, IN 46204	Checks and Money Orders should be made payable to HCC Medical Insurance Services. Please send your Check or Money Order along with this Application via mail or courier to:  HCC Medical Insurance Services 15748 Collection Center Dr. Chicago, IL 60693-0157

Total payment for the initial term of coverage requested must be entirely paid in U.S. dollars at time of application or prior to the Effective Date of Coverage. Coverage purchased by credit card is subject to validation and acceptance by the credit card company.

I hereby apply for membership in the Atlas/International Citizen Group Insurance Trust, Hamilton, Bermuda, and for the insurance provided to members by Lloyd's. I understand that the insurance applied for is not a general health insurance policy, but is intended for use in the event of a sudden and unexpected event while traveling outside my Home Country. I understand that my insurance terminates upon my return to my Home Country unless I qualify for a Benefit Period or Home Country Coverage. I understand this insurance contains a Pre-existing Condition exclusion and other restrictions and exclusions. I understand that, prior to my current coverage expiration date, I can visit the Tokio Marine HCC – MIS Group Client Zone for transaction instructions regarding policy extensions and/or renewal eligibility. I understand that the information contained herein is a summary of the Master Policy and that I may obtain a complete copy of the Master Policy upon request to Tokio Marine HCC - Medical Insurance Services Group. I understand that Lloyd's, as underwriter of the plan, is solely liable for the coverage and benefits provided under the insurance. I understand that Lloyd's operates as an approved, non-admitted insurer in all states of the United States except Illinois and Kentucky where they are admitted. As such, claims under this insurance may not be made against any state guaranty fund. I understand and agree that the insurance agent/broker, if any, assisting with this Application is a representative of the Applicant. Licensed insurance brokers and independent agents are compensated through commissions calculated as a percentage of premium for the purchase, renewal, placement or servicing of insurance coverage. Additionally, some licensed producers may also receive bonuses and incentive trips or prizes associated with sales contests based on sales criteria, such as the overall sales volume or for the percentage of completed sales through Tokio Marine HCC - Medical Insurance Services Group. Please contact your insurance broker to obtain information about the specific compensation they may receive in connection with the issuance of your coverage. If signed by a representative of the Applicant, the undersigned warrants his/her capacity to so act. If signed as guardian or proxy of the Applicant, the undersigned warrants his/her capacity to so act. By acceptance of coverage and/or submission of any claim for benefits, the Applicant ratifies the authority of the signer to so act and bind the Applicant.

Signature of Applicant:	Date of Signature:
Signature of Spouse:	Date of Signature:

**For more information or for assistance completing this application, please contact:**

**Good Neighbor Insurance**

Producer number: 9870SS

[www.gninsurance.com](http://www.gninsurance.com) | p. 480-813-9100 | e. [info@gninsurance.com](mailto:info@gninsurance.com)