# **Business Travel Accident Insurance Plan**

# Accidents happen – help your family prepare.

#### When You Are Covered

Class(es) I, II, III, IV, VII and VIII

<u>Business Only</u> - while traveling on the Business of the Policyholder, including a Sojourn or Personal Deviation taken during the course of the Trip.

Policyholder Aircraft - while operating as a Pilot or Crew member, or riding as a Passenger in any Policyholder owned or leased aircraft.

<u>24 Hour Violent Crime On A Trip</u> - Business Only - while traveling on the Business of the Policyholder, including a Sojourn or Personal Deviation taken during the course of the Trip.

<u>Extraordinary Commuting</u> - commuting by automobile or other means of transportation, but only when it is necessary to use such means of transportation because of discontinuance of service due to strike or major breakdown of one or more public transportation systems.

On-Premise Bomb Scare – as a result of a bomb scare which is directed at the Policyholder or its property or assets.

<u>Hijacking- Business Only</u> - due as a result of a hijacking of any land, water or air conveyance, except a private automobile, while on the Business of the Policyholder.

<u>Enhanced War Risk - Business Only</u> - extends coverage as a result of a declared or undeclared war worldwide. Coverage is not extended in the United States of America or the Insured Person's country of permanent residence. Advance notice must be reported to the Policyholder for travel into the following countries: Afghanistan, Pakistan, Iraq, Russia, Ukraine (as recognized by the United Nations), and Belarus.

#### Class(es) V and VI

Policyholder Aircraft - while operating as a Pilot or Crew member, or riding as a Passenger in any Policyholder owned or leased aircraft.

<u>Enhanced War Risk - Business Only</u> - extends coverage as a result of a declared or undeclared war worldwide. Coverage is not extended in the United States of America or the Insured Person's country of permanent residence. Advance notice must be reported to the Policyholder for travel into the following countries: Afghanistan, Pakistan, Iraq, Russia, Ukraine (as recognized by the United Nations), and Belarus.

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

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

# Eligible Persons and Principal Sum

#### Class Description of Class

# All active, regular full-time Employees (who are salaried or management payroll level), and all Salaried, rehired Retiree Employees, of the Policyholder and its Affiliates and Subsidiaries, both as defined by the Policyholder, who are not in any other Class, but excluding any travel to, or within the borders of, Russia, Belarus, or Ukraine (as recognized by the United Nations), unless the Company is notified and approves, in accordance with the Data Furnished by Policyholder provision of the Policy.

#### **Principal Sum**

Three times the Insured's Annual Salary, subject to a maximum of \$250,000. In the event the Insured's Annual Salary is not already a multiple of \$1,000, the Annual Salary will be rounded up to the next highest \$1,000, and then multiplied to calculate the total Principal Sum Amount.

All Non-Employee Members of the Policyholder and its Affiliates and Subsidiaries' Board of Directors, who are not in any other Class, but excluding any travel to, or within the borders of, Russia, Belarus, or Ukraine (as recognized by the United Nations), unless the Company is notified and approves, in accordance with the Data Furnished by Policyholder provision of the Policy.

\$250,000

III	travel to, or within the borders of, Russia, Belarus, or Ukraine (as recognized by the United Nations), unless the Company is notified and approves, in accordance with	Three times the Insured's Annual Salary, subject to a maximum of \$250,000. In the event the Insured's Annual Salary is not already a multiple of \$1,000, the Annual Salary will be rounded up to the next highest \$1,000, and then multiplied to
IV	excluding any travel to, or within the borders of, Russia, Belarus, or Ukraine (as	calculate the total Principal Sum Amount.  Three times the Insured's Annual Salary, subject to a maximum of \$250,000. In the event the Insured's Annual Salary is not already a multiple of \$1,000, the Annual Salary will be rounded up to the next highest \$1,000, and then multiplied to calculate the total Principal Sum Amount.
V	All Eligible Spouses of Class I, II, III or IV Insured, traveling at the authorization and on the business of the Policyholder and its Affiliates and Subsidiaries, who are not in any other Class, but excluding any travel to, or within the borders of, Russia, Belarus, or Ukraine (as recognized by the United Nations), unless the Company is notified and approves, in accordance with the Data Furnished by Policyholder provision of the Policy.	100% of the applicable Class I, II, III, or IV Insured's Principal Sum, subject to a
VI	All Eligible Dependent Children of Class I, II, III or IV Insured, traveling at the authorization and on the business of the Policyholder and its Affiliates and Subsidiaries, who are not in any other Class, but excluding any travel to, or within the borders of, Russia, Belarus, or Ukraine (as recognized by the United Nations), unless the Company is notified and approves, in accordance with the Data Furnished by Policyholder provision of the Policy.	
VII	All active, full-time Global Mining bargained Employees of the Policyholder and its Affiliates and Subsidiaries, who are at the South Milwaukee location or the Denison location, who are not in any other Class, but excluding any travel to, or within the borders of, Russia, Belarus, or Ukraine (as recognized by the United Nations), unless the Company is notified and approves, in accordance with the Data Furnished by Policyholder provision of the Policy.	\$55,000
VIII		Three times the Insured's Annual Salary, subject to a maximum of \$250,000. In the event the Insured's Annual Salary is not already a multiple of \$1,000, the Annual Salary will be rounded up to the next highest \$1,000, and then multiplied to calculate the total Principal Sum Amount.

<sup>&</sup>quot;Annual Salary" means the Insured's base annual salary exclusive of overtime, bonuses, tips, commission, and special compensation.

The Principal Sum amount payable for a loss will be reduced if an Insured Person is age 70 or older on the date of the accident causing the loss with respect to any Benefit provided by the Policy where the amount payable for the loss is determined as a percentage of his/her Principal Sum. The amount payable for the Insured Person's loss under that Benefit is a percentage of the amount that would otherwise be payable. Please refer to the Policy for specific details.



Caterpillar Inc. GTP 0009116979-B

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

## **Benefits**

#### **Accidental Death, Dismemberment and Paralysis**

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

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

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

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

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

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

### **Attendor Benefit**

If a Repatriation of Remains benefit becomes payable under the Policy, the Company will also pay for expenses reasonably incurred for one person (referred to as the Attendor) to accompany the deceased Insured Person's remains from the place where death occurred to the deceased Insured Person's place of primary residence, but not to exceed the cost of one round-trip economy airfare ticket. The Company will also pay for the Attendor's lodging and meals for up to 7 days, but (a) only while the Attendor is away from his or her place of primary residence in connection with accompanying the deceased Insured Person's remains as described above, and (b) not to exceed \$300 per day for lodging and meals. Travel Guard Group, Inc. must make all arrangements and must authorize all expenses in advance for this benefit to be payable.

#### **Bedside Visitor Benefit**

If the Insured Person is confined to a Hospital or other medical facility for 3 days or more due to an Illness, which begins while coverage under the Policy is in force, or Injury; the Company will pay for expenses reasonably incurred to bring one person chosen by the Insured Person to and from the Hospital or other medical facility where the Insured Person is confined if the place of confinement is outside a 100-mile radius from the Insured Person's place of primary residence; but not to exceed the cost of one round-trip economy airfare ticket. The Company will also pay for lodging and meals for up to 10 days for such person in the area of such place of confinement, but (a) only while the Insured Person remains so confined, and (b) not to exceed \$200 per day for lodging and \$100 per day for meals. Travel Guard Group, Inc. must make all arrangements and must authorize all expenses in advance for this benefit to be payable.

# Bereavement and Trauma Counseling Benefit

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

# Carjacking Benefit

The Company will pay a benefit when the Insured Person suffers one or more losses for which benefits are payable under the Accidental Death Benefit, Accidental Dismemberment and Paralysis Benefit, Coma Benefit, or Loss of Use Benefit as a result of a Carjacking of an Automobile while the Insured Person is operating, or riding as a passenger in, (including getting in or out of) such Automobile. The amount payable is the lesser of: 1) \$25,000; or 2) 10% of the largest benefit payable under any one of the Benefits specified above due to the Carjacking. Only one benefit is payable for all losses as a result of the same Carjacking.

#### Coma Benefit

If Injury renders an Insured Person Comatose within 365 days of the date of the accident that caused the Injury, and if the Coma continues for a period of 30 consecutive days, the Company will pay a monthly benefit of 1% of the Insured Person's Principal Sum. This benefit is payable monthly for 11 months if the Insured Person remains Comatose due to that Injury. If the Insured Person remains Comatose through the 11th month, any residual portion of that Insured Person's Principal Sum will become payable on the first day of the 12th month during which the Insured Person remains Comatose. If the Insured Person ceases to be Comatose due to the Injury any time during the first 11 months, the monthly benefit will end. No benefit is provided for the first 30 days of Coma. No benefit is payable after the date the total amount of monthly Coma benefits paid for all Injuries caused by the same accident equals 100% of the Principal Sum. The Company will pay benefits calculated at a rate of 1/30th of the monthly benefit for each day for which the Company is liable when the Insured Person is Comatose for less than a full month. Only one benefit is provided for any one month of Coma, regardless of the number of Injuries causing the Coma.

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

# Day Care Benefit (Applicable to Classes I, II, III, IV, VII, VIII)

Helps pay covered day care expenses equal to the least of: 1) the actual cost of care; 2) 6% of the Insured's Principal Sum; or 3) \$6,000 on behalf of Eligible Dependent Children under age 13, who are enrolled or who are subsequently enrolled in a Day Care Center within 365 days of the Insured's covered accidental death. The benefit is not payable for any period of enrollment in a Day Care Center before the date of the accident that caused the Insured Person's death. The benefit is not payable for any period of enrollment after the earlier of: (1) the date the Child reaches 13 years of age; or (2) the date four (4) years after the later of the date of the Insured's death or the date the Child first enrolls in a Day Care Center.

# Elder Survivor Benefit (Only applicable to Insureds with a Principal Sum amount is equal to, or higher than, \$100,000 USD and to Classes I, II, III, IV)

If an Insured suffers accidental death such that an Accidental Death benefit is payable under the Policy, the Company will pay a benefit to or on behalf of any Elder Dependent of the Insured on the date of the accident causing the Insured's death and on the date of the Insured's death if such Elder Dependent survives after the date of the Insured's death. The benefit payable is a lump sum benefit of \$10,000.

# Elder Survivor Benefit (Only applicable to Insureds with a Principal Sum amount that is less than \$100,000 USD and to Classes I, III, IV, VII, VIII)

If an Insured suffers accidental death such that an Accidental Death benefit is payable under the Policy, the Company will pay a benefit to or on behalf of any Elder Dependent of the Insured on the date of the accident causing the Insured's death and on the date of the Insured's death if such Elder Dependent survives after the date of the Insured's death. The benefit payable is a lump sum benefit of 10%.

# **Emergency Evacuation Benefit**

Pays for Covered Emergency Evacuation Expenses if an Insured Person suffers an Injury or Emergency Sickness while he or she is at least 100 miles from home and the Injury or Emergency Sickness warrants a medically necessary emergency evacuation, up to a maximum of \$1,500,000. All arrangements must be made through Travel Guard Group, Inc.

# Family Travel Benefit

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

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

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

# Family Income Benefit (Applicable to Classes I, II, III, IV, VII, VIII)

If an Insured suffers accidental death such that an Accidental Death benefit is payable under the Policy, the Company will pay a monthly benefit to or on behalf of any Qualified Dependent of the Insured who met the definition of Qualified Dependent on the date of the accident causing the Insured's death as well as on the date of the Insured's death and who survives after the date of the Insured's death. The monthly benefit will be equal to 3% of the Insured's Principal Sum on the date of the accident causing death and will be paid for 12 consecutive months or until the death of the last surviving Qualified Dependent, whichever occurs first.

The monthly benefit will be payable to the surviving Qualified Spouse, if any, otherwise in equal shares to the surviving Qualified Children. Only one monthly benefit will be payable each month, regardless of the number of surviving Qualified Dependents.

## Home Alteration and Vehicle Modification Benefit

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

#### Loss of Use Benefit

If an Injury to the Insured Person results with 365 days of the date of the accident that caused the Injury in any one of the Permanent Total Losses of Use specified below and if that loss has continued for 12 consecutive months (12 months requirement waived if solely due to complete and irreversible paralysis), the Company will pay the percentage of the Principal Sum shown for that loss:

Permanent Total Loss of Use of Percentage of Principal Sum

Both arms and both legs	100%
Both arms or both legs	100%
One arm and one leg	100%
One arm or one leg	25%

# **Out-of-Country Medical Expense Benefit**

The Out of Country Medical Expense benefit can help pay for the Usual and Customary Charges for Covered Medical Services incurred by an Insured Person during the course of any Trip of less than 180 days outside of his or her country of permanent residence and While on the Business of the Policyholder, up to a benefit maximum of \$250,000 per Insured Person for an Injury or Sickness that requires Physician treatment, and within 52 weeks after the date of the accident causing the Injury or the onset of the Sickness.

# Out-of-Country Medical Expense Benefit Exclusions

In addition to the Exclusions in the General Policy Exclusions section below, Out of Country Medical Expense benefits are not payable for, and Usual and Customary Charges for Covered Medical Services do not include, any expense for or resulting from:

- 1. repair or replacement of existing artificial limbs, artificial eyes or other prosthetic appliances or rental of existing Durable Medical Equipment unless for the purpose of modifying the item because the Injury or Sickness has caused further impairment in the underlying bodily condition.
- 2. new, or repair or replacement of, dentures, bridges, dental implants, dental bands or braces or other dental appliances, crowns, caps, inlays or onlays, fillings or any other treatment of the teeth or gums, except for repair or replacement of sound natural teeth damaged or lost as a result of the Injury or Sickness not to exceed \$500 per tooth per accident.
- 3. new eye glasses or contact lenses or eye examinations related to the correction of vision or related to the fitting of glasses or contact lenses, unless the Injury or Sickness has caused impairment of sight; or repair or replacement of existing eyeglasses or contact lenses unless for the purpose of modifying the item because the Injury or Sickness has caused further impairment of sight.
- 4. new hearing aids or hearing examinations unless the Injury or Sickness has caused impairment of hearing; or repair or replacement of existing hearing aids unless for the purpose of modifying the item because the Injury or Sickness has caused further impairment of hearing.
- 5. rental of Durable Medical Equipment where the total rental expense exceeds the usual purchase expense for similar equipment in the locality where the expense is incurred (but if, in the Company's sole judgment, Out of Country Medical Benefits for rental of Durable Medical Equipment are expected to exceed the usual purchase expense for similar equipment in the locality where the expense is incurred, the Company may, but is not required to, choose to consider such purchase expense as a Usual and Customary Covered Medical Expense in lieu of such rental expense).
- 6. personal comfort or convenience items, such as but not limited to Hospital telephone charges, television rental, or guest meals.

# Permanent Total Disability Benefit

#### (Not Applicable to Insureds Age 70 or Older on the Date of the Accident)

If, as a result of an Injury, the Insured Person is rendered Permanently Totally Disabled within 365 days of the accident that caused the Injury, the Company will pay 100% of the Principal Sum at the end of 12 consecutive months of such Permanent Total Disability. Permanently Totally Disabled/Permanent Total Disability means the Insured Person is permanently unable to perform the material and substantial duties of any occupation for which he or she is qualified by reason of education, experience or training. However, with respect to an Insured Person for whom an occupational definition of Permanently Totally Disabled/Permanent Total Disability is not appropriate, Permanently Totally Disabled/Permanent Total Disability means, that the Insured Person is permanently unable to engage in any of the usual activities of a person of like age and sex whose health is comparable to that of the Insured Person immediately prior to the accident.

# Personal Property (Applicable to Classes I, II, III, IV, VII, VIII)

Pays a benefit for the cost of replacement or repair of Personal Property or Business Equipment that is lost, stolen or accidentally damaged up to a maximum amount of \$1,500. The Personal Property or Business Equipment must be accompanying and in the care and custody of the Insured Person while he or she is on the Business of the Policyholder.

#### Additional Benefits:

- 1. Lost keys If, while on a Trip, the keys to the primary residence of an Insured Person are lost or stolen, we will pay for the replacement keys or cost of replacing the lock(s) up to a maximum of \$100.
- 2. **Replacement travel documents** If, while on a Trip, an Insured Person's passport, required visa or other essential travel documents are lost, stolen or damaged, we will pay the Policyholder or the Insured Person up to \$500 for the non-recoverable, reasonable and necessary costs of replacement items for the Trip to continue.
- 3. **Temporary loss of Personal Property or Business Equipment** If the Insured Person's Personal Property or Business Equipment is temporarily lost for more than four hours during a Trip, we will reimburse the reasonable expenses up to \$500 towards the cost of buying essential and reasonable replacement items. If the Personal Property or Business Equipment which has been temporarily lost becomes permanently lost and this results in a claim, we will deduct the amount already paid for temporary loss from the payment.

All loss or damages attributable to theft, vandalism, or loss or damage by Common Carriers must be reported to the local police or appropriate authority within 48 hours after the discovery of the loss and a written acknowledgment of the report obtained and provided to the Company.

# Psychological Therapy Benefit

If Injury to the Insured Person results within 365 days of the date of the accident that caused the Injury, in an accidental dismemberment for which an Accidental Dismemberment benefit is payable under the Policy, the Company will pay covered psychological therapy expenses that are due to the Injury causing the dismemberment. The Covered Psychological Therapy Expenses must be incurred within one year after the date of the accident causing the Injury. The amount payable for this benefit is the lesser of: 1) 10% of the Insured Person's Principal Sum; or 2) \$25,000. Covered Psychological Therapy Expenses do not include any expenses for or resulting from an Injury for which the Insured Person is entitled to benefits paid or payable by Workers' Compensation or other similar law.

#### Rehabilitation Benefit

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

# Repatriation of Remains Benefit

Pays benefits for covered expenses to return the Insured Person's body to his or her home if the Insured Person suffers a covered loss of life due to Injury or Emergency Sickness while at least 100 miles from home, up to a maximum of \$1,500,000. All arrangements must be made through Travel Guard Group, Inc.

# Seat Belt and Air Bag Benefit

Pays a benefit of the lesser of 1) 10% of the Insured Person's Principal Sum; or 2) \$50,000 if the Insured Person is protected by a seat belt when he/she suffers a covered accidental death under the Policy while operating or riding as a passenger in a private passenger automobile. However, if it cannot be determined that a properly fastened, original, factory installed seat belt was being used at the time of the accident causing the Injury, a default benefit of \$2,000 will be payable. If the Insured Person is also protected by an air bag that inflates on impact, an additional benefit of the lesser of 1) 10% of the Principal Sum; or 2) \$50,000 is payable.

# **Security Evacuation Benefit**

Employers have an obligation to help ensure the safety and well-being of employees who travel outside their Home Country on the employer's behalf, including those who require a Security Evacuation. The Security Evacuation benefit pays for eligible expenses up to a \$100,000 benefit maximum to take an Insured Person to the Nearest Place of Safety, as determined by the Designated Security Consultant. Security Evacuation benefits are payable only once per Occurrence. Covered Occurrences may include:

- · Expulsion by appropriate authorities from Host Country or being declared persona non-grata.
- Political or military Occurrences that trigger an Advisory from appropriate authorities involving a Host Country.
- Verified Physical Attack or Verified Threat of Physical Attack from a third party.
- The Insured Person is deemed kidnapped or a Missing Person by local or international authorities and, when found, his or her safety or well-being is in question within 7 days of being found.
- · Natural Disaster (within 7 days of the event).

The benefit also includes options to return to the Insured Person's Host Country if return is safe and permitted, Home Country, or place of assignment within 7 days of Security Evacuation. All arrangements must be made through Travel Guard Group, Inc.

# Security Evacuation Benefit Exclusions

In addition to the General Exclusions, no benefits are payable under the Security Evacuation Expense Benefit for charges, fees or expenses:

- 1. payable under any other provision of the Policy;
- 2. that are recoverable through the Insured Person's employer;
- 3. arising from or attributable to an actual fraudulent, dishonest or criminal act committed or attempted by an Insured Person, acting alone or in collusion with others;
- 4. arising from or attributable to an alleged:
  - a. violation of the laws of the Host Country by an Insured Person; or
  - b. violation of the laws of the Insured Person's Home Country;
  - unless the Designated Security Consultant determines that such allegations were intentionally false, fraudulent and malicious and made solely to achieve a political, propaganda and/or coercive effect upon or at the expense of the Insured Person:
- 5. due to the Insured Person's failure to maintain and possess duly authorized and issued required travel documents and visas;
- 6. arising from an Occurrence which took place in an Excluded Country;
- 7. for repatriation of remains expenses;
- 8. for common or endemic or epidemic diseases or global pandemic disease as defined by the World Health Organization;
- 9. for medical services;
- 10. for monies payable in the form of a ransom if a Missing Person case evolves into a kidnapping;
- 11. arising from or attributable, in whole or in part, to a debt, insolvency, commercial failure, the repossession of any property by any title holder or lien holder or any other financial cause;
- 12. arising from or attributable, in whole or in part to non-compliance by the Insured Person with regard to any obligation specified in a contract or license;
- 13. due to military or political issues if the Insured Person's Security Evacuation request is made more than 7 days after the Appropriate Authority(ies) Advisory was issued.

#### Severe Burn Benefit

If an Insured Person suffers an Injury that is a Severe Burn, the Company will pay a benefit as described below. The benefit payable is based on the Maximum Percentage of Principal Sum shown below with respect to the Specified Body Area shown below:

Specified Body Area	Maximum Percentage of Principal Sum
Face, neck and head	99%
· · · · · · · · · · · · · · · · · · ·	
Hand and forearm below elbow joint (right)	22.5%
Hand and forearm below elbow joint (left)	22.5%
Upper arm below shoulder joint to elbow joint (right)	13.5%
Upper arm below shoulder joint to elbow joint (left)	13.5%
Torso below neck to shoulder joints and hip joints (front)	36%
Torso below neck to shoulder joints and hip joints (back)	36%
Thigh below hip joint to knee joint (right)	9%
Thigh below hip joint to knee joint (left)	9%
Foot and lower leg below knee joint (right)	27%
Foot and lower leg below knee joint (left)	27%

If only one of the Specified Body Areas is severely burned and 100% of the Specified Body Area is Severely burned, 100% of the Maximum Percentage of Principal Sum is payable for that Specified Body Area. If less than 100% of the surface of the Specified Body Area is Severely Burned, the same lesser proportion of the Maximum Percentage of Principal Sum is payable for that Specified Body Area.

If more than one Specified Body Area is severely burned, the maximum amount payable is the lesser of the maximum amount for each Specified Body area or 100% of the Insured Person's Principal Sum.

# Medical And Non-Medical Repatriation Benefit (Applicable to Classes I, II, III, IV, VII, VIII)

#### **Medical Repatriation**

If, while he or she is outside a 100 mile radius from his or her current place of primary residence, an Insured Person who has suffered an Injury or Sickness, has sufficiently recovered to travel, to, at the option of the Insured Person, his or her current place of primary residence or Home Country with minimal risk to his or her health, the Company will pay for Covered Medical Repatriation Expenses reasonably incurred for a non-scheduled commercial air flight or a regularly scheduled air flight with special equipment and/or personnel to return such Insured Person to, at the option of the Insured Person, his or her current place of primary residence or Home Country. Any such Medical Repatriation must be recommended by the attending Physician. Benefits will be payable, up to a maximum of \$100,000 for all Medical Repatriations due to all Injuries from the same accident or all Sicknesses from the same or related causes.

#### **Non-Medical Repatriation**

If, while he or she is outside a 100 mile radius from his or her current place of primary residence, an Insured Person who has suffered an Injury or Sickness, has sufficiently recovered to travel, to, at the option of the Insured Person, his or her current place of primary residence or Home Country with minimal risk to his or her health, the Company will pay for Covered Non-Medical Repatriation Expenses reasonably incurred for a regularly scheduled economy class air flight without special equipment or personnel to return such Insured Person to, at the option of the Insured Person, his or her current place of primary residence or Home Country. Any such Non-Medical Repatriation must be recommended by the attending Physician. Benefits will be payable, up to a maximum of \$100,000 for all Non-Medical Repatriations due to all Injuries from the same accident or all Sicknesses from the same or related causes.

All arrangements must be made through Travel Guard Group, Inc.

### Severe Infectious Disease Outbreak Benefit (Applicable to Classes I, II, III, IV, VII, VIII)

Rider Aggregate Limit: \$100,000 provided by Severe Infectious Disease Evacuation Benefit, Quarantine Benefit.

**Severe Infectious Disease Evacuation Benefit.** If a Severe Infectious Disease Outbreak occurs within a 30 mile radius of the Insured Person's location while he or she is outside a 100 mile radius from his or her current place of primary residence, the Company will pay the cost of Transportation to evacuate the Insured Person from his or her location to the Nearest Place of Safety as determined by Travel Guard Group, Inc.

All arrangements must be made through Travel Guard Group, Inc.

Benefits will also be payable for Transportation and Related Costs within 31 days of the Severe Infectious Disease Evacuation to return the Insured Person to Host country; or Home Country; or where the Insured Person is currently permanently assigned by the Policyholder.

Travel Guard Group, Inc. is not responsible for the availability of Transport services.

**Quarantine Benefit.** If an Insured Person is ordered into Quarantine while outside a 100 mile radius from his or her current place of primary residence, the Company will pay for lodging and meals for up to 14 days for such person in the area of the place of confinement, but: (a) only while the Insured Person remains so confined; and (b) not to exceed \$200 per day for lodging and \$100 per day for meals. **Severe Infectious Disease** – (1) is listed in the World Health Organization's publication of Pandemic and Epidemic Diseases; and (2) has either: a) newly and suddenly appeared in a population or new geographic area where it has never occurred before, or b) been known but was previously absent from a community and is suddenly and rapidly increasing in that community; and (3) for which at the time of the Outbreak a vaccine is not widely available.

# Aggregate Limit of Indemnity Per Accident: \$10,000,000

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

### **Definitions**

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

Civil Union Partner or State Registered Domestic Partner: means a person who has entered into a Civil Union or a State Registered Domestic Partnership.

Civil Union or State Registered Domestic Partnership: means a legal relationship between two persons of either the same or opposite sex; established pursuant to the Illinois Religious Freedom Protection and Civil Union Act under which such relationships have been recognized and under which both persons are entitled to receive the benefits and protections, and be subject to the responsibilities, of spouses.

Insured Dependent Child(ren): The Insured's unmarried children, including natural children from the moment of birth, step or foster children, or adopted children from the moment of placement in the home of the Insured, under age 26 and primarily dependent on the Insured for support and maintenance, 1) for whom premium has been paid; and 2) while covered under the Policy. Any unmarried dependent children of the Insured covered under the Policy before reaching the age limit specified above, who are incapable of self-sustaining employment by reason of mental or physical incapacity, and who are primarily dependent on the Insured for support and maintenance, may continue to be eligible under the Policy beyond that age limit for as long as the Policy is in force, but only if they remain continuously covered under the Policy.

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

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

Insured Person: An Insured or an Insured Dependent.

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

Policyholder: means Caterpillar Inc.

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

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

**Trip:** A trip taken by an Insured which begins when the Insured leaves his or her residence or place of regular employment for the purpose of going on the trip (whichever occurs last), and is deemed to end when the Insured returns from the trip to his or her residence or place of regular employment (whichever occurs first). However, the trip is deemed to exclude any period of time during which the Insured is on an authorized leave of absence or vacation or travel to and from the Insured's place of regular employment. "Trip" does not include the Insured's trip to a location that extends for more than 365 days. Such a trip will be deemed to change the Insured's residence or place of regular employment to the new location.

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

# **General Policy Exclusions**

Unless otherwise provided by the Policy, no coverage shall be provided under the Policy and no payment shall be made for any loss resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following excluded risks:

- 1. Suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury.
- 2. Travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, whether as a Passenger, pilot, operator or crew member, unless specifically provided by the Policy.
- 3. Declared or undeclared war, or any act of declared or undeclared war unless specifically provided by the Policy.
- 4. Sickness, disease, mental incapacity or bodily infirmity.
- 5. Infections, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an injury independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes.
- Full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured Person is not covered due to his or her active duty status will be refunded.) (Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded.)
- 7. The Insured Person being legally intoxicated as defined by the laws of the state in which this Policy is delivered while operating any vehicle or means of transportation or conveyance.
- 8. The Insured Person being voluntarily under the influence of drugs unless taken under the advice of and as specified by a Physician.
- 9. The Insured Person's commission of or attempt to commit a felony.
- 10. The medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity.
- 11. Stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm.

# Limitation on Multiple Benefits

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

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

## **Travel Assistance Services**

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

#### **Highlights**

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

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

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

#### **Contact Information**

For travel emergencies or for more information about your coverage:

#### Phone:

Within the U.S. (Toll-Free): +1 800 388 1243

Outside the U.S. (Collect/Reverse Charge): + 1 817 826 7016

#### Email:

#### assistance@aig.com

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

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

Copyright © 2017 American International Group, Inc. All rights reserved.

