

SCHEDULE OF BENEFITS - Seven Corners

All benefits listed in this Schedule of Benefits are in UNITED STATES Dollar amounts. All Medical and Dental benefits are subject to Deductible and Coinsurance. Also, all benefits except Loss of Checked Baggage are per Person per Period of Coverage.

Benefit or Service	Choice
COVERAGE LENGTH	5 days to 364 days
Coverage Area	Worldwide "Excluding" the United States
	Worldwide "Including" the United States
Medical Maximum Options	Worldwide "Including" the United States as indicated on the attached rate sheets: Ages Available Benefit Maximums 14 days to 69: \$50,000; \$100,000; \$500,000; \$1,000,000; \$2,000,000; \$5,000,000 70-79: \$50,000 Ages 80+: \$15,000 Worldwide "Excluding" the United States as indicated on the attached rate sheets: Ages Available Benefit Maximums 14 days to 69: \$50,000; \$100,000; \$500,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$5,000,000; \$1,000,000; \$2,000,000; \$1,000,000; \$2,000,
Deductible Options (You Pay)	\$0; \$100; \$250; \$500; \$1,000; \$2,500; \$5,000
	Outside the United States: 100% Inside the United States
Coinsurance Options (The plan pays)	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum
Coinsurance Options (The plan pays) Hospital Room & Board	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the
Hospital Room & Board	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum URC Up to Plan Maximum
	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum URC Up to Plan Maximum URC Up to Plan Maximum
Hospital Room & Board Inpatient Hospital Services	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical MaximumOut of PPO Network: 80% of the first \$5,000, then 100% to the Medical MaximumURC Up to Plan MaximumURC Up to Plan MaximumURC Up to Plan MaximumURC Up to Plan Maximum
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical MaximumOut of PPO Network: 80% of the first \$5,000, then 100% to the Medical MaximumURC Up to Plan Maximum
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum URC Up to Plan Maximum
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits Prescription Drugs	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum URC Up to Plan Maximum
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits Prescription Drugs Home Healthcare	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical MaximumOut of PPO Network: 80% of the first \$5,000, then 100% to the Medical MaximumURC Up to Plan MaximumS2,500
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits Prescription Drugs Home Healthcare Local Ambulance Benefit: Hospital Indemnity (Outside the United	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical MaximumOut of PPO Network: 80% of the first \$5,000, then 100% to the Medical MaximumURC Up to Plan MaximumS2,500\$10,000
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits Prescription Drugs Home Healthcare Local Ambulance Benefit: Hospital Indemnity (Outside the United States & Canada) Coma Benefit	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical MaximumOut of PPO Network: 80% of the first \$5,000, then 100% to the Medical MaximumURC Up to Plan MaximumS2,500\$10,000\$150 per day to a maximum of 30 days
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits Prescription Drugs Home Healthcare Local Ambulance Benefit: Hospital Indemnity (Outside the United States & Canada)	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical Maximum Out of PPO Network: 80% of the first \$5,000, then 100% to the Medical Maximum URC Up to Plan Maximum \$2,500 \$10,000 \$150 per day to a maximum of 30 days \$25,000 (separate from the Medical Maximum)
Hospital Room & Board Inpatient Hospital Services Outpatient Hospital / Clinical Services Emergency Room Services Doctor's Office Visits Prescription Drugs Home Healthcare Local Ambulance Benefit: Hospital Indemnity (Outside the United States & Canada) Coma Benefit	In PPO Network: 90% of the first \$5,000, then 100% up to the Medical MaximumOut of PPO Network: 80% of the first \$5,000, then 100% to the Medical MaximumURC Up to Plan MaximumS2,500\$10,000\$150 per day to a maximum of 30 days\$25,000 (separate from the Medical Maximum)Required in the United States

Waiver of Pre-existing Condition: United States Residents outside of the United States	Age 0-69: \$50,000 Age 70 & over: \$10,000
Acute Onset of a Pre-existing Condition: Non-United States Residents traveling to the United States	Age 0-69: \$30,000 Age 70 & over: \$5,000
Dental - Sudden Relief of Pain:	\$200
Dental - Accident:	\$5,000
Emergency Medical Evacuation & Repatriation:	\$500,000 (separate from the Medical Maximum)
Emergency Medical Reunion:	Up to \$200 per day / \$50,000 maximum limit
Return of Child(ren):	\$50,000
Return of Mortal Remains	\$50,000
Local Burial or Cremation	\$5,000
Natural Disaster Evacuation	\$50,000
Natural Disaster Daily Benefit	\$100 per day, 5-day limit
Political Evacuation & Repatriation	\$10,000
Felonious Assault	\$10,000 (separate from the Medical Maximum)
Terrorism	\$50,000
24/7 TRAVEL ASSISTANCE SERVICES	Included
Accidental Death and Dismemberment (AD&D)	\$25,000 Primary Insured or Travel Companion \$5,000 Child Aggregate Limit of \$250,000 for Total Number of Insureds on Plan
Common Carrier Accidental Death and Dismemberment	\$50,000 Primary Insured or Travel Companion \$10,000 Child Aggregate Limit of \$250,000 for Total Number of Insureds on Plan
Loss of Checked Luggage	Up to \$50 per article / \$500 per occurrence maximum
Trip Interruption	\$5,000
Personal liability	\$50,000
Hazardous Activities (Optional)	Up to Plan Maximum
Benefit Period	180 Days