

Insurance for All Aspects of Business Travel

Medical,
Workers' Comp,
and Foreign Trip
Travel



- **Scott West, CEO, Pathfinder/LL&D Insurance Group**
- 35 years experience in the insurance industry
- Served as President of IIAH from 2006-2007
- Has served as a shareholder and director at Preferred Bank since 1992



- **Gary Tice, Corporate Sales Manager, Europ Assistance**
- 20+ years experience in travel assistance
- Former President & CEO of International SOS
- Developed the first comprehensive travel and security assistance program for the corporate market.

Covering Employees and Staff While Traveling



- U.S. travel and Workers' Compensation
 - Individual state requirements
- Accidents outside the U.S. – foreign trip travel
 - Coverage types
 - Emergency evacuation
 - Family members evacuation

Workers' Comp in the U.S.



- All states except TX and OK require Workers' Comp coverage
- Covers accidents in the U.S., Canada, and U.S. possessions
- State of employee domicile/employment dictates statutory limits
- Endorsement from all states applies until policy renewal date
 - Except monopolistic states: WA, ND, WY, OH

Accident Outside U.S. – Foreign Trip Travel



- Foreign Commercial General Liability
- Foreign Travel Accident & Sickness
- Defense Base Act
 - Covers employees contracted to work on U.S. military bases abroad
 - Covers employees in public works projects with the U.S. government
- WorldSource/AIG/Chartis policy (next slide)

America Tower
2929 Allen Parkway, Suite 1100
Houston, TX 77019

Ph: (713) 342-7529
Fax: (713) 831-5368
EMail: [REDACTED]

Bind Date: October 09, 2012

Broker Contact: [REDACTED]
Producer: PATHFINDER/LL&D INSURANCE GROU
Address: 1160 DAIRY ASHFORD ST
STE 220
HOUSTON, TX 77079-3010

Named Insured: [REDACTED]

Policy Number: WS [REDACTED]
Policy Term: 10/01/2012 - 10/01/2013
Quote Version: 5
SIC Code: 736300 - Help Supply Serv
Commission: 15%

Dear [REDACTED]

Thank you for your order. Attached please find your binder and invoice.

This binder does not include all terms, conditions and exclusions of the policies and services described. Please refer to the actual policies and services for complete details of coverage and exclusions. The issuing company for our master policy is the Insurance Company of the State of Pennsylvania.

Payment is due within 15 days from the date of the bill or 30 days from the effective date, whichever is later. If payment is not received within the allotted time on the invoice, this policy will be cancelled.

This binder contains a broad outline of coverage and does not include all terms, conditions and exclusions of the policy(ies) that may be issued to you. The policy(ies) contain the full and complete agreement with regard to coverage. Please review the policy(ies) thoroughly with your broker upon receipt and notify us promptly in writing if you have any questions. In the event of any inconsistency between the binder and the policy, the policy language shall control unless the parties agree to an amendment.

Thanks again for your order.

[REDACTED]

Regional Manager

Summary

Summary displays total premium by coverage.

PREMIUM SUMMARY

Coverage	Total Premium
Foreign Commercial General Liability	\$1,150
Foreign Voluntary Compensation and Employers Liability	\$4,370
Foreign Commercial Travel Accident and Sickness	\$707
Total Premium (US\$)	\$6,227

Policy Level and/or Multilevel Coverage Endorsements/Forms

- WS83242WR (02/08) Common Conditions and Definitions
- 89338WR (05/05) Coverage Territory-Amended (Excluded Locations)
- WR1202 Cover Letter
- 84025WR (07/04) Declarations
- WS0287WR (07/10) What to do if a Loss Occurs
- 93640 AMS (03/10) WorldRisk Assistance Card

Foreign Commercial General Liability

Limits of Insurance:

<u>\$2,000,000</u>	Master Control Program Aggregate Limit
<u>\$1,000,000</u>	General Aggregate Limit
<u>\$1,000,000</u>	Products-Completed Operations Aggregate Limit
<u>\$1,000,000</u>	Personal and Advertising Injury Limit
<u>\$1,000,000</u>	Each Occurrence Limit
<u>\$50,000</u>	Damage to Premises Rented To You Limit
<u>\$10,000</u>	Medical Expense Limit

Forms/Endorsements

- WS1107WR (09/08) Accidental Death & Dismemberment Insurance
- 78969WR (11/03) Additional Insured-Where Required Under Contract or Agreement (Professional Services Exclusion)
- CRC(08/09) Crisis Response Card
- WS1227WR (01/09) Crisis Response Coverage Extension
- 78990WR (11/03) Employee Benefits Liability Insurance Provides Claims Made Coverage Additional Declarations
- 79007WR (11/03) Exclusion - Engineers, Architects or Surveyors Professional Liability
- 80987WR (11/03) Exclusion-Oil Industry
- 79035WR (11/03) Exclusion-Testing or Consulting Errors and Omissions
- 79036WR (11/03) Exclusion-Underground Resources and Equipment
- 83238WR (04/06) Foreign CGL Coverage Part
- 84022WR (02/04) Foreign CGL Schedule of Limits
- 79044WR (11/03) Limitation of Coverage to Designated Premises or Project
- 79072WR (11/03) Total Pollution Exclusion Endorsement

Foreign Voluntary Compensation And Employers Liability

Classification of Employee	Part One - Employee Injury Benefits Insurance	Part One - Supplemental Repatriation Expenses	Part Two - Employers Liability Coverage
U.S. Employee	State of Hire	Covered	Covered
U.S. Employee Traveler	State of Hire	Covered	Covered
Canadian Employee	Not Covered	Not Covered	Not Covered
Canadian Employee Traveler	Not Covered	Not Covered	Not Covered
Third Country National	Not Covered	Not Covered	Not Covered
Local Hire or National	Not Covered	Not Covered	Not Covered

Limits of Insurance:

\$100,000	Limit of Liability for Part One - Supplemental Repatriation Expense Per Person
\$1,000,000	Limits of Liability for Part Two - Employers Liability Injury by Accident Each Accident
\$1,000,000	Limits of Liability for Part Two - Employers Liability Injury by Disease Coverage Part Limit
\$1,000,000	Limits of Liability for Part Two - Employers Liability Injury by Disease Each Employee

Business Operation(s) conducted at or from: Anywhere in the world within the coverage territory

Forms/Endorsements

- WS0978WR (03/08) Accidental Death & Dismemberment Insurance
- WS1010WR (03/08) Designated Sub-Contractor(s) Additional Insured Endorsement
- WS0979WR (03/08) Explanation of Assistance Services
- WS0992WR (03/08) Flight Concentration Reporting Requirements
- WS84015WR (03/08) Foreign Voluntary Compensation & EL Schedule of Limits
- WS0971WR (03/08) Foreign Voluntary Compensation and Employers Liability Coverage Part

Foreign Travel Accident and Sickness

Classification of Insured Person(s) (if checked)

- ☒ North American Employees(s)
- ☐ Employee(s) other than North American employee(s)
- ☐ Scheduled Individual(s) or Group(s) - endorsed separately
- ☐ Eligible spouse (Principal Sum Insured = 50% of the amount shown below for Coverage A-B)
- ☐ Eligible children (Principal Sum Insured = 10% of the amount shown below for Coverage A-B)

Limits of Liability

Coverage A - B Accidental Death and Dismemberment - 24-Hour Protection
(subject to percentages per Table of Losses)

\$100,000	Principal Sum Insured, each Insured person or five (5) times the insured person's annual salary whichever is the lower
\$1,000,000	Aggregate Limit any one accident for all insured persons

Coverage C - Accidental and Sickness Medical Expense

\$25,000	Covered medical expense, each Insured person each Injury or Sickness
\$500	Deductible per Insured person, per each Injury or Sickness

Coverage D - Emergency Medical Evacuation

\$100,000	Covered Expenses, each Insured person each Serious injury or sickness
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Coverage E - Emergency Family Travel

\$10,000	Covered Expenses, each Insured person
\$25,000	Maximum for all Insured person(s) any one Accident or Sickness

Coverage F - Repatriation of Remains

\$25,000	Covered Expense, each Insured person
\$100,000	Maximum for all Insured person(s) any one Accident or Sickness

Forms/Endorsements

- 84496WR (06/04) Assistance Services Explanatory Endorsement
- 83233WR (08/08) Travel Accident and Sickness Coverage Part
- 84013WR (11/06) Travel Accident and Sickness Schedule of Limits

Premium Details

Premium Details displays gross premiums by coverage.

PREMIUM DETAILS

Coverage	Policy Premiums
Foreign Commercial General Liability	\$1,150
Foreign Voluntary Compensation and Employers Liability	\$4,370
Foreign Commercial Travel Accident and Sickness	\$707
Total Policy Premium (US\$)	\$6,227
Master Policy Minimum Earned Premium	\$2,500
Master Policy Deposit Premium	\$6,227

Invoice

WorldSource

175 Water Street, 19th Floor

New York, NY 10038

www.chartisinsurance.com

Producer**Name**

PATHFINDER/LL&D INSURANCE GROU

Address

1160 DAIRY ASHFORD ST

Address

STE 220

City, State Zip

HOUSTON, TX 77079-3010

Attn**Insured****Name****Address****Address****City, State Zip**

HOUSTON, TX

Invoice Date October 09, 2012**Due Date** October 31, 2012**Issuing Company**

Insurance Company Of the State of Pennsylvania

Notice of Amount Due

This amount is due and payable within 15 days of this bill or 30 days from the effective date, whichever is later. If Payment is not received within the time stipulated, this policy will be cancelled.

Producer Number:	0000041934
Policy Number:	WS [REDACTED]
Policy Inception Date:	October 01, 2012
Policy Expiration Date:	October 01, 2013

Gross Premium:	\$6,227
Commission:	(\$934)
Insured Taxes:	\$0
Fees:	\$0
TOTAL AMOUNT DUE:	\$5,293

Underwriter Name**Underwriter Phone Number****Coverage**

Foreign Commercial Package

Payment Instructions

Return this notice with your remittance. Indicate any change in address if necessary.

WIRE TRANSFER	FIRST CLASS MAIL	EXPRESS MAIL
JP Morgan Chase Bank One Chase Plaza New York, NY 10005 ABA# 021-000021 FOR A/C OF: CHARTIS NORTH AMERICA Account # 910-2475804 SWIFT# CHASUS33	WorldSource PO Box 11590 Newark, NJ 07193	Lockbox Processing 4 Chase Metrotech Center, 7th Floor East Lockbox 11590 Brooklyn, NY 11245

Foreign Travel Accident and Sickness



- Coverage A – B (note naming applicable party(ies), including spouse and children if family traveling with employee). Limits on death coverage, named insured is the recipient of all payments
- Coverage C – Accidental and Sickness expense
- Coverage D – Emergency Medical Evacuation
- Coverage E – Emergency Family Travel
- Coverage F – Bringing back the body

Emergency Medical

- Medical evacuation and/or repatriation
- Repatriation of remains
- Medical case management and review
- Bedside visit of a family member
- Return of dependent children
- Return of traveling companion
- Prescription replacement or refill
- Eyeglass replacement assistance
- Pre-trip information assistance
- Pet return
- Vehicle return

Security Assistance



- 24/7 critical response center
- Real-time security and health alerts
- Security advice
- Political evacuation
- Country and city risk reports
- People and asset tracking

Financial, Legal, and Communication



- Emergency cash advance
- Lost document/baggage assistance
- Emergency translation/interpretation

Questions?



- Gary Tice, Europ Assistance
 - GTice@europassistance-usa.com
- Scott West, Pathfinder/LL&D Insurance Group
 - swest@pathfinderlld.com