Business Travel Accident Insurance
For Employees of the University of Kansas

The University of Kansas and AIG Benefit Solutions are pleased to provide you with Business Travel Accident insurance. As you may know, no matter how careful you are, accidents can happen.

Eligible Persons and Their Principal Sums

<table>
<thead>
<tr>
<th>Class</th>
<th>Description of Class</th>
<th>Principal Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>All faculty, staff and student employees, as defined as students, who are on the policyholder’s (PH) payroll and receive a W-2</td>
<td>$100,000</td>
</tr>
<tr>
<td>II</td>
<td>Spouse and Eligible Dependent Child(ren) of Class I Insured</td>
<td>Spouse: $50,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dependent Child(ren): $25,000</td>
</tr>
</tbody>
</table>

When You Are Covered

- While traveling on business
- While traveling on business, including a Sojourn or Personal Deviation taken during the course of the trip

Benefits and Coverage Limits

All faculty, staff and student employees, as defined as students, who are on a PH payroll and receive a W-2.

Accidental Death, Dismemberment and Paralysis

When Injury to an Insured Person results directly in any of the following 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:

<table>
<thead>
<tr>
<th>Loss of</th>
<th>Percentage of Principle Sum</th>
<th>Loss of</th>
<th>Percentage of Principle Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life</td>
<td>100</td>
<td>Speech and hearing in both ears</td>
<td>100</td>
</tr>
<tr>
<td>Both hands or both feet</td>
<td>100</td>
<td>One hand or one foot</td>
<td>50</td>
</tr>
<tr>
<td>Sight of both eyes</td>
<td>100</td>
<td>Sight of one eye</td>
<td>50</td>
</tr>
<tr>
<td>One hand and one foot</td>
<td>100</td>
<td>Speech or hearing in both ears</td>
<td>50</td>
</tr>
<tr>
<td>One hand and sight of one eye</td>
<td>100</td>
<td>Thumb and index finger of same hand</td>
<td>25</td>
</tr>
<tr>
<td>One foot and sight of one eye</td>
<td>100</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Accidental Death, Dismemberment and Paralysis (continued)

<table>
<thead>
<tr>
<th>Percentage of Principle Sum</th>
<th>Paralysis</th>
<th>Percentage of Principle Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>Quadriplegia</td>
<td>50</td>
</tr>
<tr>
<td>75</td>
<td>Paraplegia</td>
<td>25</td>
</tr>
<tr>
<td>50</td>
<td>Hemiplegia</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Uniplegia</td>
<td></td>
</tr>
</tbody>
</table>

“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.

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**

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 $100 per day for lodging and $50 per day for meals.

**Bedside Visitor**

If the Insured Person is confined to a hospital or other medical facility for five days or more due to an illness 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 five 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 $100 per day for lodging and $50 per day for meals.

**Bereavement and Trauma Counseling**

If an Insured Person suffers and accidental death or an accidental dismemberment or paralysis for which an Accidental Death or Accidental Dismemberment and Paralysis benefit is payable under the Policy, or if he or she goes into a coma for which a Coma benefit is payable under the Policy, the Company will pay covered Bereavement and Trauma Counseling Expenses that are due to his or her death or dismemberment or paralysis or coma.

The covered Bereavement and Trauma Counseling Expenses must be incurred within one year after the date of the accident causing such loss(es), up to a maximum of $150 per session for up to 10 sessions for the Insured Person and all of his or her Immediate Family Members combined with respect to all such losses caused by the same accident.

**Carjacking**

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 or Coma 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) 10% of the largest benefit payable under any one of the benefits specified above due to the carjacking; or 2) $25,000.

**Coma**

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 Principal Sum. No benefit is provided for the first 30 days of coma. The benefit is payable monthly until the earliest of: 1) the date the Insured Person ceases to be comatose; 2) the date the Insured Person dies; or 3) the date the total amount of monthly coma benefits paid for all Injuries caused by the same accident equals 100% of the Principal Sum. Only one benefit is provided for any one month of coma, regardless of the number of Injuries causing the Coma.
Emergency Evacuation with Family Travel
The Company will pay for covered emergency evacuation expenses up to $500,000 if the Insured Person suffers an Injury or emergency sickness while he or she is outside a 100-mile radius from home and the Injury or emergency sickness warrants a physician-certified emergency evacuation.

Home Alteration and Vehicle Modification
The Company will pay for covered home alteration and vehicle modification expenses incurred within one year of the date of the accident, up to a maximum of $25,000, if the Insured Person 1) suffers an accidental dismemberment or paralysis for which an Accidental Dismemberment and Paralysis benefit is payable under the Policy; 2) did not, prior to the date of the accident causing the loss(es) require the use of a wheelchair to be ambulatory; and 3) as a direct result of such loss(es) is now required to use a wheelchair to be ambulatory.

Rehabilitation
If an Insured Person suffers a covered accidental dismemberment or paralysis for which a benefit is payable, the Company will reimburse for covered rehabilitative expenses that are due to the Injury causing the dismemberment or paralysis.

The covered rehabilitative expenses must be incurred within two years after the date of the accident causing that Injury, up to a maximum of $25,000 for all Injuries caused by the same accident.

Repatriation of Remains
If an Insured Person suffers loss of life due to Injury or emergency sickness while outside a 100-mile radius from his or her current place of primary residence, the Company will pay up to $500,000 for covered expenses reasonably incurred to return his or her body to his or her current place of primary residence.

Seat Belt and Air Bag
The Company will pay a benefit when the Insured Person suffers accidental death such that an Accidental Death benefit is payable under the Policy and the accident causing death occurs while the Insured Person is operating, or riding as a passenger in, an automobile and wearing a properly fastened, original, factory-installed seat belt. The amount payable is the lesser of: 1) 10% of the Insured Person’s Principal Sum; or 2) $25,000.

An additional benefit will be paid if the Insured Person is positioned in a seat protected by a properly functioning, original, factory-installed supplemental restraint system that inflates on impact. The additional amount payable is the lesser of: 1) 10% of the Insured Person’s Principal Sum; or 2) $25,000.

Security Evacuation
If, as a result of an occurrence while traveling outside his or her home country, a security evacuation is required, benefits will be payable for eligible expenses up to a maximum of $100,000. Eligible expenses are for transportation and related costs to the nearest place necessary to ensure the Insured Person’s safety and well-being, as determined by the designated Security Consultant. Only one benefit is payable per occurrence.

Benefits will also be payable for transportation and related costs within seven days of the Security Evacuation, as chosen by the designated Security Consultant: 1) back to the host country if return is safe and permitted; 2) to the Insured Person’s home country; or 3) to the place the Insured Person is currently permanently assigned by the Policyholder.

War Risk Coverage
Extends coverage to an Insured Person for covered Injuries sustained as the result of declared or undeclared war worldwide, with the exception of the United States and the Insured Person’s country of permanent residence.

The Company may change the premium rate for War Risk Coverage at any time if: 1) war risk conditions change in the Designated War Risk Territory(ies); 2) there is a change in which area(s) is (are) defined to be the Designated War Risk Territory(ies); or 3) the Policyholder’s exposure to war risk in the Designated War Risk Territory(ies) changes in any way.

The Company will give the Policyholder written notice of any change in the premium rate for War Risk Coverage at least 10 days in advance of the effective date of the change.
General Policy Exclusions

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 even if the proximate or precipitating cause of the loss is an accidental bodily Injury:

1. Suicide or any attempt at suicide or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury or auto-eroticism.
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 whether the loss results directly or indirectly from any of these.
5. Infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition including but not limited to diabetes.
6. 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 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 under the influence of intoxicants while operating any vehicle or means of transportation or conveyance.
8. The Insured Person being 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 crime.
10. The medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity whether the loss results directly or indirectly from the treatment.
11. Stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm.

Definitions


Bereavement and Trauma Counseling Expense(s): An expense that: 1) is charged for a medically necessary bereavement or trauma counseling session for the Insured Person and/or one or more of his or her Immediate Family Member(s) provided under the care, supervision or order of a physician; 2) does not exceed the usual level of charges for similar counseling sessions in the locality where the expense is incurred; and 3) does not include charges that would not have been made if no insurance existed.

Designated War Risk Territory(ies): Worldwide. A Designated War Risk Territory does not include the United States of America or the Insured Person’s country of permanent residence.

Eligible Dependent Child(ren): The Insured’s unmarried children, including natural children from the moment of birth, step or foster children, adopted newborn children from the moment of birth if a petition for adoption of a child is filed within 31 days of birth, or adopted children from the date the petition for adoption of a child is filed, under age 25 (26 if attending an accredited institution of higher learning on a full time basis) 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: Bodily injury 1) which is sustained as a direct result of an unintended, unanticipated accident that is external to the body and that occurs while the injured person’s coverage under the Policy is in force; 2) occurs under the circumstances described in a Hazard applicable to that person; and 3) results directly (independent of sickness, disease, mental incapacity, bodily infirmity or any other cause) causes in a loss covered under a Benefit applicable to such Hazard.

Immediate Family Member: A person who is related to the Insured Person in any of the following ways: spouse, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, father-in-law, parent (includes stepparent), brother and sister (includes stepbrother or stepsister), or child (includes legally adopted or stepchild).

Insured: A person: 1) who is a member of an eligible class of persons as described in the Classification of Eligible Persons section of the Declarations section of the Policy; 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.

Sojourn and Personal Deviation: Non-business travel or activities undertaken while on the business of the Policyholder but unrelated to furthering the business of the Policyholder.