



Summary of conditions, insuring agreements and exclusions Inbound Group Travel Insurance "Muang Thai Happy Passenger" (Sell through electronic channel (Online))

Definition (important)

Travel duration re

refers to

Each travel period of the insured covered by the policy which commences and ends within the insurance period.

Round Trip

Coverage shall commence when the insurance becomes effective or before the insured travels to Thailand 2 hours prior, whichever happens later, and it continues until the insured travels back home or within 2 hours since returning to the country where the house is located or until the end of the insurance period, whichever event occurs first, unless it is stated otherwise in this insurance policy.

One - way

Coverage shall commence the insurance becomes effective or before the insured travels to Thailand 2 hours prior, whichever happens later, and it continues until for 24 hours from the date the insured arrives in Thailand at the point of disembarking from the vehicle used by the insured or until the expiration date of the insurance period, whichever event occurs first, unless it is stated otherwise in this insurance policy.

However, when arriving in Thailand or departing from Thailand, It is important to pass through the immigration checkpoint correctly in every step.

Extension of travel duration: If the insured receives medical treatment during the period where the insurance policy is effective and requires to be treated continuously as an inpatient. The coverage of this insurance policy will be extended until the date that the company or the authorized company considers that the insured can be discharged from the hospital or medical facility and can travel back home or a domicile. However the company will limit the maximum liability not exceeding the sum insured specified on the insurance schedule.

Public transport refers to **operator**

The transporters provided serviced by road, rail, air, sea or water. They are licensed by a lawful government agency to carry on the passenger transport business. The fare is based on the route that has been set certainly and is the usual popular route.

Destination refers to

Destinations that the insured travels to in Thailand



Insuring Agreement

- 1. Benefit for loss of life, dismemberment, loss of eyesight or total permanent disability caused by accident.
- 2. Benefit for medical expenses due to accident during the trip.
- 3. Other benefits as specified in the insurance policy and/or attachment.

However the company shall provide coverage only for the insuring agreement in the amount specified in the insurance schedule.

General Exclusion (important)

- 1. Treatment of diseases or conditions related to psychosis, stress, insanity, including drug addiction and genetic disease.
- 2. Claiming for all kinds of, directly or indirectly related to, sexually transmitted diseases and impaired immune system, such as Human Immunodeficiency Virus Infections (HIV), Acquired Immune Deficiency Syndrome (AIDS) or other forms of HIV or AIDS, no matter how it occurs.
- 3. The insured travels to a place where the Thai government or Thai government agencies have made announcements to suggest or advise or warn about strike, riot, weather condition or the spread of communicable diseases.
- 4. While the damage occurred outside the territory of Thailand, except for countries that the company has extended the insurance coverage as specified in the attachment (if any), or the country where the home is located or a workplace that is not a country that is excluded from the coverage.
- 5. Medical treatment caused by a doctor who is the insured himself/herself or his/her father and mother, spouse, the insured's child or those who are traveling companions with the insured or a person who is related to the insured.
- 6. Pregnancy, complications of pregnancy, childbirth, abortion, miscarriage (except the injury that is caused by accidents covered under this insurance policy)
- 7. Travelling against the advice of a doctor or medical expense arising from or as a consequence of a pre-planned medical visit in Thailand, or medical expense that are not caused or as a result of an accident or illness that does not occur suddenly and unexpectedly during the trip.
- 8. Pre-exiting condition

Please thoroughly check the conditions and exclusions of the insurance policy. If there is any statement in this document contrary to or inconsistent with the statement in the insurance policy, the statement appearing in the insurance policy shall be used instead.

Remarks

This document is merely a summary of the general conditions, insuring agreements and exclusions. Therefore, the insured should carefully and thoroughly study the details of the insurance policy and the insurance plan received.



Insurance Policy

Inbound Group Travel Insurance "Muang Thai Happy Passenger" (Sell through electronic channel (Online))

In reliance upon the statement made in the proposal for insurance which is considered as part of this insurance policy, and in consideration of the premium paid by the policyholder and/or insured subjected to conditions, insuring agreements and exclusions and attachments of the insurance policy, the Company agrees to the insured as follows.

Section 1: Definition

Words and descriptions having the specific meaning given in any part of the insurance policy shall be deemed to be the same, no matter what part, unless it is stated otherwise in this insurance policy.

1	Insurance Policy	refers to	Insurance schedule, benefit table, general condition, insuring agreement, exclusion, attachment, special requirement, warranty and endorsement and summary documents of general conditions, insuring agreements and exclusions which are considered as part of this insurance contract.				
2	Company	refers to	Muang Thai Insurance Public Company Limited				
3	Policyholder	refers to	The person named as the policyholder in this insurance schedule and/or insurance certificate who provides insurance for the benefit of the insured.				
4	Insured	refers to	The person named as the insured in this insurance schedule and/or attachment who is covered by this insurance policy.				
5	Insurance period	refers to	The period, as stated in the insurance schedule, from the commencement of coverage until the time coverage of the insurance policy ends.				
6	Accident	refers to	The event which happens suddenly from external factors giving rise to a result which is not intended or anticipated by the insured.				
7	Injury	refers to	Bodily injury which is caused directly and solely from an accident and is independent from other causes.				
8	Illness	refers to	Symptoms, disorders, illnesses or infections occurring with the insured.				
9	Serious injury Severe illness	refers to	9.1 In the case of the insured, it refers to serious injury or severe illness requiring medical treatment from a doctor and will result in the insured being certified by the doctor that the insured cannot continue the trip as originally planed.				



Travel duration

10

(Unofficial Translation)

9.2 In the case of the close relative, it refers to serious injury or severe illness which has been certified by a doctor as life threatening and resulted in the insured not being able to continue traveling according to the original itinerary.

refers to

Each travel period of the insured covered by the policy which commences and ends within the insurance period.

10.1 Round Trip

Coverage shall commence when the insurance becomes effective or before the insured travels to Thailand 2 hours prior, whichever happens later, and it continues until the insured travels back home or within 2 hours since returning to the country where the house is located or until the end of the insurance period, whichever event occurs first, unless it is stated otherwise in this insurance policy.

10.2 One – way

Coverage shall commence the insurance becomes effective or before the insured travels to Thailand 2 hours prior, whichever happens later, and it continues until for 24 hours from the date the insured arrives in Thailand at the point of disembarking from the vehicle used by the insured or until the expiration date of the insurance period, whichever event occurs first, unless it is stated otherwise in this insurance policy.

However, when arriving in Thailand or departing from Thailand, It is important to pass through the immigration checkpoint correctly in every step.

10.3 Extension of travel duration: If the insured receives medical treatment during the period where the insurance policy is effective and requires to be treated continuously as an inpatient. The coverage of this insurance policy will be extended until the date that the company or the authorized company considers that the insured can be discharged from the hospital or medical facility and can travel back home or a domicile. However the company will limit the maximum liability not exceeding the sum insured specified on the insurance schedule.





11	Public transport operator	refers to	The transporters provided serviced by road, rail, air, sea or water. They are licensed by a lawful government agency to carry on the passenger transport business. The fare is based on the route that has been set certainly and is the usual popular route.
12	Doctor	refers to	Those who have graduated with a doctor of medicine degree properly registered by the Medical Council and are licensed to practice medical field in the local that provides medical or surgical services.
13	Nurse	refers to	Those who are lawfully licensed to practice nursing.
14	Hospital	refers to	Any hospital which provides medical services which can
14	Поѕрнаг		accept patients to stay overnight and has a facility with a sufficient number of medical personnel, as well as complete service management. In particular, it has a room for major surgery and is allowed to register as a hospital according to the medical facility law of that territory.
15	Inpatient	refers to	Those who need to be admitted in a hospital or medical facility not less than 6 hours consecutively, which must be registered as an inpatient by receiving a diagnosis and advice from a doctor accordingly indications which are medical standards, and in duration suitable for the treatment of such injury or illness. This shall include in the case of being admitted as an inpatient and later passes away before completing 6-hour hospitalization.
16	Medical facility	refers to	Any medical facility which provides medical services which can accept the patient to stay overnight and is allowed to register as a medical facility according to the medical facility law of that territory
17	Clinic	refers to	Any medical facility of a conventional medicine that is lawfully licensed performed by a doctor to provide medical treatment, diagnosis and unable to accept the patient to stay overnight.
18	Domicile	refers to	The country in which the insured informs the company that the insured has that nationality.
19	Close relative	refers to	Spouse, father, mother, legal children, siblings of the same father or mother, caretaker, legal custodian, grandfathers and grandmothers of the insured and the spouse's father and mother.

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(Unofficial Translation)

20	Close business partner	refers to	 20.1 A person related to the insured in doing business (not an employee of the insured) who has a relationship in continuing business with the insured and has a dependency on reciprocal business with the insured. 20.2 Business person traveling with the insured with the same goal and necessary for conducting the business of the insured or 20.3 Employee of the insured
21	Medical standards	refers to	20.3 Employee of the insured. International principles or guidelines for conventional
			medicine and bring about a treatment plan that is suitable for the patient according to medical necessity and consistent with the injury or illness history, autopsy result or other information. (if any)
22	Medical necessity	refers to	Medical services with the following conditions
			 22.1 Must be consistent with the diagnosis and treatment according to the injury or illness of the service recipient. 22.2 There must be a clear medical indication in accordance with current medical practice. 22.3 Must not be for the convenience of the service recipient or the recipient's family or of a healthcare provider unilaterally; and 22.4 Must be a medical service in accordance with appropriate patient care standards according to the necessity of the injury or illness of that
23	Necessary and reasonable expenses	refers to	service recipient. Medical expense and/or any reasonable expenses comparing to the services of a hospital, medical facility or a clinic charged to its general patients of a hospital or medical facility or clinic where the insured receives treatment.
24	pre-existing condition	refers to	Diseases (including complications), symptoms or disorders occurring to the insured within 12 months prior to each departure date, which is significant to seek a diagnosis, care or treatment or cause a doctor to make a
25	AIDS	refers to	diagnosis, care or treatment. Acquired Immune Deficiency Syndrome caused by AIDS virus infection and this shall include microbial infections, Malignant Neoplasm, disease infections or



Section 2: General Condition
2.1 Insurance Agreement

(Unofficial Translation)

any illnesses in which the blood test results show positive for HIV (Human Immunodeficiency Virus). The microbial infection shall include, but is not limited to, Pneumocystis Carinii Pneumonia, infections that cause organism or chronic enteritis, virus and/or disseminated fungi infection, Malignant Neoplasm which includes, but is not limited to, Kaposi's Sarcoma, Central Nervous System Lymphoma and/or other serious diseases which are known today as Acquired Immune Deficiency Syndrome or which cause sudden death,

			E circles of which course summer seems,
			illness or disability called AIDS. Also, this shall include
			HIV (Human Immunodeficiency Virus), Encephalopathy
			Dementia) and the spread of the virus.
26	Terrorism	refers to	Acts of force or violence and/or intimidation by any
			person or group of persons whether acting alone, act on
			behalf of or in connection with any organization or
			government for political, religious, ideological or other
			similar purposes, including aim for the result in the
			government and/or the public or any part of the public is
			in a state of panic.
27	Authorized company	refers to	A juristic person authorized by the company to provide
			emergency assistance solely to the insured as specified in
			the schedule.
28	Home/house	refers to	The place where the insured resides on a permanent basis or
			a registered address outside Thailand.
29	Work place	refers to	The place where the insured works outside of Thailand ws
			informed to the company.
30	Destination	refers to	Destinations that the insured travels to in Thailand.
31	Fraud	refers to	Fraudulent claims for benefits under insurance policy or
			showing false evidence in claiming, including intention to

cause injury or illness to claim compensation.

7/23

of general conditions, insuring agreements and exclusions under this insurance policy.

and/or the insured in the proposal form or additional statement form (if any) signed the policyholder and/or the insured as evidence for the purpose of obtaining insurance coverage. The company therefore issued an insurance policy and summary documents of summary documents

This insurance agreement is based upon the information provided by the policyholder



In the event that the insurance policyholder and/or the insured is already aware of but makes a false statement in the statement under paragraph one, or is already aware of real message but conceals it without notifying the company. If the company is aware of the true situation, the company may charge higher premiums or reject to make a contract. Therefore this insurance contract will be void under Section 865 of the Civil and Commercial Code. The company has the right to terminate the contract.

The Company will not deny liability based on statements other than those stated by the insured in the documents under paragraph one.

2.2 Completeness of the contract and changes in the insurance policy

This insurance policy together with the insuring agreements and attachments are forming part of the insurance contract. Any changes of wordings in the contract must be approved by the company and noted in the insurance policy or endorsement before such changes shall be valid.

2.3 Travel duration and insurance period

- 2.3.1 One-way coverage (Single Trip): The insurance policy will provide coverage for the insured according to the definition "Travel Duration", every time the insured travels within the insurance period.
- 2.3.2 <u>Annual coverage (Annual Trip)</u>: For multiple trip coverage, the insurance period for each time shall be the same as 2.3.1, and the maximum duration of each trip is not more than 180 days.

However, the coverage under this insurance policy will automatically expire when the insured travels outside the territory of Thailand without traveling back home or the country where the home is located.

2.4 Interpretation

In case of any dispute happened in connection with this insurance policy, it shall be interpreted according to Thai laws and the parties agree to take legal proceeding in the jurisdiction of the courts in Thailand.

2.5 Medical examination

The Company has the right to examine the insured's medical history and diagnosis as necessary for a purpose of underwriting, and has the right to perform an autopsy as necessary and not against the law at the expense of the company.

In the event that the insured refuses to give permission to the company to examine the insured's medical history and diagnosis for consideration of compensation payment, the company can deny coverage to the insured.

2.6 Subrogation

In the event that the company has paid compensation under this insurance policy, the company will assume the rights of the policyholder and/or the insured in order to exercise that right to make a claim against an individual or an organization that should be responsible for such loss or damage, and the policyholder and/or the insured must deliver any documents and items or take any action necessary to maintain the right of claim by the policyholder and/or the insured, by must not take any action for the rights to be deprived after the loss or damage has occurred.



2.7 Notification and claim

Beneficiary or representative of the policyholder and/or the insured, as the case may be, shall notify the company of any injury or illness without delay. In the event of death, the company must be notified immediately. Unless it can be proved that there is a reasonable necessity, it cannot be notified immediately to the company, but notified as soon as possible. For other events, notification must be made as soon as possible, but not later than 30 the day after the incident.

In the case of the policyholder and/or the insured fails to notify the company within the period specified above. The policyholder and/or the insured will not lose the right to make a claim, if the policyholder and/or the insured can prove that this omission is reasonable cause which is not caused by the fault of the policyholder and/or the insured and has made a claim to the company as soon as possible.

2.8 Claim and submission of evidence

2.8.1 Medical expenses

The policyholder and/or the insured must submit the following evidence to the company within 30 days from the date discharging from the hospital or medical facility or clinic at the expense of the insured.

- 1. Claims form designated by the company
- 2. A medical report stating important symptoms, results of diagnosis and treatment
- 3. Original receipt showing expenses or a summary of the statements and receipts
- 4. Copy of the insured's passport or proof of travel
- 5. Other documents requested by the company as necessary (In case of doubt and need additional documents for consideration)

The receipt listing the expenses must be the original receipt. The company will return the original receipt certifying the amount paid in order for the insured to claim the missing part from other insurers. If the insured receives compensation from the welfare of the state or any other welfare or from other insurers, the insured must submit a copy of the receipt certifying the amount paid from the welfare of the state or other agencies to claim the missing portion from the company.

2.8.2 <u>Compensation for total permanent disability, dismemberment or loss of eyesight due to</u> accident

The policyholder and/or the insured must submit the following evidence to the company within 30 days from the date the doctor determines that the insured is suffered from total permanent disability or dismemberment at the expense of the policyholder and/or the insured.

- 1. Claims form designated by the company
- 2. Medical report confirming total permanent disability or loss of organs
- 3. Copy of the insured's passport or proof of travel
- 4. Other documents requested by the company as necessary (In case of doubt and need additional documents for consideration)



2.8.3 Compensation for loss of life due to accident

The beneficiary must submit the following evidence to the company within 30 days from the date of the insured's death at the expense of the beneficiary.

- 1. Claims form designated by the company
- 2. Death certificate
- 3. Copy of autopsy report
- 4. Copies of police daily report
- 5. Copy of ID card and a copy of the house registration stamp "dead" of the insured
- 6. Copy of the insured's passport or proof of travel
- 7. Copy of ID card and a copy of the beneficiary's house registration
- 8. Other documents requested by the company as necessary (In case of doubt and need additional documents for consideration)

2.8.4 Other claims for compensation

The policyholder and/or the insured must submit the following evidence to the company within 30 days from the date of notification of claim to the company at the expense of the insured.

- 1. Claims form designated by the company
- 2. Original receipt
- 3. Copy of the insured's passport or other proof of travel
- 4. Police daily report (if any)
- 5. Invoice and other relevant supporting documents
- 6. Documents or confirmation letters of public transport operators including details of the relevant itinerary (if any)
- 7. In the case of a claim for travel cancellation and trip curtailment, the insured must submit additional evidence as follows:
 - a. Document confirming that the insured has paid the deposit for travel and accommodation, including original documents of any additional costs for travel and accommodation paid.
 - b. Medical expense documents or death certificate from the insured doctor, close relative or close business partner, copy of summons
- 8. A copy of the statement of the amount required for bail
- 9. Other documents requested by the company as necessary (In case of doubt and need documents more for consideration)

Failure to submit evidence within the stipulated period will not cause the insured to lose the right to claim. If the insured can demonstrate that there are reasonable grounds for failing to do so within the specified period but sent it as soon as possible.

2.9 Compensation payment

The company will pay compensation within 15 days from the date the company receives complete and accurate evidence of loss or damage. The compensation for loss of life will be paid to the beneficiary, while other compensation will be paid to the insured.



In the event that there is a reasonable suspicion that the claim for the company to compensate under the insurance policy, as mentioned above, is not in accordance with the insuring agreement in the insurance policy. The specified period may be extended as necessary, but not exceeding 90 days from the date the company has received all the documents.

If the company is unable to pay the compensation within the period stated above, the company will be liable to pay interest at the rate of 15% per year of the amount to be paid from the due date of the compensation payment.

2.10 Payment of premium and cancellation of insurance policy

- 2.10.1 Insurance premium is due immediately by the policyholder and/or the insured and the insurance policy will be effective on the date specified in the insurance policy schedule.
- 2.10.2 In the case of one-way coverage (single trip), cancellation of the insurance policy after the company has issued the insurance policy, the premium will not be returned except in the case where the insured has not been granted a visa with confirmation document from the embassy and the insured must inform the company before the coverage commencement date.
- 2.10.3 In the case of annual coverage (annual trip), the policy holder and/or the insured or the company can exercise the right to cancel the insurance policy according to the conditions specified as follows:
 - 2.10.3.1 The Company may cancel this insurance policy by sending a written notice of not less than 15 day by registered mail to the insured to the last address given to the company. In this case, the company will return the premium to the insured, by deducting premiums for the period that this insurance policy has been effective and issued on the pro-rata basis.
 - 2.10.3.2 The policyholder and/or the insured can cancel this insurance policy by notifying the company in writing and have the right to receive premium after deducting premiums for the period that this policy has been effective. It shall be refunded according to the short-term premium rate as specified in the following table.

Table of short-term premium rate

Insurance period	%
(not exceed/month)	Premium for full year
1	15
2	25
3	35
4	45
5	55
6	65
7	75





8	80
9	85
10	90
11	95
12	100

Cancellation of the insurance policy under this condition whichever party makes a cancellation, the whole insurance policy shall be cancelled. Specific coverage of the insurance policy cannot be selected to be cancelled during the policy year.

2.11 Arbitration

In case of argument, dispute or appeal under this insurance policy between the person who is entitled for compensation versus the company and if so desired by that person to settle the disputed claim by use of arbitration, the company must conform and allow the case to be judge by arbitration according to the arbitrating regulation governed by the Office of Insurance Commission (OIC).

2.12 Precedent Condition

The company shall not be liable to compensate the insured or other party under this insurance policy unless the insured, beneficiary or representative of such person has complied with the insurance contract and the conditions of this insurance policy.

Section 3: General Exclusion

This insurance policy does not cover injury, loss or damage caused by or being consequences of or occurring at the following times:

- 1. While the insured serves as a soldier, police, emergency medical provider, fireman or volunteer and engage in war operations or crime suppression.
- 2. The insured travels to a place where the Thai government or Thai government agencies have made announcements to suggest or advise or warn about strike, riot, weather condition or the spread of communicable diseases.
- 3. War, invasion, malicious act of foreign enemies, or acts of hostility like war whether war has been declared or not or civil war which means war between peoples inhabitants of the same country, protest, rebellion, riot, strike, commotion, revolution, coup d'état, declaration of martial law or any other incident that will cause martial law to be declared or maintained.
- 4. Terrorism
- 5. Radiation or radioactive emission from nuclear fuel or from any nuclear waste due to the combustion of nuclear fuel and from any process of self-sustaining nuclear fission/fusion.
- 6. Radioactive explosion or nuclear components or any other potentially dangerous goods explosion in nuclear reaction processes



- 7. While the damage occurred outside the territory of Thailand, except for countries that the company has extended the insurance coverage as specified in the attachment (if any), or the country where the home is located or a workplace that is not a country that is excluded from the coverage.
- 8. When the insured commits an illegal act or does not comply with the policies of the Thai government including visa conditions.
- 9. Suicide, attempt suicide or self-injury
- 10. While the insured is in the cargo ship, at oil rig, underground mine, or while operating explosives.
- 11. While the insured is practicing or participating in professional sporting event or practicing as an amateur.
- 12. Travelling against the advice of a doctor or medical expense arising from or as a consequence of a pre-planned medical visit in Thailand, or medical expense that are not caused or as a result of an accident or illness that does not occur suddenly and unexpectedly during the trip.
- 13. In the event that the insured is diagnosed in the final stage of illness.
- 14. Loss or damage caused by the epidemic or pandemic that spreads widely.
- 15. The insured commits insurance fraud.

Section 4: Scope of assistance provided by the company or authorized company

The scope of assistance provided by the company or authorized company shall be governed by the laws and regulations of Thailand. The services of the company or authorized company are subject to the consent of the relevant authorities. The company and/or the authorized company will not be responsible for any delay or interruption of service provided as agreed due to force majeure from the strike event, uprising of the people, restriction on free movement, sabotage, terrorism, civil war or foreign war, consequences of radioactivity or natural disaster.

Section 5: Insuring agreement

While this insurance policy is effective under general conditions, insuring agreements, exclusions and attachments thereof and in consideration of the premium that the insured shall pay. The Company therefore agrees to provide the following coverage.





Insuring agreement

Loss of life, dismemberment, loss of eyesight or permanent disability caused by accident

Deminuon		
Dismemberment	refers to	The loss of body organ from the wrist joint or the ankle
		joint and also the loss of use of that organ which

according to the clear medical indication that such organ will never be able to function at any time in the future.

Loss of eyesight refers to **Total permanent** refers to **disability**

Complete blindness which is permanently incurable.

Disability to the extent that the insured is unable to perform any job duties in full-time and other occupations completely forever, or unable to perform 3 or more daily routines on their own.

The daily routine refers to the ability to perform the main daily tasks of normal people of 6 types, which are medical criteria for evaluating patients who are unable to perform such tasks, consisting of:

- (1) The ability to move, such as the ability to move from a chair to a bed on their own without the assistance of others or the use of assistive devices.
- (2) The ability to walk or move, such as the ability to walk or move from room to room on their own without the assistance of others or the use of assistive devices.
- (3) The ability to dress, such as the ability to put on or take off clothes on their own without the assistance of others or the use of assistive devices.
- (4) The ability to bathe, such as the ability to bathe. This includes entering and exiting the shower on their own without the assistance of others or assistive devices.
- (5) The ability to eat, such as the ability to eat on their own without the assistance of others or the use of assistive devices.
- (6) Ability to excrete, such as the ability to use the toilet for defecation. This includes being able to enter and exit the toilet on their own without the assistance of others or assistive devices.

Coverage

While this insurance policy is in effect, it will cover loss or damage due to bodily injury of the insured caused by accident during the trip within travel duration and this may cause loss of



life, dismemberment, loss of eyesight or permanent disability within 180 days from the date of the accident or the injury causes the insured to receive continuous medical treatment as an inpatient in the hospital or medical facility and loss of life occurs later, at any time, because of such injury. The company shall compensate in accordance with the sum insured stated in benefit table as follows.

Benefit Table

100% of the sum insured	Loss of life			
100% of the sum insured	Permanent disability which continue not less than 12			
	months after the accident or if there is any medical			
	indication that the insured suffers a permanent disability.			
100% of the sum insured	Loss of both hands from the wrist joint or both feet			
	from the ankle joint, or loss of sight for both eyes.			
100% of the sum insured	Loss of one hand from the wrist joint and one foot			
	from the ankle joint.			
100% of the sum insured	Loss of one hand from the wrist joint and loss of			
	sight for one eye.			
100% of the sum insured	Loss of one foot from the ankle joint and loss of			
	sight for one eye.			
60% of the sum insured	Loss of one hand from the wrist joint.			
60% of the sum insured	Loss of one foot from the ankle joint.			
60% of the sum insured	Loss of sight for one eye.			

The company shall compensate only one item of loss which has the highest amount.

Through the insurance period, the company will pay the compensation under this insuring agreement totally not over the amount specified in the schedule. If the company pays the compensation less than 100 % of sum insured, the company still covers the rest amount until end of insurance period.

Specific exclusion (Applicable only to insuring agreement: loss of life, dismemberment, loss of eyesight or permanent disability caused by accident)

- 1. Under this insuring agreement, the insurance policy does not cover infection of germs and parasites, except for infection with tetanus or rabies which was caused by the wound received from an accident.
- 2. While the insured rides on or is a passenger on a motorcycle.
- 3. Actions of the insured while under the influence of alcohol, drug or addictive drug until unable to regain consciousness. The word "while under the influence of alcohol" refers to in the case of a blood test and the criteria of alcohol level in blood alcohol shall be from 150 milligram percent or more.
- 4. While the insured joins the quarrel or is involved in inciting a quarrel.
- 5. While the insured commits a serious crime or while being arrested or escaping arrest.



- 6. Childbirth, abortion, miscarriage (Except for injury that is caused by accidents covered under this insurance policy.)
- 7. While the insured is controlling or performing duties as a crew member of any aircraft.
- 8. While the insured is going in or out or while riding an aircraft that is not registered to carry passengers and is not a commercial airline.
- 9. While the insured participate in any type of racing or boat race, horse race, ski race of any kind including jet ski, skating, boxing, parachuting (except parachuting for life) while getting on or going down or riding in a balloon or glider, bungee jumping, diving that requires an air tank and an underwater breathing apparatus.

Insuring Agreement Emergency medical expenses during the trip

Coverage

While the insurance policy is in effect, it provides coverage on necessary and reasonable expenses incurred from medical treatment based on medical necessity and medical standards. If the insured is injured from an accident or sudden illness and it is unpredictable during the trip within the travel period and it causes medical treatment whether as an inpatient or an outpatient, the company will compensate necessary and reasonable expenses for medical treatment according to the actual amount that must be paid but not exceeding the sum insured specified in the schedule.

Specific exclusion (Applicable only to insuring agreement: emergency medical expenses during the trip)

Under this insuring agreement, this insurance policy does not cover the following medical treatments or expenses:

- 1. Pre-existing conditions
- 2. Treatment or correction of birth defects
- 3. Treatment for leisure or health; rehabilitation; health check-up, any diagnosis and medical treatment that is not related to injury or illness.
- 4. Any treatment that is not a conventional medical treatment, including alternative treatment such as acupuncture, natural therapy, treatment by massage and chiropractic.
- 5. All prosthetic devices, including walking sticks, glasses, hearing aids, speech devices and all types of pacemakers.
- 6. Expenses related to dental services except for the relief of accidental injuries, but does not include restorations, orthodontics, crowns, scaling, filling, or denture.
- 7. Service or surgery in connection with injuries or illnesses incurred for exploitation of the insurance policy.



- 8. Beauty treatments include acne, melasma, freckles, dandruff, weight loss, hair transplant, or treatments to correct body defects, cosmetic surgery, unless it is a cosmetic surgery that requires to be done as a result of an accident in order to restore the organ.
- 9. Vaccination or inoculation against disease except rabies vaccination after being attacked by an animal and tetanus vaccine after injury.
- 10. Medical expenses incurred in the country where the home is located or place of work or domicile of the insured
- 11. Actions of the insured while under the influence of alcohol, drug or addictive drug until unable to regain consciousness. The word "while under the influence of alcohol" refers to in the case of a blood test and the criteria of alcohol level in blood alcohol shall be from 150 milligram percent or more.
- 12. Treatment of diseases or conditions related to psychosis, stress, insanity, including drug addiction and genetic disease.
- 13. Claiming for all kinds of, directly or indirectly related to, sexually transmitted diseases and impaired immune system, such as Human Immunodeficiency Virus Infections (HIV), Acquired Immune Deficiency Syndrome (AIDS) or other forms of HIV or AIDS, no matter how it occurs.
- 14. While the insured joins the quarrel or is involved in inciting a quarrel.
- 15. While the insured commits a serious crime or while being arrested or escaping arrest.
- 16. Medical treatment caused by a doctor who is the insured himself/herself or his/her father and mother, spouse, the insured's child or those who are traveling companions with the insured or a person who is related to the insured.
- 17. Childbirth, abortion, miscarriage (Except for injury that is caused by accidents covered under this insurance policy.)
- 18. While the insured is controlling or performing duties as a crew member of any aircraft.
- 19. While the insured is going in or out or while riding an aircraft that is not registered to carry passengers and is not a commercial airline.
- 20. While the insured participate in any type of racing or boat race, horse race, ski race of any kind including jet ski, skating, boxing, parachuting (except parachuting for life) while getting on or going down or riding in a balloon or glider, bungee jumping, diving that requires an air tank and an underwater breathing apparatus.

Insuring Agreement Trip cancellation

Definition

Bad weather refers to

Storm, rainstorm, blizzard, fog, typhoon, dense smoke and soot in the air caused by volcanic eruption which affect the safety of traveling.



Coverage

While the insurance policy is in effect, it provides coverage when the insured's confirmed travel is canceled within 30 the day before the start of the trip due to unexpected events and is beyond control of the insured for the following reasons.

- a. Death, serious injury severe illness of the insured or a close relative or close business partner, or
- b. Cancellation of public transport schedules due to riot, strike, protest, commotion or bad weather, or
- c. The insured is summoned to testify in the court.

The company will pay compensation to the insured for expenses incurred in cancellation of the trip after the policy has been in effect for accommodation and transportation expenses that the insured has already paid in advance or have to pay according to the contract or expenses incurred in booking a travel program or fines for trip cancellation which cannot be demanded from anyone. The company will pay compensation according to the amount of actual expenses incurred, but not more than the sum insured stated in the schedule. Any expenses incurred must be confirmed in writing by the relevant service providers for that travel trip.

Specific condition (Applicable only to insuring agreement: travel cancellation)

The insured must notify the travel company, travel agency, and transport company or accommodation provider immediately when it is necessary to cancel the trip.

In the case where the insured does not notify the travel company, travel agency, transport company or accommodation provider immediately or notify after 48 hours, without delay, after acknowledge the reason for trip cancellation. In doing so, it is considered as the insured's fault. and if the expenses incurred on the date the insured notifies the concerned parties is higher than the expenses incurred on the date the insured should notify the concerned parties, the company shall indemnify the insured only for the amount of expenses incurred as of the date that the concerned parties should have been notified. The insured will be responsible for the difference of the expenses that has not been reimbursed by the company.

Specific exclusion (Applicable only to insuring agreement: travel cancellation)

Under this insuring agreement, this insurance policy does not cover the trip cancellation caused by or as a result of or occurs in the following cases.

- 1. Any loss or damage caused by control measures or regulations of the Thai government and/or the government of the destination country.
- 2. Compensation for loss or damage from other sources under other insurance policies or government protection programs or refund from a hotel, airline, travel agency, travel service provider or accommodation provider.
- 3. Failure to vaccinate on schedule or according to the regulations of the destination country.
- 4. The event that the insured expects to occur or knows on or before the date of issuance of the insurance policy





- 5. Treatment of diseases or conditions related to psychosis, stress, insanity, including drug addiction and genetic disease.
- 6. Claiming for all kinds of, directly or indirectly related to, sexually transmitted diseases and impaired immune system, such as Human Immunodeficiency Virus Infections (HIV), Acquired Immune Deficiency Syndrome (AIDS) or other forms of HIV or AIDS, no matter how it occurs.

Insuring Agreement Trip Curtailment

Definition

Bad weather

refers to Storm, rainstorm, blizzard, fog, typhoon, dense smoke and soot in the air caused by volcanic eruption which affects the safety of traveling.

Coverage

While the insurance policy is in effect, it provides coverage when the number of travel days of the confirmed trip of the insured must be shortened. The notification reaches the insured after the insured has left and the trip has not ended yet according to the itinerary due to unexpected events and is beyond the control of the insured for the following reasons

- a. Serious injury severe illness of the insured, or
- b. Death, serious injury severe illness of a close relative or close business partner, or
- c. Cancellation of public transport schedules due to riot, strike, protest, commotion or bad weather, or
- d. The insured is summoned to testify in the court.

The company shall pay compensation to the insured for expenses incurred in reducing the number of travel days for:

- 1. Non-refundable expenses for transportation, accommodation and travel program, booking expenses paid by the insured in advance or a deposit is forfeited.
- 2. Additional expenses for transportation, accommodation, and travel program, booking expenses that the insured must pay additionally, because the insured has to reduce the number of travel days as a result of the above reasons.

The company will pay compensation according to the amount of actual expenses incurred, but not exceeding the sum insured specified in schedule. Any expenses incurred must be confirmed in writing by the relevant service providers for that travel trip.

Specific condition (Applicable only to insuring agreement: trip curtailment)

The insured must immediately notify the travel company, travel agency, and transport company or accommodation provider or related service provides which the insured contacted for that trip when it is necessary to reduce the number of travel days.



Specific Exclusion (Applicable only to insuring agreement: trip curtailment)

Under this insuring agreement, this insurance policy does not cover the trip curtailment caused by or as a result of or occurs in the following cases:

- 1. Any loss or damage caused by control measures or regulations of the Thai government and/or the government of the destination country.
- 2. Compensation for loss or damage from other sources under other insurance policies or government protection programs or refund from a hotel, airline, travel agency, travel service provider or accommodation provider which the insured contacted for that trip.
- 3. The event that the insured expects to occur or knows on or before the date of issuance of the insurance policy

Insuring Agreement Travel delay

Definition

Bad weather

refers to

Storm, rainstorm, blizzard, fog, typhoon, dense smoke and soot in the air caused by volcanic eruption which affects the safety of traveling.

Coverage

While the insurance policy is in effect, it provides coverage when the travel schedule of public transport reserved by the insured has delayed of more than 3 consecutive hours from the time specified in the itinerary notified to the insured. Such delay is caused by strike, protest, bad weather, engine failure, structural defect of public transport vehicles, and severe fire at the place of departure causing inability to travel. The company will pay compensation for the food and accommodation expenses as see appropriate according to the sum insured stated on the schedule to the insured for every 3 hours during such delay of public vehicle, but not exceeding the maximum sum insured stated on the schedule.

Specific condition (Applicable only to insuring agreement: travel delay)

The compensation is calculated based on the difference between times to destination according to the schedule of the insured with real-time arrival of the destination.

If the public transport provider has provided another vehicle to the insured, the calculation is based on the difference between the insured's scheduled time of arrival and the actual time of arrival of the vehicle provided by the public transport provider.

Specific exclusion (Applicable only to insuring agreement: travel delay)

Under this insuring agreement, this insurance policy does not cover loss or damage arising from or as a result of the following reasons:

1. The delay is due to the following reasons:





Definition

- 1.1 The insured is unable to attend the check-in at the departure point in time for any reason.
- 1.2 Strike or strike which has begun and is announced to the public for acknowledgement prior to the insurance policy commencement date wherein the insured can change travel
- 2. Loss or damage claim which can be claimed from other related parties.

Insuring Agreement Loss, damage or loss of travel baggage and personal property

Deminion						
Travel baggage and	refers to	Personal property and baggage of the insured or property				
personal property		that the insured must be responsible and is the property				
		that the insured takes with or purchase during the trip.				
Valuables	refers to	Jewelry, gem, watch, articles of precious or precious				
		stones, fur, leather goods.				
Pair or set	refers to	Number of pieces of baggage on the trip or personal				
		property which is assembled as a set or can be used				
		together.				
Pocket money	refers to	Coin, banknote, currency, traveler's check, travel ticket/				
		document, hotel/accommodation card, vacation card or gift				
		voucher which can be exchanged for cash or issued a new				
		replacement.				
Personal document	refers to	Green card, passport, ID card, driver's license				

Coverage

While the insurance policy is in effect, it provides coverage for loss, damage or loss incurred within the travel period for the travel baggage and the insured's personal property taken with or purchased during the trip. The company will compensate for any loss or damage or loss of the actual amount incurred but not exceeding the limit amount for each item, whichever is lesser, and not exceeding the maximum sum insured specified in the schedule.

In the event that loss or damage or loss occurs, the insured must report the incident to the local police, or if under the supervision of hotel staff or public transport provider, the insured must inform the hotel management or the administration of public transport provider by notifying within 24 hours after the loss or damage or acknowledging the, unless it can be proved that there are reasonable grounds which cannot be notified within the above period, but the insured has notified as soon as possible and must keep the police daily report or written certification documents from relevant agencies such as hotels or airlines as evidence.

In the event of personal property loss or damage or loss as part of a pair or set, the compensation consideration shall not take into account the value of personal property in a pair or



set, but shall consider only the damage or loss of the personal property that is damaged or lost only. However, the compensation will not exceed the sum insured stated in the schedule.

The company can choose to indemnify the insured in cash, by deducting depreciation from the amount to be reimbursed or repairing travel baggage or personal property of the insured. In the case of baggage or personal property of the insured are completely damaged and cannot be repaired, the company will compensate as if the travel baggage for the journey or personal property has been lost. When the company has paid such compensation, the company has the right to possess such assets and proceed to sell the carcass as appropriate.

In the event of the lost personal property is found, the insured must notify the company by registered letter as soon as the insured is notified that the lost property has been discovered. In the event that the company has not yet paid compensation, the insured must reclaim the personal property. If the personal property is damaged and under this coverage, the company will pay the compensation for damaged items of travel baggage or personal property only. In the event that the company has already paid compensation to the insured, the insured can choose to waive the property rights or restore the personal property by returning the amount paid by the company to the insured, by deducting the non-returned items. If the insured does not reclaim the personal property within 15 days from the date of notification, the company will assume that the insured chooses to waive the property right.

Under this insuring agreement, the insured may not make a claim under this insuring agreement and insuring agreement for baggage delay in the same event.

Specific condition (Applicable only to insuring agreement: loss, damage or loss of travel baggage and personal property)

- 1. The insured must make every effort to maintain all personal property.
- 2. In the event that the company has paid compensation under this insuring agreement, the company will subrogate the rights of the insured in order to exercise the right to claim against an individual or organization only in the part where the company has already compensated. In this regard, the insured must cooperate with the company in delivering documents and prepare to take action as needed and must not do anything which is detrimental to the company.

Specific exclusion (Applicable only to insuring agreement: loss, damage or loss of travel baggage and personal property)

Under this insuring agreement, this insurance policy does not cover:

- 1. Animal, car (including automotive accessories), boat, sport equipment, other vehicles, fruit, food, home appliance, antique, handicraft, glassware, porcelain, ceramic, marble, pottery or other fragile items, drawing, artwork, musical instrument, glasses (lens and frame), contact lenses, personal document, financial document, stamp, pocket money, credit card, SIM card, key.
- 2. Loss or damage of valuables that are not kept with the insured, unless they are locked in a safe.



- 3. Loss or damage from wear and tear, scratch, stain, atmospheric or weather damage, deterioration, liquid leakage, oil or lubricant fouling, paint or rust staining on travel baggage, defects of machinery or electrical equipment, insect, rodent, condition of the property itself or damage from the production process/assembled or during production/assembly, and the damage is due to production/assemble it.
- 4. Theft without tampering, trespassing or the use of padlocks.
- 5. Loss or damage of unlocked baggage or being left unattended.
- 6. Loss or damage covered under other insurance policies or has been reimbursed by public transport providers, hotels or other sources.
- 7. Loss or damage to the insured's baggage that has been sent in advance or transported separately.
- 8. Loss or damage of goods or product samples as well as all kinds of equipment.
- Loss or damage of the insured's property from seizure, destruction by order of government or government agencies or the customs officer of Thailand and/or destination country.
- 10. Property purchased after arriving at the destination specified in the travel ticket.
- 11. Theft by an employee or staff of the insured
- 12. Loss or damage incurred in Thailand, except theft, loss or damage by the airline or its agents.
- 13. Loss or damage of prosthetic organs and equipment except for loss or damage arising from an accident to the insured.
- 14. Loss or damage of equipment rented or leased.
- 15. Loss or corruption of data recorded on tape, program, disc, memory card or any other similar thing.

Insuring Agreement Travel baggage delay

Coverage

While the insurance policy is in effect, it provides coverage for travel baggage that arrives late or is sent to the wrong place or temporarily lost during the travel period. The company will pay benefits for the purchase of clothing, wearable or personal items that are urgently needed to the insured. The compensation will be paid according to the amount specified in the schedule for every 5 hours starting from the time the insured arrives at the baggage claim point at the destination. However, the compensation shall not exceed the maximum sum insured stated on the schedule.

Under this insuring agreement, the insured may not make a claim under this insuring agreement and the insuring agreement for Loss, damage or loss of travel baggage and personal property in the same event.



Therefore, in the event that the insured's travel baggage is proven to be permanently lost, the company shall deduct any amount paid by the company under this insuring agreement from the amount of compensation the company provides under the loss or damage insurance agreement or loss of travel baggage and personal property.

Specific condition (Applicable only to insuring agreement: travel baggage delay)

The Insured must make every effort to ensure that the baggage is locked and the information on the baggage tag is accurate and clear.

Specific exclusion (Applicable only to insuring agreement: travel baggage delay)

Under this insuring agreement, this insurance policy does not cover:

- 1. Delay that occur directly or indirectly from the strike or protest occurring while organizing the trip or before the insurance policy becomes effective, whichever happens later.
- 2. Travel baggage that is accompanied by certified documents for carriage, such as a bill of lading, air waybill, rail way bill or parcel post receipt, etc.
- 3. Travel baggage is confiscated or destroyed by government or government orders or customs officers or other government agencies of Thailand and/or overseas.
 - 4. Delays occurring in Thailand

Insuring Agreement Third party liability

Definition

Third party refers to

Any person other than a relative or family members of the insured or persons living together with the insured, employees of the insured while in the course of employment

Coverage

While the insurance policy is in effect, it provides coverage for the insured's third party liability incurred by accident during the trip within the travel period for:

- 1. Loss of life or bodily injury of the third party.
- 2. Loss or damage to the third party's property.

The Company will compensate on behalf of the insured according to the actual expenses incurred for the following expenses:

- a. Expenses that the insured is liable to any third party according to the actual amount of loss or damage.
- b. Expenses or fees paid by the insured with the written consent of the company.
- c. Expenses for court proceedings or arbitration.

However, the amount of the company's liability for the event or for the event following the same cause incurred during the trip shall not exceed the sum insured as specified in the schedule.



Specific condition (Applicable only to insuring agreement: third party liability)

- 1. If at the time of an event or claim under this insurance policy, there are other types of insurance policies already covering this incident or claim. The company will share the average of the damages, not more than the proportion for which the company is responsible.
- 2. The insured shall not accept any liability, offer, promise, pay or indemnify without written consent from the company.
- 3. The insured shall immediately send a letter, claim document, subpoena letter from police, court summon, or other documents relating to damages or causes that will lead to a claim to the company.

Specific exclusion (Applicable only to insuring agreement: third party liability)

Under this insuring agreement, this insurance policy does not cover:

- 1. Any loss or damage that the insured is liable to the third party from events that result from intentional actions or illegal actions of the insured
- 2. Any liability which is caused by or as a result of
 - 2.1. Professional service or non-compliance with the profession
 - 2.2. Trade, business or profession of the insured
 - 2.3. Using a gun or weapon
 - 2.4. The insured engages in dangerous activities, unless the coverage is extended under the insurance policy.
 - 2.5. Owning, possessing or using towing vehicles attached to vehicles, aircraft, ships
 - 2.6. Ownership, possession or use of lands, buildings, except for the benefit of the residence of the insured during the trip
 - 2.7. Sexual harassment, assault of body and emotional abuse
 - 2.8. Causing pollution or contaminating soil, water, air
- 3. Legal liability to close business partner or to outsiders from employment or internship with the insured
- 4. Liability arising from a contract which, without such contract, will not be incurred by the insured.
- 5. Legal liability arising from animals (except dogs, cats, horses) under the supervision or control of the insured.
- 6. Death or bodily injury or loss or damage to the property of a close relative.
- 7. Loss or damage to the insured's property or the property which is possessed, supervised and controlled by the insured.
- 8. Civil, criminal or contractual fines.





Insuring Agreement Emergency medical evacuation and relocation and/or repatriation and funeral arrangement

Definition

Emergency medical 1. Emergency transportation of the insured from the refers to evacuation place where the insured suffers from accident or illness to the nearest hospital that can provide appropriate medical treatment; or 2. Transportation of the insured after initial treatment from a local hospital and the physical condition of the insured allows to be moved to another hospital or to their domicile for further treatment or to recover. **Covered expenses** refers to Moving costs, medical expenses and expenses necessary for medical assistance, relocation or repatriation of the body to the domicile. However, the related expenses as stated above must be approved

repatriation refers to Arrangement required for the repatriation of the body

or ashes to the domicile in the event of the insured

passes away by accident while traveling.

and managed by the authorized company.

Coverage

Emergency medical evacuation and relocation

While the insurance policy is in effect, it provides coverage for moving to emergency medical treatment for the insured who is injured in an accident or sick while traveling within the travel period. This shall be in accordance with the opinion of the authorized company that sees it appropriate to move the insured to another place or return to domicile for medical treatment. The authorized company will arrange emergency medical evacuation by the most suitable method according to the insured injury or illness condition. The company will pay the covered expenses directly to the authorized company.

To handle emergency medical evacuation by authorized company, may include emergency transport by air or by car, traveling by commercial airline, train or by other appropriate means.

Decisions on the means of transport or destination will be made by the authorized company by considering the insured medical necessity only.

Repatriation of the body and funeral arrangement

While the insurance policy is in effect, it provides coverage for the repatriation of the body or ashes. In the event that the insured is death from an accident or illness while traveling



within the travel period which is managed by an authorized company, the company will pay the covered expenses directly to the authorized company.

In the case of sending a corpse or ashes back to a domicile which is not Thailand, the amount of the company's liability is limited to the cost of repatriation to Thailand only.

The Company will pay the beneficiary the actual amount actually paid for the funeral arrangement, casket, and burial or cremation costs. This does not include expenses for funeral arrangement.

The sum insured for emergency medical evacuation coverage and relocation or coverage for repatriation of the body and funeral arrangement shall not exceed the maximum sum insured stated in the schedule.

Specific condition (Applicable only to insuring agreement: emergency medical evacuation and relocation and/or repatriation and funeral arrangement)

The company has assigned the authorized company to assist the insured in managing emergency medical treatment under the following conditions:

- 1. Decisions to do their best for the benefit of the insured's medical treatment only.
- 2. The company's authorized doctor will contact the local hospital or, if necessary, request information from the insured's primary doctor to make a decision appropriate to the insured physical condition.
- 3. The insured agrees that emergency medical evacuation will be managed by qualified medical personnel of the company in that country.
- 4. The management of the authorized company will be in accordance with the laws of that country and international laws and regulations. Authorized company services must be authorized by the relevant authorities.
- 5. In the event that the insured refuses to comply with the decision of the authorized company, it will be considered that the insured has given an exempt for the legal liability of the company and its authorized company from the consequences that may arise as a result of the insured actions, the right of the insured to receive services from the authorized company and compensation from the company will be deprived.
- 6. When the authorized company provides assistance, the company will be entitled to own the ticket of original trip. The insured shall send the ticket to the authorized company or transfer a refund received from the travel agency to the company. If the insured has not purchased the return ticket, the company shall reserve the right to claim expenses that the insured should pay for the return travel expenses to the company.

Specific exclusion (Applicable only to insuring agreement: emergency medical evacuation and relocation and/or repatriation and funeral arrangement)

Under this insuring agreement, this insurance policy does not cover any injury, illness, loss or damage caused by or as a consequence of or that occurs in the following cases:





- Any arrangement that is not approved or handled by an authorized company, except
 for reasons beyond the insured control and the insured cannot notify the authorized
 company during a medical emergency. However, the company reserves the right to
 reimburse the insured to the extent that the company authorized in the same
 circumstances and such amount shall not exceed the amount of sum insured specified
 in the schedule.
- 2. Exclusion to medical assistance and medical expenses: loss or damage caused by the epidemic or pandemic that spreads widely.

Attachment

Extension of coverage for medical expenses due to the infection of Coronavirus 2019 (COVID-19)

(For attached to Inbound Group Travel Insurance "Muang Thai Happy Passenger")

Additional definition

1. Coronavirus 2019	refers to	The Coronavirus	2019 d	isease (C	COVID-	19) according
(COVID-19)		to the definition	by the	World	Health	Organization
		(WHO).				

2. Waiting Period refers to The period from the date this insurance policy becomes

effective or the first time. The company will not pay compensation for illness occurring within that period.

Coverage

During the insurance period and after the expiration of the waiting period..-..day specified in the schedule, if the insured is diagnosed with Coronavirus 2019 (COVID-19) infection and must seek medical treatment from a doctor or specialist, the company shall pay medical expenses for necessary and reasonable expenses incurred from medical treatment according to medical necessity and medical standards in the actual amount, but not exceeding the sum insured specified in the schedule and/or insurance certificate. The insurance policy shall continue to cover until the end of the travel period and continue to cover for ...-... days after the end of the travel period.

<u>Submission of documents or evidence for claim (Applicable only to the attachment:</u> <u>Extension of coverage for medical expenses due to the infection of Coronavirus 2019</u> (COVID-19))

The policyholder, the insured, beneficiary or representatives of such persons, as the case may be, must submit the following documents or evidence to the company within 30 days from the date discharging from the hospital or medical facility or clinic at their own expense.





- 1. Claims form designated by the company
- 2. A medical report stating important symptoms, results of diagnosis and treatment
- 3. Original receipt showing expenses or a summary of the statements and receipts
- 4. Other documents requested by the company as necessary (In case of doubt and need additional documents for consideration)

The receipt listing the expenses must be the original receipt. The company will return the original receipt certifying the amount paid in order for the insured to claim the missing part from other insurers. If the insured receives compensation from the welfare of the state or any other welfare or from other insurers, the insured must submit a copy of the receipt certifying the amount paid from the welfare of the state or other agencies to claim the missing portion from the company.

Specific additional exclusion (Applicable only to the attachment: Extension of coverage for medical expenses due to the infection of Coronavirus 2019 (COVID-19))

- 1. Illness with Coronavirus 2019 infection (COVID-19) (including complications) before the insurance policy becomes effective and has not yet been cured.
- 2. Non-conventional treatment including alternative medicine

If the content in this attachment is contrary to or conflict with the content in the insurance policy, the content in this attachment shall be used instead.

The conditions of the insurance contract and other exclusions in the insurance policy shall remains in effective as before.