Basic Medical Expense (per Accident or Sickness) $500,000
means surgery or medical treatment not necessitated by
Evacuation/Repatriation $50,000
Accidental Death & Dismemberment $6,000
Electronic Devices $500
Emergency Dental $500
means surgery or medical treatment not necessitated by a
To the extent the Company pays for a loss suffered by
The Insurance Company of the State of Pennsylvania,
neuroses, psychoneuroses, psychopathies, psychoses or mental or emotional dis-
Chiropractic Care & Therapeutic Services
Personal Effects Deductible $100
Deductible $50
This coverage provides you with $2,000 in
• Any Mental and Nervous disorders or rest cures, except as specified
• Injury sustained while the Insured Person is riding as a pilot, student
• Diagnosis and treatment of acne
• Elective Surgery/Treatment which can be postponed until the Insured
• Injuries for which benefits are payable under any no-fault automobile
Insurance Policy
• Dental care, except as the result of Injury to natural teeth caused by
Accident, unless otherwise covered under this Policy
• Routine Dental Treatment
• For Pregnancy or Illness resulting from Pregnancy, childbirth or miscarriage
• Drug, treatment or procedure that either promotes or prevents concep-
tion, or prevents childbirth, including but not limited to: artificial inse-
nation, treatment for infertility or impotency, sterilization or reversal thereof, or abortion
• Treatment for human organ tissue transplants and their related treatment
• Weak, strained or flat feet, corns, calluses, or toenails
• Diagnosis and treatment of acne
• Injury sustained while the Insured Person is riding as a pilot, student
pilot, operator or crew member, in or on, boarding or alighting from, any
type of aircraft.

In addition to the exclusions listed above, the following exclusions apply to
Accidental Death and Dismemberment Insurance only:
• disease of any kind
• bacterial infections except pyogenic infection which shall occur through an
accidental cut or wound
• neuroses, psychoneuroses, psychopathies, psychoses or mental or emotional dis-
eases or disorders of any type

Right of subrogation To the extent the Company pays for a loss suffered by
an Insured, the Company will take over the rights and remedies the Insured
had relating to the loss. This is known as subrogation. The Insured must help
the Company to preserve its rights against those responsible for the loss.
This may involve signing any papers and taking any other steps the Company
may reasonably require. If the Company takes over an Insured’s rights, the
Insured must sign an appropriate subrogation form supplied by the
Company.
Elective surgery means surgery or medical treatment not necessitated by a
pathological or traumatic change in the function or structure in any part of
the body first occurring after the insured’s effective date of coverage. Elective sur-
tery includes, but is not limited to, circumcision, tubal ligation, vasectomy,
breast reduction, sexual reassignment surgery and submucous resection and/or other surgical correction for deviated nasal septum, or other than for nec-
essary treatment of covered acute purulent sinuses. Elective surgery does not
apply to cosmetic surgery required to correct a covered accident.
Elective treatment means surgery or medical treatment not necessitated by a
pathological or traumatic change in the function or structure in any part of
the body first occurring after the insured’s effective date of coverage. It
includes, but is not limited to, acne, nonmalignant warts and moles, weight
reduction, infertility and learning disabilities.

Personal effects coverage—This coverage provides you with $2,000 in Personal Effects Coverage subject to a maximum $100 per item ($500 for electronic devices) and deductible of $100 per incident for loss or theft of
your personal items.
The following exclusions apply:
• loss of money, notes, securities, tickets and documents (driver’s licenses,
passes, etc.)
• jewelry, watches, articles consisting in whole or in part of silver, gold or
platinum and furs
• animals, automobiles, automobile parts and equipment, motorcycles,
skis, bicycles, boats, motors or other conveyances
• any kind of glasses (including sunglasses) and contact lenses
• breakage of articles or a brittle nature unless caused by thieves
• loss or damage caused by, or resulting from, declared or undeclared war
• loss due to wear, tear, gradual deterioration or negligence on the part of
the Insured.

If you have any questions concerning your coverage, call CISI at 203-399-5130

Schedule of Benefits (subject to policy terms & conditions)
Policy GLB 9111593
Basic Coverage & Services: Maximum Limits
• Basic Medical Expense (per Accident or Sickness) $500,000
• Deductible $50
• Accidental Death & Dismemberment $6,000
• Evacuation/Repatriation $50,000
• Emergency Dental $500
• Emergency Family Reunion $1,000
• Return Air Benefit $1,000
• Chiropractic Care & Therapeutic Services
• Outpatient Limit Maximum of $50/visit

AIG Assist Package Included
AIG Assist ID # GLB 9111593

Personal Effects Upgrade
(in addition to Basic Coverage):
Maximum Limits
• Personal Effects Loss $2,000
• Personal Effects Deductible $100
• Per Item Limit $100
• Electronic Devices $500

Introduction
It is our privilege to extend to all participants in our Camp America and
Resort America programs one of the most comprehensive insurance plans
offered to international students working in the U.S.
The medical plan applies to all participants on the program sponsored by
Camp America. If you have purchased the Personal Effects insurance, you
have additional coverage.

11/06
The plan will pay usual, customary and reasonable amount which falls within the range of charges for a service incurred as a direct result of a covered accident, medical referral, medical monitoring, prescription drugs which are medically necessary, emergency medical message transmission, coverage verification/payment assistance for medical expenses.

Travel assistance: Assistance in obtaining emergency cash, traveler check replacement assistance, lost/delayed luggage tracing, replacement of lost or stolen airline ticket.

Technical assistance: Credit card/passport/important document replacement, locating legal services, assistance in posting bond/bail, worldwide inoculation information.

Usual, Customary and Reasonable Bases for determining payment amounts for UCR are:

Usual — an amount which falls within the range of charges for a service billed by most professional providers in the same locality who have similar training and experience.

Customary — an amount which is usual and customary or would not be considered excessive in a particular case because of unusual circumstances.

Exclusions For benefits listed in the Schedule of Benefits, except Accident Death & Dismemberment, this insurance does not cover:

• Pre-existing Conditions, as defined, except as specified: a) If the Insured Person does not receive medical care or services, including prescription drugs or other medical supplies, and is not under the care of a Physician with respect to the Pre-existing Condition or related condition(s), for a period of 12 consecutive months beginning on or after the first day of coverage, the pre-existing condition exclusion will no longer apply and any eligible charges incurred after the treatment free period will be considered for reimbursement; b) Emergency Medical Evacuation/Repatriation and Return of Mortal Remains.

• Claims for treatment which exceed Reasonable and Customary charges.

• Claims incurred for Surgery or treatments which are Experimental/Investigational, or for research purposes.

• Services, supplies or treatment, including any period of Hospital confinement, which were not recommended, approved and certified as Medically Necessary and reasonable by a Physician.

• Suicide or any attempt thereof, while sane or self destruction or any attempt thereof, while sane.

• Any consequence, whether directly or indirectly, proximately or remotely occasioned by, contributed to by, or traceable to, or arising in connection with: a) war, invasion, act of foreign enemy hostilities, warlike operations (whether war be declared or not), or civil war or b) mutiny, riot, strike, military or popular uprising, insurrection, rebellion, revolution, military or usurped power.

• Routine physicals, immunizations, or other examinations where there are no objective indications or impairment in normal health, and laboratory diagnostic or x-ray examinations, except in the course of a Disability.

Medical expense (accident and sickness) The plan will pay usual, customary and reasonable amount of the Covered Accident and Sickness Medical Expense in excess of $50 per incident incurred within 52 weeks of date of accident or commencement of sickness—up to $500,000 for each accident or up to $500,000 for each sickness.

Participants aged 40+ Participants aged 40—60 are eligible for only $50,000 basic medical coverage and upgrades associated with the Personal Effects. Participants over 60 are eligible for only a maximum $5,000 medical coverage and upgrades associated with Personal Effects.

Return air fare expenses incurred as a direct result of a covered accident, sickness, or emergency are covered by the plan providing the claim meets the provisions of the policy and written verification is received. Camp America must be notified first in the event a participant requires a return flight. The maximum expense payable for one or any combination of provisions is $1,000.

In the event of death of a parent, grandparent, sibling or legal guardian, the plan will pay up to $4,000 of accidental death and dismemberment benefit.

Participants aged 40+ Participants aged 40—60 are eligible for only $50,000 basic medical coverage and upgrades associated with Personal Effects. Participants over 60 are eligible for only a maximum $5,000 medical coverage and upgrades associated with Personal Effects.

Return air fare expenses incurred as a direct result of a covered accident, sickness, or emergency are covered by the plan providing the claim meets the provisions of the policy and written verification is received. Camp America must be notified first in the event a participant requires a return flight. The maximum expense payable for one or any combination of provisions is $1,000.

In the event of death of a parent, grandparent, sibling or legal guardian, the plan will pay up to $4,000 of accidental death and dismemberment benefit.

Participants aged 40+ Participants aged 40—60 are eligible for only $50,000 basic medical coverage and upgrades associated with Personal Effects. Participants over 60 are eligible for only a maximum $5,000 medical coverage and upgrades associated with Personal Effects.

Return air fare expenses incurred as a direct result of a covered accident, sickness, or emergency are covered by the plan providing the claim meets the provisions of the policy and written verification is received. Camp America must be notified first in the event a participant requires a return flight. The maximum expense payable for one or any combination of provisions is $1,000.

In the event of death of a parent, grandparent, sibling or legal guardian, the plan will pay up to $4,000 of accidental death and dismemberment benefit.
The plan will pay usual, customary and reasonable amount of the Covered Accident and Sickness losses resulting from the same accident. Maximum aggregate benefit per occurrence is $1,000,000.

Medical expense (accident and sickness) The plan will pay usual, customary and reasonable amount of the Covered Accident and Sickness Medical Expense in excess of $50 per incident incurred within 52 weeks of date of accident or commencement of sickness—up to $500,000 for each accident or up to $500,000 for each sickness.

Participants aged 40+ Participants aged 40+ are eligible for only $50,000 basic medical coverage and up to $50,000 for each sickness.

Return air fare expenses incurred as a direct result of a covered accident, sickness, or emergency are covered by the plan providing the claim meets the provisions of the policy and written verification is received. Camp America must be notified first in the event a participant requires a return flight. The maximum expense payable for one or any combination of provisions is $1,000.

In the event of death of a parent, grandparent, sibling or legal guardian, the insurance company will arrange and pay for your return airfare (tourist class) from the United States to your foreign point of departure. Camp America will pay the insured for the return airfare expenses up to $500.

The Team Assist Plan (TAP), as provided by AIG Assist The Team Assist Plan (TAP) is designed by CISI in conjunction with the Assistance Company to provide travelers with a worldwide, 24-hour emergency telephone assistance service. Multilingual help and advice may be furnished for the insured in the event of any emergency during the term of coverage. The Team Assist Plan complements the insurance benefits provided by The Insurance Company of the State of Pennsylvania. The Assistance Company will be AIG Assist.

Emergency Medical Evacuation/Repatriation The Company shall pay benefits for Covered Expenses incurred up to the maximum stated in the Schedule of Benefits, if any Injury or covered illness commencing during the Period of Coverage results in the medically Necessary Emergency Medical Evacuation or Repatriation of the Insured Person. The decision for an Emergency Medical Evacuation or Repatriation must be ordered by the Company's appointed Assistance Company in consultation with the Insured Person's local attending Physician.

Emergency Medical Evacuation or Repatriation means: a) the Insured Person's medical condition warrants immediate transportation from the place where the Insured Person is located (due to inadequate medical facilities) to the nearest adequate medical facility where medical treatment can be obtained; or b) after being treated at a local medical facility, the Insured Person's medical condition warrants transportation with a qualified medical attendant to his/her Home Country to obtain further medical treatment or to recover; or c) both a) and b) above.

Covered Expenses are for Emergency Medical Evacuation/Repatriation, for transportation, medical services and medical supplies necessarily incurred in connection with Emergency Medical Evacuation or Repatriation of the Insured Person.

Return of Mortal Remains or Cremation The Company will pay the Insured Person's reasonable and necessary medical expenses incurred in connection with the return of the Insured Person's remains to his/her home country. The return of the Insured Person's remains to his/her Home Country is at the discretion of the Company.

Cremation, a minimally necessary container appropriate for transportation, shipping costs and the necessary government authorizations. All Covered Expenses in connection with a Return of Mortal Remains must be pre-approved and arranged by an Assistance Company representative appointed by the Company.

The Team Assist offers these services

Medical assistance: Medical referral, medical monitoring, prescription drug reimbursement, emergency medical evacuation, transportation, coverage verification, payment assistance for medical expenses.

Travel assistance: Assistance in obtaining emergency cash, travel check replacement assistance, lost/delayed luggage tracing, replacement of lost or stolen airline ticket.

Technical assistance: Credit card/passport/important document replacement, locating legal services, assistance in posting bond/bail, worldwide inoculation information.

Usual, Customary and Reasonable Bases for determining payment amounts for UCR are:

Customary — an amount which falls within the range of charges for a service billed by most professional providers in the same locality who have similar training and experience.

Reasonable — an amount which is usual and customary or would not be considered excessive in a particular case because of unusual circumstances.

Exclusions

For benefits listed in the Schedule of Benefits, except Accidental Death & Dismemberment, this insurance does not cover:

• Pre-existing Conditions, as defined, except as specified: a) if the Insured Person does not receive medical care or services, including prescription drugs or other medical supplies, and is not under the care of a Physician with respect to the Pre-existing Condition or related condition(s), for a period of 12 consecutive months beginning on or after the first day of coverage, the pre-existing condition exclusion will no longer apply and any eligible charges incurred after the treatment free period will be considered for reimbursement; b) Emergency Medical Evacuation/Repatriation and Return of Mortal Remains.

• Charges for treatment which is excessive, Reasonable and Customary charges.

• Charges incurred for Surgery or treatments which are Experimental/Investigational, or for research purposes.

• Services, supplies or treatment, including any period of Hospital confinement, which were not recommended, approved and certified as Medically Necessary and reasonable by a Physician.

• Suicide or any attempt thereof, while sane or self destruction or any attempt thereof, while insane.

• Any consequence, whether directly or indirectly, proximately or remotely occasioned by, contributed to by, or traceable to, or arising in connection with: a) war, invasion, act of foreign enemy hostilities, warlike operations (whether war be declared or not), or civil war or b) mutiny, riot, strike, military or popular uprising, insurrection, rebellion, revolution, military or usurped power.

• Routine physicals, immunizations, or other examinations where there are no objective indications or impairment in normal health, and laboratory diagnostic or x-ray examinations, except in the course of a Disablment
The plan will pay usual, customary and reasonable amount of the Covered Accident and Sickness insurance company will arrive range and pay for your return airfare (tourist flight. the maximum expense payable for one or any combination of permits) to the nearest adequate medical facility where medical treatment can be obtained; or b) after being treated at a local medical facility, the Insured Person’s medical condition warrants transportation with a qualified medical attendant to his/her Home Country to obtain further medical treatment or to recover; or c) both a) and b) above.

Covered Expenses are for Emergency Medical Evacuation/Repatriation, for transportation, medical services and medical supplies necessarily incurred in connection with Emergency Medical Evacuation or Repatriation of the Insured Person.

Return of Mortal Remains or Cremation The Company will pay the reasonable Covered Expenses incurred up to the maximum stated in the Schedule of Benefits, if any Injury or covered illness commencing during the Period of Coverage results in the Medically Necessary Emergency Medical Evacuation or Repatriation of the Insured Person. The decision for an Emergency Medical Evacuation or Repatriation must be ordered by the Company’s appointed Assistance Company in consultation with the Insured Person’s local attending Physician.

Emergency Medical Evacuation/Repatriation

The Company shall pay benefits for Covered Expenses incurred up to the maximum stated in the Schedule of Benefits, if any Injury or covered illness commencing during the Period of Coverage results in the Medically Necessary Emergency Medical Evacuation or Repatriation of the Insured Person. The decision for an Emergency Medical Evacuation or Repatriation must be ordered by the Company’s appointed Assistance Company in consultation with the Insured Person’s local attending Physician.

Medical expense (accident and sickness) The plan will pay usual, customary and reasonable amount of the Covered Accident and Sickness Medical Expense in excess of $50 per incident incurred within 52 weeks of date of accident or commencement of sickness—up to $500,000 for each accident or up to $500,000 for each sickness.

Participants aged 40+

Participants aged 40–49 are eligible for only $50,000 basic medical coverage and upgrades to the Personal Effects. Participants over 60 are eligible for only a maximum $5,000 medical coverage and upgrades associated with Personal Effects.

Return air fare expenses incurred as a direct result of a covered accident, sickness, or emergency are covered by the plan providing the claim meets the provisions of the policy and written verification is received. Camp America must be notified first in the event a participant requires a return flight. the maximum expense payable for one or any combination of provisions is $1,000.

In the event of death of a parent, grandparent, sibling or legal guardian, the insurance company will arrange and pay for your return airfare (tourist class) from the United States to your foreign point of departure. Camp America must be advised and approve the flight. Retroactive claims will not be accepted.

Chiropractic services and physical therapy shall be limited to a total of $50 per visit, with a maximum 10 visits per injury or illness. The overall maximum coverage per injury or illness for chiropractic care care is $500, which includes X-ray and evaluation charges.

Emergency dental treatment shall be limited to the cost of initial emergency examination and initial treatment to alleviate pain resulting from infection of gums or sound natural teeth up to an overall maximum benefit of $500.

Team Assist Plan (TAP), as provided by AIG Assist

The Team Assist Plan (TAP) is designed by CISI in conjunction with the Assistance Company to provide travelers with a worldwide, 24-hour emergency telephone assistance service. Multilingual help and advice may be furnished for the Insured in the event of any emergency during the term of coverage. The Team Assist Plan complements the insurance benefits provided by The Insurance Company of the State of Pennsylvania. The Assistance Company will be AIG Assist.

If you require AIG Assist, your ID number is GLB 9111593 Camp America. In the U.S., call (800) 472-0906. Worldwide, outside the U.S., call collect (713) 267-2525.

Medical referral, medical monitoring, prescription drugs or other medical supplies, and is not under the care of a Physician with respect to the Pre-Existing Condition or related condition(s), for a period of 12 consecutive months beginning on or after the first day of coverage, the pre-existing condition exclusion will no longer apply and any eligible charges incurred after the treatment free period will be considered for reimbursement; b) Emergency Medical Evacuation/Repatriation and Return of Remains Mortals

Cremation, a minimally necessary container appropriate for transportation, shipping costs and the necessary government authorizations. All Covered Expenses in connection with a Return of Mortal Remains must be pre-approved and arranged by an Assistance Company representative appointed by the Company.

The Team Assist offers these services

Medical assistance: Medical referral, medical monitoring, prescription drugs or other medical supplies, and is not under the care of a Physician with respect to the Pre-Existing Condition or related condition(s), for a period of 12 consecutive months beginning on or after the first day of coverage, the pre-existing condition exclusion will no longer apply and any eligible charges incurred after the treatment free period will be considered for reimbursement; b) Emergency Medical Evacuation/Repatriation and Return of Remains Mortals

Cremation, a minimally necessary container appropriate for transportation, shipping costs and the necessary government authorizations. All Covered Expenses in connection with a Return of Mortal Remains must be pre-approved and arranged by an Assistance Company representative appointed by the Company.

The Team Assist offers these services

Medical assistance: Medical referral, medical monitoring, prescription drugs or other medical supplies, and is not under the care of a Physician with respect to the Pre-Existing Condition or related condition(s), for a period of 12 consecutive months beginning on or after the first day of coverage, the pre-existing condition exclusion will no longer apply and any eligible charges incurred after the treatment free period will be considered for reimbursement; b) Emergency Medical Evacuation/Repatriation and Return of Remains Mortals

Cremation, a minimally necessary container appropriate for transportation, shipping costs and the necessary government authorizations. All Covered Expenses in connection with a Return of Mortal Remains must be pre-approved and arranged by an Assistance Company representative appointed by the Company.
Basic Medical Expense (per Accident or Sickness) $500,000

Chiropractic Care & Therapeutic Services

Evacuation/Repatriation $50,000

Deductible $50

The Insurance Company of the State of Pennsylvania,

means surgery or medical treatment not necessitated by

Accidental Death & Dismemberment $6,000

Emergency Dental $500

Electronic Devices $500

This coverage provides you with $2,000 in

Personal Effects Loss $2,000

Return Air Benefit $1,000

To the extent the Company pays for a loss suffered by

the Insured, the Company will take over the rights and remedies the Insured

had relating to the loss. This is known as subrogation. The Insured must help

the Company to preserve its rights against those responsible for the loss.

In addition to the exclusions listed above, the following exclusions apply to

Accidental Death and Dismemberment Insurance only:

• disease of any kind
• bacterial infections except pyogenic infection which shall occur through
  an accidental cut or wound
• neuroses, psychoneuroses, psychopathies, psychoses or mental or emotional dis-
  eases or disorders of any type

Right of subrogation To the extent the Company pays for a loss suffered by

an Insured, the Company will take over the rights and remedies the Insured had relating to the loss. This is known as subrogation. The Insured must help the Company to preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured’s rights, the Insured must sign an appropriate subrogation form supplied by the Company.

Elective surgery means surgery or medical treatment not necessitated by a pathological or traumatic change in the function or structure in any part of the body first occurring after the insured’s effective date of coverage. Elective surgery includes, but is not limited to, circumcision, tubal ligation, vasectomy, breast reduction, sexual reassignment surgery and submucous resection and/or other surgical correction for deviated nasal septum, other than for necessary treatment of covered acute purulent sinusitis. Elective surgery does not apply to cosmetic surgery required to correct a covered accident.

Elective treatment means surgery or medical treatment not necessitated by a pathological or traumatic change in the function or structure in any part of the body first occurring after the insured’s effective date of coverage. It includes, but is not limited to, acne, nonmalignant warts and moles, weight reduction, infertility and learning disabilities.

Personal effects coverage—This coverage provides you with $2,000 in Personal Effects Coverage subject to a maximum $100 per item ($500 for electronic devices) and deductible of $100 per incident for loss or theft of your personal items.

The following exclusions apply:

• loss of money, notes, securities, tickets and documents (driver’s licenses, passports, passes, etc.)
• jewelry, watches, articles consisting in whole or in part of silver, gold or platinum and furs
• animals, automobiles, automobile parts and equipment, motorcycles, skis, bicycles, boats, motors or other conveyances
• any kind of glasses (including sunglasses) and contact lenses
• breakage of articles or a brittle nature unless caused by thieves
• loss or damage caused by, or resulting from, declared or undeclared war
• loss due to wear, tear, gradual deterioration or negligence on the part of the Insured.

If you have any questions concerning your coverage, call CISI at 203-399-5130

2007 Camp America and Resort America
Policy #GLB 9111593

underwritten by The Insurance Company of the State of Pennsylvania, a member of the AIG Companies

Schedule of Benefits (subject to policy terms & conditions)
Policy GLB 9111593

Basic Coverage & Services: Maximum Limits

• Basic Medical Expense (per Accident or Sickness) $500,000
• Deductible $50
• Accidental Death & Dismemberment $6,000
• Evacuation/Repatriation $50,000
• Emergency Dental $500
• Emergency Family Reunion $1,000
• Return Air Benefit $1,000
• Chiropractic Care & Therapeutic Services
• Personal Effects Coverage subject to a maximum $100 per item ($500 for electronic devices) and deductible of $100 per incident for loss or theft of your personal items

Outpatient Limit Maximum of $50/visit

AIG Assist Package Included

AIG Assist ID # GLB 9111593

Personal Effects Upgrade

(in addition to Basic Coverage):

Maximum Limits

• Personal Effects Loss $2,000
• Personal Effects Deductible $100
• Per Item Limit $100
• Electronic Devices $500

Introduction

It is our privilege to extend to all participants in our Camp America and Resort America programs one of the most comprehensive insurance plans offered to international students working in the U.S.

The medical plan applies to all participants on the program sponsored by Camp America. If you have purchased the Personal Effects insurance, you have additional coverage.

11/06
established by a prior call or attendance of a Physician
• Treatment of the Temporomandibular joint
• Vocational, speech, recreational or music therapy
• Services or supplies performed or provided by a Relative of the Insured Person, or anyone who lives with the Insured Person
• The refusal of a Physician or Hospital to make all medical reports and records available to the Company will cause an otherwise valid claim to be denied
• Cosmetic or plastic Surgery, except as the result of a covered Accident; for the purposes of this Policy, treatment of a deviated nasal septum shall be considered a cosmetic condition
• Elective Surgery/Treatment which can be postponed until the Insured Person returns to his/her Home Country, where the objective of the trip is to seek medical advice, treatment or Surgery
• Eye refractions or eye examinations for the purpose of prescribing corrective lenses for eye glasses or for the fitting thereof, unless caused by Accidental bodily Injury incurred while insured hereunder
• Treatment in connection with alcoholism and drug addiction, or use of any drug or narcotic agent
• Injury sustained while under the influence of or Disability due to wholly or partly to the effects of intoxicating liquor or drugs other than those drugs taken in accordance with treatment prescribed and directed by a Physician for a condition which is covered hereunder
• Any Mental and Nervous disorders or rest cures, except as specified
• Treatment while confined primarily to receive custodial care, educational or rehabilitative care, or nursing services
• Congenital abnormalities and conditions arising out of or resulting therefrom
• Expenses as a result or in connection with intentionally self-inflicted Injury or Illness
• Expenses as a result or in connection with the commission of a felony offense
• Hang gliding, parachuting, bungee jumping, racing by horse, motor vehicle or motorcycle, parasailing
• Injuries for which benefits are payable under any no-fault automobile Insurance Policy
• Dental care, except as the result of Injury to natural teeth caused by Accident, unless otherwise covered under this Policy
• Routine Dental Treatment
• For Pregnancy or Illness resulting from Pregnancy, childbirth or miscarriage
• Drug, treatment or procedure that either promotes or prevents conception, or prevents childbirth, including but not limited to: artificial insemination, treatment for infertility or impotency, sterilization or reversal thereof, or abortion
• Treatment for human organ tissue transplants and their related treatment
• Weak, strained or flat feet, corns, calluses, or toenails
• Diagnosis and treatment of acne
• Injury sustained while the Insured Person is riding as a pilot, student pilot, operator or crew member, in or on, boarding or alighting from, any type of aircraft.

In addition to the exclusions listed above, the following exclusions apply to Accidental Death and Dismemberment Insurance only:
• disease of any kind
• bacterial infections except pyogenic infection which shall occur through an accidental cut or wound
• neuroses, psychoneuroses, psychopathies, psychoses or mental or emotional diseases or disorders of any type

Right of subrogation To the extent the Company pays for a loss suffered by an Insured, the Company will take over the rights and remedies the Insured had relating to the loss. This is known as subrogation. The Insured must help the Company to preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured's rights, the Insured must sign an appropriate subrogation form supplied by the Company.

Elective surgery means surgery or medical treatment not necessitated by a pathological or traumatic change in the function or structure in any part of the body first occurring after the insured’s effective date of coverage. Elective surgery includes, but is not limited to, circumcision, tubal ligation, vasectomy, breast reduction, sexual reassignment surgery and submucous resection and/or other surgical correction for deviated nasal septum, other than for necessary treatment of covered acute purulent sinusitis. Elective surgery does not apply to cosmetic surgery required to correct a covered accident.

Elective treatment means surgery or medical treatment not necessitated by a pathological or traumatic change in the function or structure in any part of the body first occurring after the insured’s effective date of coverage. It includes, but is not limited to, acute, nonmalignant warts and moles, weight reduction, infertility and learning disabilities.

Personal effects coverage—This coverage provides you with $2,000 in Chiropractic Care & Therapeutic Services.

A Plan of Insurance

designed for

2007 Camp America and Resort America
Policy #GLB 9111593
underwritten by The Insurance Company of the State of Pennsylvania, a member of the AIG Companies

Schedule of Benefits (subject to policy terms & conditions)
Policy GLB 9111593
Basic Coverage & Services: Maximum Limits
• Basic Medical Expense (per Accident or Sickness) $500,000
  • Deductible $50
  • Accidental Death & Dismemberment $6,000
  • Evacuation/Repatriation $50,000
  • Emergency Dental $500
  • Emergency Family Reunion $1,000
  • Return Air Benefit $1,000
  • Chiropractic Care & Therapeutic Services
  • Outpatient Limit Maximum of $50/visit
  • Maximum of 10 visits $500 overall maximum

AIG Assist Package
  Included
AIG Assist ID # GLB 9111593
Personal Effects Upgrade
(in addition to Basic Coverage):
Maximum Limits
• Personal Effects Loss $2,000
• Personal Effects Deductible $100
• Per Item Limit $100
• Electronic Devices $500

Introduction
It is our privilege to extend to all participants in our Camp America and Resort America programs one of the most comprehensive insurance plans offered to international students working in the U.S. The medical plan applies to all participants on the program sponsored by Camp America. If you have purchased the Personal Effects insurance, you have additional coverage.

If you have any questions concerning your coverage, call CISI at 203-399-5130

11/06