

SPECIAL SCHOOL BOARD MEETING

TABLE OF CONTENTS

NOVEMBER 14, 2016

Agenda

Mission, Vision, Beliefs	1
Multi-Year Strategic Plan	2
Board Informer Open Session	3
Neptune Paperless Meetings System	4-6
Japanese Club Field Trip	7-36
Results R-2: Social Studies and Science	37-45
Referendum Data	46-47
Board Informer Closed Session	49

SCHOOL DISTRICT OF WISCONSIN DELLS

SPECIAL SCHOOL BOARD MEETING

MONDAY, NOVEMBER 14, 2016

6:30 P.M.

HIGH SCHOOL LIBRARY-MEDIA CENTER
Wisconsin Dells High School
520 Race Street
Wisconsin Dells, WI 53965

* * * * *

"This meeting is a meeting of the Board of Education in public for the purpose of conducting the School District's business and is not to be considered a public community meeting. There is a time for public participation during the meeting as indicated in the agenda."

"Upon request to the District Administrator, submitted twenty-four (24) hours in advance, the District shall make reasonable accommodation including the provision of informational material in an alternative format for a disabled person to be able to attend this meeting."

AGENDA

- 1.0 Call to Order
- 2.0 Roll Call (Kathy Anderson, John Campbell, Jennifer Gavinski, James McClyman, Robert McClyman, Joey Van Dinter, and Jesse Weaver)
- 3.0 Approval of Agenda
- 4.0 Public Comment/General Subject Matter Discussion
- 5.0 New Business
 - 5.1 Presentation on Implementing an Electronic Board Packet System
 - 5.2 Consideration of Extended Overnight Field Trip to Japan
 - 5.3 Consideration of Results Policy #2: Academic Performance – Science/Social Studies
 - 5.4 Discussion on the School District Community Survey Results

- 6.0 The School Board May Adjourn to Closed Session per Wis. Stat. §§ 19.85 (1) (c) considering employment, promotion, compensation or performance evaluation data of any public employee over which the governmental body has jurisdiction or exercises responsibility; to discuss and take action, if appropriate, regarding quarterly review of Superintendent and an update on an employee complaint.
- 7.0 Reconvene Into Open Session
- 8.0 Act on Closed Session Items if Applicable
- 9.0 Adjournment

Posted: November 11, 2016

BOARD INFORMER

11-14-2016

Meeting Time: 6:30 p.m.

We are WD

Our Mission

Connect • Inspire • Achieve
Everyone. Every day.

Our Vision

Cultivating academic excellence today for a stronger community tomorrow.

Our Beliefs

We set high academic standards and expect each student to reach his/her full potential.

We are committed to the whole child: healthy, safe, engaged, supported, and challenged.

We embrace our diversity, integrate equitable practices, and believe all students will be successful regardless of race, income, gender, sexual identity and learning differences.

We partner with families and community to develop informed and responsible citizens.

We collaborate to support individuals and families.

We deliver a consistent and rigorous curriculum in every classroom.

We value adult learning as a key to student learning.

We pursue innovative ideas, evidence-based practices, and modern technologies.

We seek to provide physical environments that facilitate high levels of learning and serve the needs of our community.

**We live our mission and strive for our vision.
This is WD.**

School District of Wisconsin Dells

Multi-Year Strategic Plan

June 2016

Core Strategies

The following four core strategies organize our continuous improvement work at the system and at the school level over the long-term. Our core strategies are further defined and supported by our strategic objectives. We will focus on key performance objectives each year within these identified areas in order to meet our system's mission, vision, and belief statements.

- **Student Growth and Achievement**
- **District and Community Engagement**
- **Professional Growth and Leadership**
- **Facilities, Finance, and Operations**

Strategic Objectives

Student Growth and Achievement

Use data-driven, culturally-responsive instruction to improve K-12 literacy and to ready learners for colleges and careers.

District and Community Engagement

Connect with the community to promote our district and best serve our students and families.

Professional Growth and Leadership

Enhance student learning and retain top talent by supporting creative implementation of high-impact instructional strategies and targeted professional development.

Facilities, Finance, and Operations

Implement a long-term plan that ensures safe, clean, and healthy facilities that foster multiple student learning pathways while maintaining fiscal responsibility.

New Business:

1. One item that Administrative Assistant Brenda Gurgel and Business Manager Deb Michel have researched is the prospect of moving to an electronic board packet system. After they have researched and compared several options, they are prepared to provide you with an overview of the Neptune meeting management system. They will provide you with a presentation on the positive facets of moving to this type of system.
2. Please see the detailed packet outlining a request for the Japanese Exchange Program to take an extended overnight field trip to Japan during the summer of 2017. Please note that since the last overnight trip the District sponsored, and was ultimately affected by the travel agency filing bankruptcy, the Japanese Exchange Group has secured a travel agent that is insured and bonded. This virtually eliminates the previous exposure the District successfully worked through for the band trip. The summer 2017 trip itinerary is attached to this packet for your review.
3. As we have done the previous two months, Mr. Grove and I are providing you with an overview of how District students have been performing in the content areas of Science and Social Studies, as it relates to Results Policy #2.
4. The last item of open session will allow for some continued dialogue on the recently received survey results. Again, as a reminder from Sue Peterson, she would like the focus to remain on the data at this point in time. This conversation may also lead to what other next steps the District may wish to consider, such as getting more input from the PRA/ADCI team, or further financial analysis from Lisa Voisin of Baird. Finally, please see the attached summary documents Baird has recently prepared for their clients, regarding a historical look at referendums and a sheet indicating whether the need for referendum is unique to your district.
5. As a reminder, Brenda Gurgel will follow up with you sometime this evening to discuss your plans for attending the state education convention in January. In order to take advantage of "early bird" registration prices and reserve preferred hotel rooms in Milwaukee, reservations must be made soon. Your plans should be confirmed with Brenda no later than noon, Wednesday, November 16.

Neptune Paperless Meeting Manager Software

What is it? The Neptune Meeting Management Software allows a school district to conduct paperless meetings. The software was created by CESA 7 in Green Bay, Wisconsin. The Regional Computer Center of CESA 7 has been providing high-quality software and professional, responsive software support to school districts in Wisconsin for over 40 years.

Highlights:

- Web-based, password-protected paperless meeting management software. Data is hosted on a server located in a professionally hosted environment.
- Single source/database for all meeting information; agenda, attendees, minutes, notes and files.
- Search content from prior meetings. Keyword search from all previous meetings is available for group members.
- Agenda and minutes can be published and made available to the public.
- Email reminders can be sent to all group members that have been invited to the meeting.
- Various levels of security can be designated for group owners and meeting attendees.
- Note-taking functionality is an option for group members; all notes are private to the author.

Benefits:

- Professional training is available for administrators and staff that conduct district meetings. Optionally, a consultant can attend, and provide assistance at our first Neptune board meeting.
- CESA 7 provides email and telephone support from experienced consultants.
- The software is user-friendly and easy to learn.
- The software is continually enhanced based on customer recommendations.



Neptune Paperless Meetings

Q. What type of server set up will we need for the Neptune program?

A. Neptune is a web based system hosted on a server located in a secure professionally hosted environment. You do not need to install anything locally; you will connect to our server with a custom URL. Data is backed up nightly.

Q. What is the cost of Neptune?

A. Neptune is made available via a Software as a Service (SaaS) model. The annual cost is based on school district enrollment; contact CESA 7 and we will create a proposal. The annual cost includes hosting, telephone support and software enhancements.

There will also be a one-time cost of approximately \$1,500.00 the first year for system setup, and one day of training.

Q. Can the public see meeting information like agendas and minutes in Neptune?

A. The Neptune system includes a URL for public viewing of meeting information. This URL can be made available on your district website. The Neptune administrator has control over every item that gets posted to the public Neptune site; this includes agendas, minutes and meeting documents.

Q. Can we use i-devices to log in to the Neptune program?

A. Neptune can be accessed using home or work computers, laptops, Net books, tablets, iPads, iPhones, etc. All your board members will need internet access to connect to Neptune.

Q. How can we limit who has access to some information in Neptune?

A. Neptune is password protected. Each meeting attendee logs in with their own password protected account. Security rights are given to each account by the Neptune Administrator who creates the meeting and meeting documents.

Q. Some meeting documents cannot be shared with all meeting attendees; can Neptune allow for multiple levels of access?

A. Each item in Neptune can be given separate security access rights by the Neptune Administrator.

Q. Can board members make notes in Neptune?

A. Each person who logs in to Neptune can make notes that are personal to their login. These notes can only be edited/deleted by that person. This can be a useful tool to use when preparing for an upcoming meeting.

Q. Is there a way to send alerts, emails to board members in Neptune?

A. As soon as the Neptune Administrator has the upcoming meeting setup and ready to be viewed, they can send a Meeting Reminder email through Neptune to meeting attendees.

Q. Will all meetings and meeting information be stored in Neptune?

A. All meetings created in Neptune will remain on the server, and be available to search and view.

Q. Our board members are not all computer savvy. Will they be able to use this program easily?

A. Neptune is a very intuitive program. Most districts have had great success with their school board using the program. In the event that your board needs additional assistance, we offer an optional on-site visit to your first Neptune board meeting to ensure that everyone fully understands the system.



COOPERATIVE EDUCATIONAL SERVICE AGENCY 7

JEFFREY P. DICKERT, ADMINISTRATOR

REGIONAL COMPUTER CENTER, BRAD RODGERS, DIRECTOR

E-Mail: brodgers@cesa7.org

595 Baeten Road
Green Bay, WI 54304
Ph: (920) 617-5648
Fax: (920) 492-5965

Neptune Paperless Meeting Manager Software

Proposal for the School District of Wisconsin Dells

November 11, 2016

Initial cost:

Software Subscription, Support and Data Hosting	
Fiscal year 2016-2017 (annual cost)	1,553
System setup and one day of training (one-time cost)	1,500
Grand Total First Year	\$3,053

This proposal includes Neptune software subscription, telephone consultation, software enhancements, and first year set up and training costs.

Second and subsequent year cost estimate: \$1,553.

Two half-day training sessions; one session in your district, one via WebEx or phone conference.

Optional cost for consultant to attend and assist at a School Board meeting:

- \$250 plus travel (.50 per mile)

This proposal is valid for 90 days from the proposal date.



CESAS MAKE POSSIBLE THE
SCHOOLS WISCONSIN WANTS

CESA 7 Main Office: 595 Baeten Road, Green Bay, WI 54304
Ph.: (920) 492-5960 Fax: (920) 492-5965

Website: <http://www.cesa7.k12.wi.us>

CESA 7 Mission: *Providing collaborative leadership and service*

PROPOSAL FOR OVERNIGHT/EXTENDED STUDENT TRIPS

Type of Trip – Trip to Japan

Proposed Departure Date – June 21, 2017 Return Date – July 4, 2017

Proposer – Lisa McClyman

Position – Japanese Exchange Program Advisor

Date by which response is needed – 12/1/2016 Proposal Date – 11/4/2016

A. PURPOSE

1. What is the Major place to be visited or event to be attended?

Japan – Kyoto, Miyajima Island, Hiroshima, Tokyo, Iwaizumi (see itinerary – attachment 1)

2. How is the trip related to the educational program of the District?

This program will give our students first-hand experience learning about the Japanese culture. It will give them the opportunity to visit a US/Japanese site of historical significance. Our students will have the opportunity to partake in the educational life of a typical Japanese student. Our students will have a life lesson on traveling in general, foreign currency exchange, and language translation.

3. In what ways will the students benefit?

Our students will have the opportunity to travel overseas and benefit from the knowledge of how to travel, the opportunity to communicate with another culture/language, opportunity to get an introduction into foreign cultures. The trip will broaden our student's views and will possibility open them to career path.

4. In what ways will the District benefit?

Our students come back more mature, I have had several parents state that their student came back more respectful, responsible and more open to change and learning. Even if we can only impact 10 students at a time, I feel that the benefit is a positive benefit to the school district.

5. How will the trip be evaluated to determine the extent to which these benefits were realized?

We will be asking the students to put together a small journal and we will be gathering as a group each night to discuss the day in Japan. We will also have a meeting when we return to Wisconsin to go over everything we have seen, the experiences we have had together and what we would like to change for the next trip.

B Students and Staff

1. Which Students (grade, class or organization) will be going?

Taylor Shumann	grade 11
Molly McClyman	Grade 9
Amaya Kitterman	Grade 9
Deviin Piwonski	Grade 9
Ethan Luther	Grade 9
Brianne Day	Grade 10
Carrie Arneson	Grade 9
Kimberly Atkinson	Grade 9

2. How many students in total?

8

3. How many students are currently experiencing academic problems?

Information is unavailable to me as an advisor.

4. Which staff member will be in charge?

Lisa McClyman

5. What previous experience has the staff member had in conducting overnight or extended field trips?

I have been in charge of the Japanese Exchange Program for the last 3 years. I have planned/organized the visit of our Japanese guest when the visit in January. I have assisted in Girl Scout overnight trips to Mall of America and a Trip to Milwaukee Zoo & Milwaukee museum.

6. What other staff members will be going?

Jim McClyman

7. How many chaperones, in addition to staff members will be going?

We have 2 other parents that will be going.

8. What are their names and affiliations with the students?

Lisa McClyman - Mother to Molly McClyman

Kari Luther – Mother to Ethan Luther

9. How many school days will be missed?

None

10. How will teachers be advised in advance that the students will be out of school?

Not applicable

C School Work

1. How will missed work be made up?

The trip will be during the summer. Not applicable

2. What special assistance will be provided to the students with academic problems?

Not applicable

D Itinerary

1. What is the destination?

Please see attachment #1

2. What will be the mode of transportation? What liability insurance does the carrier have?

If arrangements can be made to fly out of Milwaukee, we will be using a school bus to take us to the airport on June 21, 2013 and pick us up on July 4, 2016. If we have to fly out of Chicago, we will be hiring Able Trek out of Reedsburg to take us to the airport and pick us up. We will be using an airline to fly to and from Japan. While in Japan we will be using the public transportation system. All detailed information on Modes of transportation to airport, airline flights and public transportation will be given in detail by May 1, 2017 to school board/Terry Slack.

3. Where will the group be housed and fed?

Please see the itinerary attachment #1. From Wed 6/21 thru Wed 6/28 we will be staying in hotels and eating out at restaurants. (all meals are included in the cost of the trip). On 6/28/2017 in the PM we will be going to stay with our host families. They will be feeding and taking care of us. All detailed information on restaurants and hotels will be provided by May 1, 2017 to school board/Terry Slack.

4. What enroute or supplementary activities are planned?

Please see attached itinerary attachment #1.

5. What arrangements have been made for dealing with emergency situations?

Please see attachment #2

6. If tour guides are involved, what liability insurance do they carry?

We will be using JTB USA Inc travel agency. They are bonded and have insurance. See attachment #3.

E Finances

1. What is the estimated total cost and cost per student?

See attachment #4

2. What is the source of funds?

The students/parents will be paying for the trip. They have also had the opportunity to do fundraising thru the school and community events!

3. How will the funds be collected and safeguarded?

I (Lisa McClyman) will be collecting money and writing receipts for every collection of payments (\$450.00) and depositing it into account 217 thru the school district. All money earned thru the fundraising will be submitted to the school district activities office with a detailed list of the money each student has earned for that fundraiser. I keep an individual report for each student and I distribute this report at the beginning of each meeting for the student/parent to review.

4. How will any shortfall be made up or excess funds used?

Any shortfalls will be paid by the student's family. And excess funds will be distributed back to the families based on what was paid by each family.

5. What provision has been made for students who are financially unable to pay any necessary costs?

We have organized multiple fund raisers and scholarships to help defer the cost of the trip for each student.

F Communications

1. How will you communicate to parents prior to, during, and after the trip?

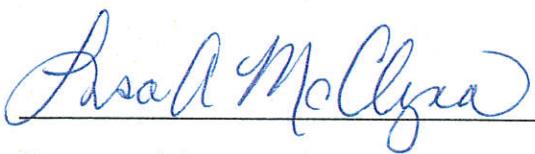
Communication has and will be done thru emails, facetime and phone calls. While we are in Japan, I will be sending daily emails and a picture to all parents to update them on our day in Japan. If a problem occurs while we are in Japan we will contact the parents via phone.

2. List telephone numbers at destination and where group will be housed.

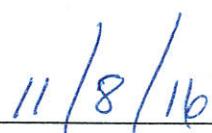
All detailed information on destinations and housing will be provided by May 1, 2017 to school board/Terry Slack.

3. What information will be provided to the media and the community?

We will contact the paper to join us during our last meeting on June 14, 2017 to take photos and to do a write up for the paper.



Signature of the Requestor



Date

Approved:

Principal

Date

Board of Education

Date

Attachment #1



As of 5/2/16

2017 Wisconsin Student Group Itinerary

Based on 14 passengers (10 students + 4 faculty)

DATE	Tentative ITINERARY			HOTEL	LOCATION	MEALS
1 6/21	Wed	Depart from US to Narita or Osaka				
2 6/22	Thu	Arrive at Narita or Osaka. Transfer to the hotel.	TBD	NARITA or KYOTO		D
3 6/23	Fri	City tour of Kyoto Visit to : Sanjusangendo, Kiyomizu temple	Kyoto Utano Youth Hostel	KYOTO	B L D	
4 6/24	Sat	City tour of Kyoto Visit to : Hozu river cruise, Tenryuji-temple, Golden Pavillon	Kyoto Utano Youth Hostel	KYOTO	B L D	
		Transfer to Miyajima island. City tour of Miyajima. Visit to: Itsukushima Shirine				
5 6/25	Sun	Enjoy the natural hot springs at Ryokan	Kukunoya or Similar	MIYAJIMA	B L D	
12		Transfer to Hiroshima. City tour of Hiroshima Visit to: Peace museum, peace park				
	6 6/26	Mon	Transfer to Tokyo in the afternoon	Toyoko inn or similar	TOKYO	B L D
7 6/27	Tue	Full day city tour of Tokyo Visit to: Tsukiji fish market, Skytower, Asakusa, Harajuku	Toyoko inn or similar	TOKYO	B L D	
8 6/28	Wed	Transfer to Morioka	Homestay	IWAIZUMI	B	
9 6/29	Thu	Homestay	Homestay	IWAIZUMI		
10 6/30	Fri	Homestay	Homestay	IWAIZUMI		
11 7/1	Sat	Homestay	Homestay	IWAIZUMI		
12 7/2	Sun	Homestay	Homestay	IWAIZUMI		
13 7/3	Mon	Homestay	Homestay	IWAIZUMI		
14 7/4	Tue	Transfer to Narita/ Take a flight to US. Arrive on the same day				

Flight schedule

TBD

Accommodations

TBD

Emergency contact in Japan

TBD

*Quotation is based on 14 pax (4 chaperons + 10 students)

1 AIR FARE

Airline - TBD

Base fare	\$ 1,250.00	×	14	persons	=	\$ 17,500.00
Fuel surcharge / Tax	\$ 291.00	×	14	persons	=	\$ 4,074.00
Ticketing fee	\$ 30.00	×	14	persons	=	\$ 420.00

Sub Total: \$ 21,994.00

2 ACCOMMODATION

Narita (TBD) 1 night

Twin room	\$ 80.00	×	14	person	×	1	night(s)	=	\$ 1,120.00
Breakfast is included									

Kyoto (Utano Youth Hostel) 2 nights

Dormitory for students	\$ 38.00	×	10	student	×	2	night(s)	=	\$ 760.00
Twin rooms for chaperons	\$ 46.00	×	4	chaperon	×	2	night(s)	=	\$ 368.00
Breakfast, and Towel rental included									

Miyajima (Kurayado Iroha Ryokan) 1 night

Single room	\$ 285.00	×	14	person	×	1	night(s)	=	\$ 3,990.00
Breakfast and Dinner included									

Tokyo (TBD) 2 nights

Twin room	\$ 80.00	×	14	person	×	2	night(s)	=	\$ 2,240.00
Breakfast is included									

Sub Total: \$ 8,478.00

3 TRANSPORTATION

JR Pass 2 week coach class	\$ 460.00	×	14	person				=	\$ 6,440.00
Kyoto 2 day subway / bus unlimited ride	\$ 35.00	×	14	person				=	\$ 490.00
JR Suica card for Subway etc	\$ 80.00	×	14	person				=	\$ 1,120.00
Taxi	\$ 30.00	×	14	person				=	\$ 420.00

Sub Total: \$ 8,470.00

4 OTHERS

Lunch (TBD)	\$ 20.00	×	14	person	×	5	times	=	\$ 1,400.00
Dinner (TBD)	\$ 35.00	×	14	person	×	5	times	=	\$ 2,450.00
Admissions in Tokyo, Kyoto and Hiroshima	\$ 70.00	×	14	person				=	\$ 980.00
River boat cruise	\$ 55.00	×	14	person				=	\$ 770.00
Coin Locker / storage	\$ 16.00	×	14	person				=	\$ 224.00
Luggage shipping	\$ 29.00	×	14	person	×	2	times	=	\$ 812.00
Travel insurance (Students) no trip cost coverage	\$ 35.00	×	10	student				=	\$ 350.00
Travel insurance (Adult) no trip cost coverage	\$ 40.00	×	4	chaperon				=	\$ 160.00
** Travel insurancie with trip cost coverage	\$ 180.00	×	10	student				=	FYI
** Travel insurancie with trip cost coverage	\$ 180.00	×	4	chaperon				=	FYI
Tour escort expense (airfare, hotel, cellphone, mea	\$ 2,900.00				×	1	times	=	\$ 2,900.00
Tour escort labor	\$ 150.00	×	8	days	×	1	times	=	\$ 1,200.00

Sub Total: \$ 11,246.00

5 JTB TRAVEL MANAGEMENT FEE

8% of total land arrangement (2+3+4) = \$ 4,015.04

Sub Total: \$ 4,015.04

GRAND TOTAL AMOUNT :	\$ 54,203.04
----------------------	--------------

PRICE PER PERSON (14 participants)	\$ 3,871.65
------------------------------------	-------------

Attachment #2

School District of Wisconsin Dells

811 County Road H

Wisconsin Dells, WI 53965 USA

Japanese Exchange Program

Lost/Missing Child and

Emergency Communication Plan/Contract

All emergencies and medical concerns will be discussed between the chaperones; they will determine the severity of the situation. Based on the severity the School Administrator and parents will be contacted as soon as possible.

Keep Close Eye on All Students/Parents

Students are very curious. If something catches their attention, they may wander off to examine it more closely. Students will be assigned a partner and should report any issues involving their partner to a chaperone. If at any time their partner is not within eyes view, or they have not returned within the designated time, they are to notify the closest chaperone. Also, chaperones should frequently do a head count to ensure all students are present on the trip.

If a Child is Lost/Missing

All students and chaperones will have a signed contract stating the proper procedures if they become separated from the group before departure. Everyone must carry their itinerary with accommodation numbers on them at all times. Everyone will receive a business card with emergency contact numbers, which must be carried at all times.

The chaperones will assess the situation; determine the best person to retrieve the missing person(s).

When traveling, if a student becomes separated they are to remain at the last location the group was last together, for a minimum of 2 hours.

Keep in mind that it will take awhile to disembark and catch a return means of transportation to retrieve the person.

i.e. if a student is not able to board a train, they are to remain at that location (platform). A chaperone will return to that location to pick them up. DO NOT board the next train, wait there! Same rule for all means of transportation.

If after 2 hours, the missing person is not rejoined with the group/chaperone the missing person should go to the nearest government person (police or train staff) or office and ask to us the phone. They should then call the numbers indicated on the emergency card or the last hotel the group stayed. Everyone should have this information on him or her at all times! We will check periodically to insure everyone is carrying his or her emergency information.

Leave your name and the number you are calling from. By doing this we will be able to communicate and reunite.

If you are the missing person and you have not been reunited with the group or been in contact with the group after 3 hours; contact the local police and the other numbers as indicated on the emergency card.

Give your name, state you are with the Japanese Exchange Program from Wisconsin Dells, WI USA, ask for help stating where you are.

No one should wonder off on his or her own to locate a potential missing person.

At no time will any of the group of students be left without a chaperone in charge.

A plan will be created and agreed on by the chaperones designating the location and time frame to reunite with the group before any of the group separate.

Medical Emergency

If a student becomes injured and needs medical attention the chaperones will assess the situation and determine the best person to stay with the group and who will escort the student to receive care.

The proper documents, medical permission form and passport will be sent with the chaperone and the injured person.

At no time will any of the group of students be left without a chaperone in charge. A plan of location and timeframe to reunite with the group will be determined before any of the group separate.

It will be up to the collective agreement of the chaperones as to the severity of the emergency. As soon as time permits the parents will be notified of the emergency based on the severity. Contact will be made to the district administrator and school principal based on the type of emergency as soon as possible.

Emergency contact information for all travelers will be provided to the District Administrator and school Principals a minimum of 30 days prior to departure.

I read and understand the Lost/Emergency plans. I will follow the above rules in the case of an emergency.

Student's/Chaperone's Signature

Date

Parent's Signature

Date



Attachment #3

SF W

PO Box 5077 Sioux Falls SD 57117-5077

June 30, 2015

1-800-331-6053

Fax 1-605-335-0357

www.cnasurety.com

JTB USA INC.
% Sumi Unno
19700 Mariner Ave.
Torrance, CA 90503

File # 141471433
JTB USA INC.

\$85,000.00
Company Code: 0601
Written By: WESTERN SURETY COMPANY
SELLER OF TRAVEL BOND

Enclosed is your renewal certificate. To continue your bond coverage and keep it in force, you must file this renewal document with the state of California.

If you are no longer required to post this bond, please write the word "Cancel" directly on the document, and return it to CNA Surety.

If you have any questions, please contact your local agent.

Enclosure



Western Surety Company

CONTINUATION CERTIFICATE

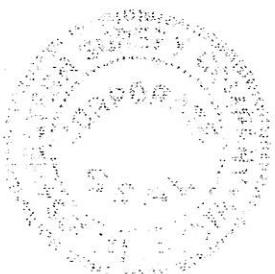
Western Surety Company hereby continues in force Bond No. 141471433 briefly described as SELLER OF TRAVEL BOND

for JTB USA INC.

, as Principal, in the sum of \$ EIGHTY-FIVE THOUSAND AND NO/100 Dollars, for the term beginning August 17, 2015, and ending August 17, 2016, subject to all the covenants and conditions of the original bond referred to above.

This continuation is issued upon the express condition that the liability of Western Surety Company under said Bond and this and all continuations thereof shall not be cumulative and shall in no event exceed the total sum above written.

Dated this 30 day of June, 2015.



WESTERN SURETY COMPANY

By Paul T. Brumit
Paul T. Brumit, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.

Western Surety Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

Paul T. Bruflat of Sioux Falls ;

State of South Dakota , its regularly elected Vice President , as Attorney-in-Fact, with full power and authority hereby conferred upon him to sign, execute, acknowledge and deliver for and on its behalf as Surety and as its act and deed, the following bond:

One SELLER OF TRAVEL BOND

bond with bond number 141471433

for JTB USA INC .

as Principal in the penalty amount not to exceed: \$85,000.00

Western Surety Company further certifies that the following is a true and exact copy of Section 7 of the by-laws of Western Surety Company duly adopted and now in force, to-wit:

Section 7. All bonds, policies, undertakings, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile.

In Witness Whereof, the said WESTERN SURETY COMPANY has caused these presents to be executed by its Vice President with the corporate seal affixed this 30 day of June , 2015 .

ATTEST

L. Nelson, Assistant Secretary

WESTERN SURETY COMPANY

By

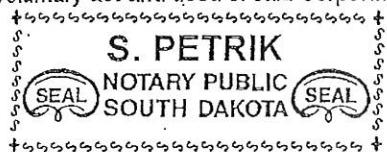
Paul T. Bruflat, Vice President



STATE OF SOUTH DAKOTA
COUNTY OF MINNEHAHA }
ss

On this 30 day of June , 2015 , before me, a Notary Public, personally appeared
Paul T. Bruflat and L. Nelson

who, being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President
and Assistant Secretary, respectively, of the said WESTERN SURETY COMPANY, and acknowledged said instrument to
be the voluntary act and deed of said Corporation.



My Commission Expires August 11, 2016

Notary Public

Student Protection Plan

Note: For residents of AK, CA, CO, IN, KS, MT, NH, NY, OR, TX and WA, this is not Your Certificate of Insurance. To obtain Your state specific Policy please contact Travel Insured at 866-684-0218.

Worldwide Assistance Services

The Travel Assistance feature provides a variety of travel related services. Services offered include:

- Medical Evacuation • Medically Necessary Repatriation
- Repatriation of Remains • Medical or Legal Referral
- Inoculation Information • Hospital Admission Guarantee
- Translation Service • Lost Baggage Retrieval
- Passport/Visa Information • Emergency Cash Advance
- Bail Bond • Prescription Drug/Eyeglass Replacement
- ID Theft Resolution Service • Concierge Service
- Business Concierge • Political and Natural Disaster Evacuation

Payment reimbursement to the Assistance Company is Your responsibility.

24/7 Worldwide Assistance Services
Travel Assistance, Medical Emergency,
888-268-2824

OR CALL COLLECT:
603-328-1725
(From all other locations)

Travel assistance services are provided by an independent organization and not by United States Fire Insurance Company or Travel Insured International. There may be times when circumstances beyond the Assistance Company's control hinder their endeavors to provide travel assistance services. They will, however, make all reasonable efforts to provide travel assistance services and help You resolve Your emergency situation.

Administered by



Quality Protection Worldwide

For questions or to report a claim, contact:

Travel Insured International, Inc.
855 Winding Brook Drive
Glastonbury, CT 06033
Customer Care-886-684-0218
Claims-800-243-2440

AVAILABILITY OF SERVICES

You are eligible for information and concierge services at any time after You purchase this plan. The Emergency Assistance Services become available when You actually start Your Covered Trip. Emergency Assistance, Concierge and Informational Services end the earliest of, midnight on the day the program expires; when You reach Your return destination; or when You complete Your Covered Trip. The Identity Theft Resolution Services become available on Your scheduled departure date for Your Covered Trip.

Services are provided only for an Identity Theft event which occurs while on Your Covered Trip. Identity Theft Resolution does not guarantee that its intervention on behalf of You will result in a particular outcome or that its efforts on behalf of You will lead to a result satisfactory to You. Identity Theft Resolution does not include and shall not assist You for thefts involving non-US bank accounts.

IDENTITY THEFT RESOLUTION SERVICES

In the event of an Identity Theft event while on Your Covered Trip, Travel Insured's designated provider will provide you with the support and tools needed for You to restore Your identity to pre-event status. Assistance includes contacting Your creditors to notify them of the event and to request replacement cards; connecting you with a friend or family member at home and providing them with the assistance to set up a transfer or wire of funds; information on how to contact the three major credit bureaus; guidance on how to obtain a police report; and providing You with a guide on how to restore Your credit.

CONCIERGE SERVICES

Concierge Services are provided by Travel Insured's designated provider. There is no charge for the services provided by the provider. You are responsible for the cost of services provided and charged for by third parties and for the actual cost of merchandise, entertainment, sports, tickets, food and beverages and other disbursement items. Services offered include:

- Destination Profiles • Epicurean Needs • Event Ticketing • Floral Services • Tee Time Reservations • Hotel Accommodations • Meet-And-Greet Services • Shopping Assistance Services • Pre-Trip Assistance • Procurement of Hard-To-Find Items • Restaurant Referrals and Reservations • Rental Car Reservations • Airline Reservations

POLITICAL EVACUATION SERVICES

Political Evacuation is provided by Travel Insured's designated provider. In the event of a political emergency situation due to government or social upheaval while traveling in a foreign country, the Assistance Company will evacuate You home or to the nearest place of safety and then home. All reasonable expenses incurred for Your transportation to the nearest place of safety, and then to Your home, are covered up to a maximum of \$100,000. Arrangements will be by the most appropriate and economical means available and consistent with Your health and safety. If an evacuation is impossible due to hostile conditions, the Assistance Company will use security resources to maintain contact with You until evacuation becomes possible or the emergency is concluded. All arrangements must be arranged and coordinated by the Assistance Company. Services rendered without the coordination and approval of the Assistance Company are not covered.

BUSINESS CONCIERGE SERVICES

Concierge Services are provided by Travel Insured's designated provider. There is no charge for the services provided by the provider. You are responsible for the cost of services provided and charged for by third parties. Services offered include:

- Emergency Correspondence And Business Communication Assistance • Assistance With Locating Available Business Services Such As:

T19070-INC Rev

7.1.2015

Express/Oversight Delivery Sites, Internet Cafes,
Print/Copy Services - Assistance With Or Arrangements
For Telephone And Web Conferencing • Emergency
Messaging To Customers, Associates, And Others (Phone,
Fax, E-mail, Text, etc.) • Real Time Weather, Travel Delay
And Flight Status Information • Worldwide Business
Directory Service For Equipment Repair/Replacement,
Warranty Service, etc. • Emergency Travel Arrangements

Claims Procedures

To facilitate prompt claims settlement:

TRIP CANCELLATION/TRIP INTERRUPTION:
IMMEDIATELY Call Your Travel Supplier and Travel
Insured International to report Your cancellation and avoid
non-Covered Expenses due to late reporting. Travel
Insured International will then advise You on how to obtain
the appropriate form to be completed by You and the
attending Physician. If You are prevented from taking Your
trip due to Sickness or Injury, You should obtain medical
care immediately. We require a certification by the treating
Physician at the time of Sickness or Injury that medically
imposed restrictions prevented Your participation in the
Trip. Provide all unused transportation tickets, official
receipts, etc.

TRIP DELAY: Obtain any specific dated documentation,
which provides proof of the reason for delay (airline or
Cruise line forms, medical statements, etc.).
Submit this documentation along with Your Trip itinerary
and all receipts from additional expenses incurred.

MEDICAL EXPENSES: Obtain receipts from the providers
of service, etc., stating the amount paid and listing the
diagnosis and treatment.

BAGGAGE: Obtain a statement from the Common Carrier
that Your Baggage was delayed or a police report showing
Your Baggage was stolen along with copies of receipts for
Your purchases.

T19070-INC Rev 7/1/2015

SHORT TERM COVERAGE

NON-RENEWABLE

TABLE OF CONTENTS

SCHEDULE OF BENEFITS	SECTION I. COVERAGES
DEFINITIONS	SECTION II. INSURING PROVISIONS
GENERAL EXCLUSIONS	SECTION III. GENERAL EXCLUSIONS
GENERAL PROVISIONS	SECTION V. GENERAL PROVISIONS
SECTION VI. STATE ENDORSEMENTS	

SCHEDULE OF BENEFITS

Certificate of Insurance	Maximum Benefit Amount
Trip Cancellation**	Trip Cost*
Trip Interruption **	150% of Trip Cost*
Missed Connection (3 hours)	\$500
Travel Delay (6 hours)	\$750 (\$150/day)

*Up to the trip cost protected, up to the maximum of
\$10,000

**For a \$0 Trip Cost, there is no Trip Cancellation and Trip
Interruption is limited to \$500 Return Air only

Baggage Protection

Baggage and Personal Effects.....\$1,500
Per Article Limit.....\$250
Combined Articles Limit.....\$500
Baggage Delay (24 hours).....\$300

Medical Protection

Accident & Sickness Medical Expense.....\$25,000
Emergency Medical Evacuation.....\$100,000
Medically Necessary Repatriation/ Repatriation of Remains

Renewal: Coverage under this Certificate is not renewable.

SECTION I. COVERAGES
COVERAGE A
TRIP CANCELLATION

Benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, to reimburse You for the amount of the Published Penalties and unused non-refundable Prepaid Payments You paid for Travel Arrangements when You are prevented from taking Your Trip due to:

1. Your or a Family Member's or a Traveling Companion's or a Business Partner's death, which occurs before departure on Your Trip;
2. Your or a Family Member's or a Traveling Companion's or a Business Partner's covered Sickness or Injury, which:
 - a) occurs before departure on Your Trip; b) requires Medical Treatment at the time of cancellation resulting in medically imposed restrictions, as certified by a Legally Qualified Physician, and c) and prevents Your participation in the Trip;
3. For the Other Covered Reasons listed below, provided such circumstances occur while coverage is in effect.

"Other Covered Reasons" means:
a. You or Your Traveling Companion being hijacked, quarantined, required to serve on a jury (notice of jury duty must be received after Your Effective Date), served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);

- b. Your or Your Traveling Companion's primary place of residence or destination being rendered uninhabitable by fire, flood, burglary or other Natural Disaster. The Company will only pay benefits for Losses occurring within 30 calendar days after the Natural Disaster makes your destination accommodations uninhabitable. Your destination is uninhabitable if: (i) the building structure itself is unstable and there is a risk of collapse in whole or in part; (ii) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail, or flood; (iii) immediate safety hazards have yet to be cleared such as debris on roofs or downed electrical lines; or (iv) the rental property is without electricity or water. Benefits are not payable if a storm, snow storm, blizzard or hurricane is named on or before the Effective Date of Your Trip Cancellation coverage;

- c. a documented theft of passports or visas;

- d. You or Your Traveling Companion being directly involved in a traffic accident, substantiated by a police report, while en route to Your scheduled point of departure;
- e. Bankruptcy or Default of an airline, cruise line, tour operator or other travel provider (other than the Travel Supplier, tour operator or travel agency, from whom You purchased Your Travel Arrangements causing a complete cessation of travel services more than 14 days following Your Effective Date. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination. This benefit only applies if the Certificate has been purchased within 14 days of the date Your initial deposit/payment for Your Trip is received; and You insure the full cost of Your Trip subject to penalties or restrictions;

- f. unannounced Strike that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- g. Inclement Weather that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- h. felonious assault of You or Your Traveling Companion within 10 days of the Scheduled Departure Date;
- i. a Terrorist Incident that occurs within 30 days of Your Scheduled Departure Date in a city listed on the itinerary of Your Trip. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing Your cancellation of Your Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- j. Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them;

All cancellations must be reported to the Travel Supplier within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, the event should be reported as soon as possible. All other delays of reporting beyond 72 hours will result in reduced benefit payments.

If Your Travel Supplier cancels Your Trip, a benefit will be paid for the reissue fee charged by the airline for the tickets. The maximum payable under this Trip Cancellation Benefit is the lesser of the total amount of coverage You purchased or the Maximum Benefit Amount shown in the Schedule of Benefits.

Single Supplement

Benefits will be paid, up to the Maximum Benefit Amount, for the additional cost incurred as a result of a change in the per person occupancy rate for Prepaid Travel Arrangements if a Traveling Companion's or Family Member's Trip is canceled for a covered reason and You do not cancel Your Trip.

These benefits will not duplicate any other benefits payable under the Policy or any coverage(s) attached to the Policy.

COVERAGE B
TRIP INTERRUPTION

Benefits will be paid, up to a) the Maximum Benefit Amount shown in the Schedule of Benefits, or b) 150% of the total amount of coverage You purchased, to reimburse You for or unused non-refundable land or water Travel Arrangements plus the Additional Transportation Cost paid:

- a) to join Your Trip if You must depart after Your Scheduled Departure Date or travel via alternate travel arrangements by the most direct route possible to reach Your Trip destination; or
- b) to rejoin Your Trip or transport You to Your originally scheduled return destination, if You must interrupt Your Trip after departure, each by the most direct route possible.

Trip Interruption must be due to:

1. Your or a Family Member's or a Traveling Companion's or a Business Partner's death, which occurs while You are on Your Trip;
2. Your or a Family Member's or a Traveling Companion's or a Business Partner's covered Sickness or Injury which: a) occurs while You are on Your Trip, b) requires Medical Treatment at the time of interruption resulting in medically imposed restrictions, as certified by a Legally Qualified Physician, and c)

- prevents Your continued participation on Your Trip;
3. For the **Other Covered reasons** listed below, provided such circumstances occur while coverage is in effect.
- "**Other Covered reasons**" means:
- You or Your Traveling Companion being hijacked, quarantined, required to serve on a jury (notice of jury duty must be received after Your Effective Date), served with a court order to appear as a witness in a legal action in which You or Your Traveling Companion is not a party (except law enforcement officers);
 - Your or Your Traveling Companion's primary place of residence or destination being rendered uninhabitable by fire, flood, burglary or other Natural Disaster. The Company will only pay benefits for Losses occurring within 30 calendar days after the Natural Disaster makes your destination accommodations uninhabitable. Your destination is uninhabitable if: (i) the building structure itself is unstable and there is a risk of collapse in whole or in part; (ii) there is exterior or structural damage allowing elemental intrusion, such as rain, wind, hail, or flood; (iii) immediate safety hazards have yet to be cleared such as debris on roofs or downed electrical lines; or (iv) the rental property is without electricity or water. Benefits are not payable if a storm, snow storm, blizzard or hurricane is named on or before the Effective Date of Your Trip Cancellation coverage;
 - a documented theft of passports or visas
 - You or Your Traveling Companion being directly involved in a traffic accident, substantiated by a police report, while en route to Your scheduled point of departure;
 - Bankruptcy or Default of an airline, cruise line, tour operator or other travel provider (other than the Travel Supplier, tour operator or travel agency, from whom You purchased Your Travel Arrangements causing a complete cessation of travel services more than 14 days following Your Effective Date. Benefits will be paid due to Bankruptcy or Default of an airline only if no alternate transportation is available. If alternate transportation is available, benefits will be limited to the change fee charged to allow You to transfer to another airline in order to get to Your intended destination. This benefit only applies if the Certificate has been purchased within 14 days of the date Your initial deposit/payment for Your Trip is received, and You insure the full cost of Your Trip subject to penalties or restrictions;

- unannounced Strike that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- Inclement Weather that causes complete cessation of services for at least 18 consecutive hours of the Common Carrier on which You are scheduled to travel;
- felonious assault of You or Your Traveling Companion within 10 days of the Scheduled Departure Date;
- a Terrorist Incident that occurs within 30 days of Your Scheduled Departure Date in a city listed on the itinerary of Your Trip. This same city must not have experienced a Terrorist Incident within the 90 days prior to the Terrorist Incident that is causing Your cancellation of Your Trip. Benefits are not provided if the Travel Supplier offers a substitute itinerary;
- Your family or friends living abroad with whom You were planning to stay are unable to provide accommodations due to life threatening illness, life threatening injury or death of one of them;

COVERAGE C TRAVEL DELAY

- Benefits will be paid up to \$150 per day for: 1) the non-refundable, unused portion of the Prepaid expenses for Your Trip as long as the expenses are supported by proof of purchase and are not reimbursable by any other source; and 2) reasonable accommodation, meal, telephone call and local transportation expenses incurred by You , up to the Maximum Benefit Amount shown in the Schedule of Benefits, if You are delayed for 6 hours or more while en route to or from, or during Your Trip, due to:
- any delay of a Common Carrier (the delay must be certified by the Common Carrier);
 - a traffic accident in which You or Your Traveling Companion is not directly involved (must be substantiated by a police report);
 - lost or stolen passports, travel documents or money (must be substantiated by a police report);
 - quarantine, hijacking, Strike, Natural Disaster, terrorism or riot;
 - a documented weather condition preventing You from getting to the point of departure. Benefits will not be paid for any expenses, which have been reimbursed, or for any services that have been provided by the Common Carrier.

- These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE D MISSED CONNECTION

- If You miss Your cruise or tour departure because Your arrival at Your Trip destination is delayed for 3 or more hours, due to: any delay of a Common Carrier (the delay must be certified by the Common Carrier);
- documented weather condition preventing You from getting to the point of departure;
 - quarantine, hijacking, Strike, Natural Disaster, terrorism or riot.

- We will reimburse You, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for:
- Your Additional Transportation Cost to join Your Trip; and
 - Prepaid expenses for the unused land or water Travel Arrangements ; and
 - reasonable accommodation, telephone and meal expenses necessarily incurred by You for which You have proof of purchase and which were not paid for or provided by any other source.

COVERAGE E BAGGAGE AND PERSONAL EFFECTS

- These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.
- against all risks of permanent loss, theft or damage to Your Baggage and Personal Effects;
 - subject to all General Exclusions and the Additional Limitations and Exclusions Specific to Baggage and Personal Effects in the Certificate; and
 - occurring while coverage is in effect.
- "Baggage and Personal Effects" means goods being used by You during Your Trip.

Valuation and Payment of Loss:

The lesser of the following amounts will be paid:

- 1) the Actual Cash Value at the time of loss, theft or damage, except as provided below;
- 2) the cost to repair or replace the article with material of a like kind and quality; or
- 3) \$250 per article.

A combined maximum of \$500 will be paid for jewelry; precious or semi-precious stones; watches; articles consisting in whole or in part of silver, gold or platinum; furs or articles trimmed with fur; cameras and their accessories and related equipment, computer, digital or electronic equipment or media.

A maximum of \$100 will be paid for the cost of replacing a passport or visa.

A maximum of \$100 will be paid for the cost associated with the unauthorized use or replacement of lost or stolen credit cards, subject to verification that You have complied with all conditions of the credit card company.

Baggage and Personal Effects does not include:

- 1) animals;
- 2) automobiles and automobile equipment;
- 3) boats or other vehicles or conveyances;
- 4) trailers;
- 5) motors;
- 6) aircraft;
- 7) bicycles, except when checked as baggage with a Common Carrier;
- 8) household effects and furnishings;
- 9) antiques and collector's items;
- 10) sunglasses, contact lenses, artificial teeth, dentures, dental bridges, or hearing aids;
- 11) artificial limbs or other prosthetic devices;
- 12) prescribed medications;
- 13) keys, money, stamps and credit cards (except as otherwise specifically covered herein);
- 14) securities, stamps, tickets and documents (except as coverage is otherwise specifically provided herein);
- 15) professional or occupational equipment or property, whether or not electronic business equipment or;
- 16) telephones or PDA devices, computer hardware or software;

is delayed or misdirected by a Common Carrier for more than 24 hours from Your time of arrival at a destination other than Your return destination, benefits will be paid, up to the Maximum Benefit Amount shown in the Schedule of Benefits, for the actual expenditure for necessary personal effects. You must be a ticketed passenger on a Common Carrier. The Common Carrier must certify the delay or misdirection. Receipts for the purchases must accompany any claim.

Additional Limitations and Exclusions Specific to Baggage and Personal Effects :

Benefits are not payable for any loss caused by or resulting from:

- a) breakage of brittle or fragile articles;
 - b) wear and tear or gradual deterioration;
 - c) confiscation or appropriation by order of any government or custom's rule;
 - d) theft or pilferage while left in any unlocked or unattended vehicle;
 - e) property illegally acquired, kept, stored or transported;
 - f) Your negligent acts or omissions; or
 - g) property shipped as freight or shipped prior to the Scheduled Departure Date;
 - h) electrical current, including electric arcing that damages or destroys electrical devices or appliances.
- Additional Provisions applicable to Baggage and Personal Effects and Baggage Delay:**
- Benefits will not be paid for any expenses which have been reimbursed or for any services which have been provided by the Common Carrier, hotel or Travel Supplier; nor will benefits be paid for loss or damage to property specifically scheduled under any other insurance.
- Additional Claims Provisions Specific to Baggage:**
- Your Duties After Loss of or Damage to Property or Delay of Baggage: In case of loss, theft, damage or delay of baggage or personal effects, and You must:
- a) take all reasonable steps to protect, save or recover the property;
 - b) promptly notify, in writing, either the police, hotel proprietors, ship lines, airlines, railroad, bus, airport or other station authorities, tour operators or group leaders, or any Common Carrier or bailee who has custody of Your

property at the time of loss;

- c) produce records needed to verify the claim and its amount, and permit copies to be made;
- d) send proof of loss as soon as reasonably possible after date of loss, providing date, time, and cause of loss, and a complete list of damaged/lost items : and
- e) allow the company to examine baggage or personal effects, if requested.

These benefits will not duplicate any other benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE F ACCIDENT & SICKNESS MEDICAL EXPENSE

Benefits will be paid for the Covered Expense incurred, up to the Maximum Benefit Amount shown in the Schedule of Benefits shown on the Schedule of Benefits, as a result of a Covered Accidental Injury or covered Sickness, which first occurs during Your Trip (of a duration of 90 days or less for Sickness). Only Covered Expenses incurred during Your Trip (of duration of 90 days or less for Sickness) will be reimbursed. Expenses incurred after Your Trip are not covered.

Benefits will not be paid in excess of the Usual and Customary Charges.

Advance payment will be made to a Hospital, up to the Maximum Benefit Amount, if needed to secure Your admission to a Hospital, because of a Covered Accidental Injury or covered Sickness. The authorized travel assistance company will coordinate advance payment to the Hospital.

For the purpose of this benefit:

"Covered Expense" means expense incurred only for the following:

Baggage Delay: If, while on a Trip, Your checked baggage

1. The medical services, prescription drugs, prosthetics, therapeutic services and supplies ordered or prescribed by a Legally Qualified Physician as Medically Necessary for treatment;

2. Hospital or ambulatory medical-surgical center services (including expenses for a cruise ship cabin or hotel room, not already included in the cost of the Your Trip, if recommended as a substitute for a hospital room for recovery from a Covered Accidental Injury or covered Sickness);

3. Transportation furnished by a professional ambulance company to and/or from a Hospital.

These benefits will not duplicate any benefits payable under the Certificate or any coverage(s) attached to the Certificate.

COVERAGE G

EMERGENCY MEDICAL EVACUATION, MEDICAL REPATRIATION AND RETURN OF REMAINS

When You suffer loss of life for any reason or incur a Sickness or Injury during the course of Your Trip, the following benefits are payable, up to the Maximum Benefit Amount shown in the Schedule of Benefits.

1. **Emergency Medical Evacuation:** If the local attending Legally Qualified Physician and the authorized travel assistance company determine that transportation to a Hospital or medical facility is Medically Necessary to treat an unforeseen Sickness or Injury which is acute or life threatening and adequate Medical Treatment is not available in the immediate area, the Transportation Expense incurred will be paid for the Usual and Customary Charges for transportation to the closest Hospital or medical facility capable of providing that treatment.

If You are traveling alone and will be hospitalized for more than 7 consecutive days and Emergency Evacuation is not imminent, benefits will be paid to transport one person, chosen by You, by Economy Transportation, for a single visit to and from Your bedside.

If You are in the Hospital for more than 7 consecutive days and Your dependent children who are under 18 years of age and accompanying You on Your Trip are left unattended, Economy Transportation will be paid to return the dependents to their home (with an attendant, if considered necessary by the authorized travel assistance company).

2. **Medical Repatriation:** If the local attending Legally Qualified Physician and the authorized travel assistance company determine that it is Medically Necessary for You to return to Your primary place of residence because of an unforeseen Sickness or Injury which is acute or life-threatening, the Transportation Expense incurred will be paid for Your return to Your primary place of residence or to a Hospital or medical facility closest to Your primary place of residence capable of providing continued treatment via one of the following methods of transportation, as approved, in writing, by the authorized travel assistance company:

- i) one-way Economy Transportation;
- ii) commercial air upgrade (to Business or First Class), based on Your condition as recommended by the local attending Legally Qualified Physician and verified in writing and considered necessary by the authorized travel assistance company; or
- iii) other covered land or air transportation including, but not limited to, commercial stretcher, medical escort, or the Usual and Customary Charges for air ambulance, provided such transportation has been pre-approved and arranged by the authorized travel assistance company.

COVERAGE H

ACCIDENT, UNEXPECTED UNUSUAL SICKNESS AND INJURY

When You suffer an accident, unexpected unusual sickness or injury during the course of Your Trip, the following benefits are payable, up to the Maximum Benefit Amount shown in the Schedule of Benefits.

1. **Accident:** If You are hospitalized for more than 7 consecutive days and Emergency Evacuation is not imminent, benefits will be paid to transport one person, chosen by You, by Economy Transportation, for a single visit to and from Your bedside.

If You are in the Hospital for more than 7 consecutive days and Your dependent children who are under 18 years of age and accompanying You on Your Trip are left unattended, Economy Transportation will be paid to return the dependents to their home (with an attendant, if considered necessary by the authorized travel assistance company).

personal possessions and travel documents taken by You on Your Trip.

Bankruptcy or Default means the total cessation of operations due to insolvency, with or without the filing of a bankruptcy petition by an airline or cruise line, tour operator or other travel provider provided the Bankruptcy or Default occurs more than 14 days following Your Effective Date for the Trip Cancellation Benefits. There is no coverage for the Bankruptcy or Default of any person, organization, agency or firm from whom You purchased Travel Arrangements supplied by others.

Business Partner means an individual who (a) is involved in a legal general partnership with You and (b) is actively involved in the day to day management of Your business. Common Carrier means any land, sea, or air conveyance operating under a valid license for the transportation of passengers for hire, not including taxicabs or rented, leased or privately owned motor vehicles.

Company means United States Fire Insurance

Covered Trip means scheduled trips, tours or Cruises for which (a) coverage is requested; and (b) the required premium is submitted prior to the Scheduled Departure Date.

Cruise means any prepaid sea arrangements.

Default means a material failure or inability to provide contracted services.

Dependent Child(ren) means Your children, including an unmarried child, stepchild, legally adopted child or foster child who is: (1) less than age 19 and primarily dependent on You for support and maintenance; or (2) who is at least age 19 but less than age 23 and who regularly attends an accredited school or college; and who is primarily dependent on You for support and maintenance.

Domestic Partner means an opposite or same sex partner who, for at least 12 consecutive months, has resided with You and shared financial assets/obligations with You. Both You and the Domestic Partner must:

- (1) intend to be life partners;
- (2) be at least the age of consent in the state in which You both reside; and (3) be mentally competent to contract. Neither You nor the Domestic Partner can be related by blood to a degree of closeness that would prohibit a legal marriage, be married to anyone else, or have any other Domestic Partner. The Company may require proof of the Domestic Partner relationship in the form of a signed and completed affidavit of domestic

partnership.

Economy Transportation means the lowest published available transportation rate for a ticket on a Common Carrier matching the original class of transportation that You purchased for Your Trip.

Family Member means any of the following: Your or Your Traveling Companion's legal spouse (or common-law spouse where legal), legal guardian or ward, son or daughter (adopted, foster, step or in-law), brother or sister (includes step or in-law), parent (includes step or in-law), grandparent (includes in-law), grandchild, aunt, uncle, niece or nephew or Domestic Partner.

Hospital means (a) a place which is licensed or recognized as a general hospital by the proper authority of the state in which it is located; (b) a place operated for the care and treatment of resident inpatients with a registered graduate nurse (RN) always on duty and with a laboratory and X-ray facility; (c) a place recognized as a general hospital by the Joint Commission on the Accreditation of Hospitals; (d) other than a residence, a place where treatment in a Hyperbaric chamber can be received. Not included is a hospital or institution licensed or used principally: (1) for the treatment or care of drug addicts or alcoholics; or (2) as a clinic continued or extended care facility, skilled nursing facility, convalescent home, rest home, nursing home or home for the aged.

Inelegant Weather means any weather condition that delays the scheduled arrival or departure of a Common Carrier.

Injury or Injuries means bodily harm and/or decompression illness caused by an Accident which:

- 1) occurs while Your coverage is in effect under the Policy; and 2) requires examination and treatment by a Legally Qualified Physician. The Injury must be the direct cause of loss and must be independent of all other causes and must not be caused by, or result from, Sickness.

Insured means a person(s) who is booked to travel on a Trip, completes the enrollment form and for whom the required premium is paid, also referred to as You and Your.

Intoxicated mean a blood alcohol level that equals or exceeds the legal limit for operating a motor vehicle in the state or jurisdiction where You are located at the time of an incident.

Legally Qualified Physician means a physician: (a) other than You , a Traveling Companion or a Family Member; (b) practicing within the scope of his or her license;

and (c)recognized as a physician in the place where the services are rendered.

Maximum Benefit Amount means the maximum amount payable for coverage provided to You as shown in the Schedule of Benefits.

Medical Treatment means examination and treatment by a Legally Qualified Physician for a condition which first manifested itself, worsened or became acute or had symptoms which would have prompted reasonable person to seek diagnosis, care or treatment.

Medically Necessary means a service which is appropriate and consistent with the treatment of the condition in accordance with accepted standards of community practice.

Natural Disaster means a flood, hurricane, tornado, earthquake, mudslide, tsunami, avalanche, landslide, volcanic eruption, fire, wildfire or blizzard that is due to natural causes.

Payments or Deposits means the cash, check, or credit card amounts actually paid or used for Your Trip. Certificates, vouchers, discounts, credits, frequent traveler or frequent flyer rewards, miles or points applied (in part or in full) towards the cost of Your Travel Arrangements are not Payments or Deposits as defined herein.

Pre-existing Condition means any Injury, Sickness or condition (including any condition from which death ensues) of You, or Traveling Companion, or Your and/or Traveling Companion's Family Member or Your Business Partner for which within the 180 day period prior to the Effective Date of Your Trip Cancellation coverage under the policy which (a) manifested itself, became acute or exhibited symptoms which would have caused one to seek diagnosis, care or treatment;

- (b) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or (c) required Medical Treatment or treatment was recommended by a Legally Qualified Physician.

Prepaid means Payments or Deposits paid by You to a Travel Supplier for Travel Arrangements for Your Trip prior to Your actual or Scheduled Departure Date. Payments or Deposits for shore excursions, theater, concert or event tickets or fees, or sightseeing, if such arrangements are made during Your Trip and are to be used prior to the Scheduled Return Date of Your Trip, are not considered Prepaid as defined herein.

Published Penalties means any additional published cancellation penalties levied by Your travel agency or travel supplier that apply to all clients of the travel agency or travel supplier and can be documented at time of Your purchase of Travel Arrangements from Your travel agency.

Scheduled Departure Date means the date on which You are originally scheduled to leave on Your Trip.

Scheduled Return Date means the date on which You are originally scheduled to return to the point of origin or the original final destination of Your Trip.

Sickness means an illness or disease of the body which:

- 1) requires examination and treatment by a Legally Qualified Physician, and 2) commences while Your coverage is in effect. An illness or disease of the body which first manifests itself and then worsens or becomes acute prior to the Effective Date of Your coverage is not a Sickness and is considered a Pre-Existing Condition as defined herein and is not covered by the Policy.

Strike means any labor disagreement resulting in a stoppage of work: (a) as a result of a combined effort of workers which was unannounced and unpublished at the time travel services were purchased; and (b) which interferes with the normal departure and arrival of a Common Carrier.

Terrorist Incident means an act of violence, that is deemed terrorism by the United States Government other than civil disorder or riot (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting alone or in association with other persons on behalf of or in connection with any organization of foreign government which is generally recognized as having the intent to overthrow or influence the control of any other foreign government. The Terrorist Incident must be documented in a Travel Warning issued by the United States' Department of State advising Americans to avoid that certain country.

Third Party means a person or entity other than You or the Company.

Transportation Expense means the cost of Medically Necessary conveyance, personnel, and services or supplies.

Traveling Companion means a person or persons whose names appear with Yours on the same Travel Arrangements and who, during Your Trip, will accompany You.

Travel Supplier means any entity or organization that coordinates or supplies travel services for You.

Trip means a scheduled trip for which coverage for Travel Arrangements is requested and the premium is paid prior to Your actual or Scheduled Departure Date of Your Trip.

Us, We, Our means United States Fire Insurance Company.

Usual and Customary Charges means those comparable charges for similar treatment, services and supplies in the geographic area where treatment is performed.

SECTION III. INSURING PROVISIONS

Who Is Eligible For Coverage:

A citizen or resident of the United States of America who is booked to travel on Your Trip, completes the enrollment form and for whom the required premium is paid. Eligibility for purchase will be determined at time of claim. If it is determined that a person or Trip is not eligible for coverage, any claim for benefits will be denied and premium will be refunded.

When Coverage Begins – Coverage Effective Date:

Trip Cancellation: Coverage begins on the date and time at 12:01 a.m. on the day after the date the appropriate premium for this Certificate for Your Trip is received by the company. This is Your "Effective Date" and time for Trip Cancellation.

Travel Delay: Coverage begins after You have traveled 50 miles or more from home en route to join Your Trip. This is Your "Effective Date" and time for Travel Delay.

All Other Coverages: Coverage begins when You depart on the first Travel Arrangement (or alternate travel arrangement if You must use an alternate travel arrangement to reach Your Trip destination) for Your Trip. This is Your "Effective Date" and time for all other coverages, except Trip Cancellation and Travel Delay.

When Coverage Ends – Coverage Termination Date:

Trip Cancellation: Your coverage automatically ends on the earlier of: 1) 72 hours prior to the scheduled departure time on the Scheduled Departure Date of Your Trip; or 2) on or before the final payment due date for Your Trip; or 3) the date and time You cancel Your Trip.

All Other Coverages: Your coverage automatically ends on the earlier of: 1) the date Your Trip is completed; 2) the Scheduled Return Date; 3) Your arrival at Your return destination on a date and time You cancel Your Trip.

round-trip, or the destination on a one-way trip; 4) cancellation of Your Trip covered by the Certificate. Termination of the Certificate will not affect a claim for loss that occurs after premium has been paid.

All coverages under the Certificate will be extended if Your entire Trip is covered by the Certificate and Your return is delayed due to unavoidable circumstances beyond Your control. If coverage is extended for the above reasons, coverage will end on the earlier of the date You reach Your originally scheduled return destination or 7 days after the Scheduled Return Date.

SECTION IV. GENERAL EXCLUSIONS

Benefits are not payable for any loss due to, arising or resulting from:

1. suicide, attempted suicide or any intentionally self-inflicted injury of You, a Traveling Companion, Family Member or Business Partner booked to travel with You, while sane or insane;
2. an act of declared or undeclared war;
3. participating in maneuvers or training exercises of an armed service, except while participating in weekend or summer training for the reserve forces of the United States, including the National Guard;
4. riding or driving in races, or speed or endurance competitions or events;
5. mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes, or other special equipment);
6. participating as a member of a team in an organized sporting competition;
7. participating in bodily contact sports, skydiving or parachuting, hang gliding or bungee cord jumping;
8. piloting or learning to pilot or acting as a member of the crew of any aircraft;
9. being Intoxicated as defined herein, or under the influence of any controlled substance unless as administered or prescribed by a Legally Qualified Physician;
10. the commission of or attempt to commit a felony or being engaged in an illegal occupation;
11. normal childbirth or pregnancy (except Complications of Pregnancy) or voluntarily induced abortion;
12. dental treatment (except as coverage is otherwise specifically provided herein);

13. amounts which exceed the Maximum Benefit Amount for each coverage as shown in the Schedule of Benefits;

14. due to a Pre-Existing Condition, as defined in the Policy. The Pre-Existing Condition Limitation does not apply to the Emergency Medical Evacuation or return of remains coverage;

15. medical treatment during or arising from a Trip undertaken for the purpose or intent of securing medical treatment;

16. a mental or nervous condition, unless hospitalized for that condition while the Policy is in effect for You;

17. due to loss or damage (including death or injury) and any associated cost or expense resulting directly from the discharge, explosion or use of any device, weapon or material employing or involving chemical, biological, radiological or similar agents, whether in time of peace or war, and regardless of who commits the act and regardless of any other sequence thereto.

PRE-EXISTING CONDITION EXCLUSION:

The Company will not pay for any expense as a result of any illness, disease, or other condition during the 180 day period immediately prior to the date Your coverage is effective for which You or Your Traveling Companion, Business Partner or Family Member scheduled or booked to travel with You : 1) received or received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or 2) took or received a prescription for drugs or medicine. Item (2) of this Exclusion does not apply to a condition which is treated or controlled solely through the taking of prescription drugs or medicine and remains treated or controlled without any adjustment or change in the required prescription throughout the 180 day period before coverage is effective under this Certificate.

Waiver of the Pre-Existing Condition Exclusion
The exclusion for Pre-Existing Condition will be waived provided:

- a) Your Payment or Deposit for this Certificate and enrollment form are received at or before the final

- Payment due date for Your Trip; and
- b) You insure all Prepaid Trip costs that are subject to cancellation penalties or restrictions; and
 - c) You are not disabled from travel at the time Your premium is paid.

SECTION V. GENERAL PROVISIONS

Notice of Claim: Notice of claim must be reported within 20 days after a loss occurs or as soon as is reasonably possible. You or someone on Your behalf may give the notice. The notice should be given to Us or Our designated representative and should include sufficient information to identify You.

Claim Forms: When notice of claim is received by Us or Our designated representative, forms for filing proof of loss will be furnished. If these forms are not sent within 15 days, the proof of loss requirements can be met by You sending Us a written statement of what happened. This statement must be received within the time given for filing proof of loss.

Proof of Loss: Proof of loss must be provided within 90 days after the date of the loss or as soon as is reasonably possible. Proof must, however, be furnished no later than 12 months from the time it is otherwise required, except in the absence of legal capacity.

Time Payment of Claims: We, or Our designated representative, will pay the claim after receipt of acceptable proof of loss.

Payment of Claims: Benefits for loss of life will be paid to Your designated beneficiary. If a beneficiary is not otherwise designated by You, benefits for loss of life will be paid to the first of the following surviving preference beneficiaries:

- a) Your spouse;
- b) Your child or children jointly;
- c) Your parents jointly if both are living or the surviving parent if only one survives;
- d) Your brothers and sisters jointly; or
- e) Your estate.

All other Benefits will be paid directly to You, unless otherwise directed. Any accrued benefits unpaid at Your

death will be paid to Your estate. If You have assigned Your benefits, We will honor the assignment if a signed copy has been filed with us. We are not responsible for the validity of any assignment. All or a portion of all benefits provided by the Certificate may, at Our option, be paid directly to the provider of the service(s) to You. All benefits not paid to the provider will be paid to You.

Subrogation: If the Company has made a payment for a loss under this Certificate, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right. You shall help the Company exercise the Company's rights in any reasonable way that the Company may request; nor do anything after the loss to prejudice the Company's rights; and in the event You recover damages from the Third Party responsible for the loss, You will hold the proceeds of the recover for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss.

Physician Examination and Autopsy: The Company, at the expense of the Company, may have You examined when and as often as is reasonable while the claim is pending. The Company may have an autopsy done (at the expense of the Company) where it is not forbidden by law. **Legal Actions:** All Certificate terms will be interpreted under the laws of the state in which the Policy was issued. No legal action may be brought to recover on the Certificate within 60 days after written Proof of Loss has been furnished. No legal action for a claim may be brought against Us after 3 years from the time written Proof of Loss is required to be furnished.

Concealment and Misrepresentation: The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance or claim has been concealed or misrepresented. **Other Insurance with the Company:** You may be covered under only one travel Certificate with the Company for each Trip. If You are covered under more than one such Certificate, You may select the coverage that is to remain in effect. In the event of death, the selection will be made by the beneficiary or estate. Premiums paid (less claims paid) will be refunded for the duplicate coverage that does not remain in effect.

Reductions in the Amount of Insurance: The applicable benefit amount will be reduced by the amount of benefits, if any, previously paid for any loss or damage under this Policy, issued in Illinois, is available for

Certificate for Your Trip.

SECTION VI. STATE ENDORSEMENTS

These Amendatory Endorsements are attached to and made a part of the Policy issued to the Group and Blanket Accident and Health Trust (the Policyholder).

The Amendatory Endorsements are attached to and made a part of the Certificate issued to the Insured. The provisions of the Amendatory Endorsements are effective on the Effective Date and will expire concurrently with the Certificate, unless otherwise terminated.

ARKANSAS

The Policy/Certificate are hereby amended for Arkansas as follows:

1. The **Legal Actions** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:

Legal Actions: All policy terms will be interpreted under the laws of the state in which the policy was issued. Legal action or suit for a claim may be brought against Us within the time allowed by law.

2. The **Subrogation** provision appearing in **SECTION V General Provisions** is amended to include this sentence which will appear as follows at the end of the provision:

The Company is entitled to recovery only after You have the Insured has been fully compensated for the loss sustained.

If there is a conflict between the Policy/Certificate and this Rider, the terms of this Endorsement will govern.

CONNECTICUT

The Certificate is hereby amended for **Connecticut Residents** as follows:

1. The following is added to the **Face Page** of the Certificate:

Upon request by an Insured, the Master Group Policy, issued in Illinois, is available for

examination.

2. The following Exclusion 4. in **SECTION IV GENERAL EXCLUSIONS** is deleted and replaced as follows:

3. no indemnity will be paid for loss caused by the voluntary use of any controlled substance as defined in Title I of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless as prescribed by the Insured's Legally Qualified Physician;

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE CT

DISTRICT OF COLUMBIA

The Certificate is hereby amended for District of Columbia as follows:

4. Exclusion 19. in **SECTION IV GENERAL EXCLUSIONS** referencing chemical, biological, radiological or similar agents is deleted in its entirety and will not appear.

5. The Excess Insurance provision in **SECTION V GENERAL PROVISIONS** is deleted and will not appear.

6. The Subrogation provision in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

Subrogation: If the Company has made a payment for a loss under this coverage, and the person to or for whom payment was made has a right to recover damages from the Third Party responsible for the loss, the Company will be subrogated to that right as permitted by law. You shall help the Company exercise the Company's rights in any reasonable way that the Company may request; nor do anything after the loss to prejudice the Company's rights; and in the event You recover damages from the Third Party responsible for the loss, You will hold the proceeds of the recover for the Company in trust and reimburse the Company to the extent of the Company's previous payment for the loss, as permitted by law.

7. The following is added to **SECTION V GENERAL PROVISIONS:**

Required Connecticut Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for which the required premium payment has been paid

prior to that termination date will continue until the end of Your Trip.

8. **SECTION VI COORDINATION OF BENEFITS** is deleted in its entirety and will not appear.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE CT

DISTRICT OF COLUMBIA

The Certificate is hereby amended for District of Columbia as follows:

1. The following will appear at the bottom of the Cover Page, directly above the **TABLE OF CONTENTS:**
LIMITED BENEFIT COVERAGE
2. **SECTION V GENERAL PROVISIONS** is amended to include the following provisions:

Fraud Warning as required for District of Columbia Residents: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits, if false information materially related to a claim was provided by the applicant.

Required District of Columbia Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for which the required premium payment has been paid prior to that termination date will continue until the end of Your Trip.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE DC

7. The following is added to **SECTION V GENERAL PROVISIONS:**
- Required Florida Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for

V General Provisions is deleted and replaced as follows:

Legal Actions: No legal action may be brought to recover on the Policy until 60 days after the Company receives Proof of Loss. No legal action for a claim may be brought against Us more than 5 years after the time required by law for giving Proof of Loss. This 5 year time period is extended from the date Proof of Loss is furnished and the date the claim is denied in whole or in part.

If there is a conflict between the Policy/Certificate and this Rider, the terms of this Endorsement will govern.
T210-AE FL RESIDENTS ONLY

GEORGIA

The Policy/Certificate are hereby amended for Georgia Residents as follows:

The Concealment and Misrepresentation provision appearing in SECTION V General Provisions is deleted and replaced as follows:

Concealment and Misrepresentation: The entire coverage will be cancelled, if before, during or after a loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Georgia Amendatory Endorsement will govern. T210-AE-GA

7. The following is added to **SECTION V GENERAL PROVISIONS:**
- Required Hawaii Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for

HAWAII

The Policy/Certificate are hereby amended for Hawaii Residents as follows:

The following is added to **SECTION V GENERAL PROVISIONS** as follows:

Representations: All statements made by the Insured are deemed representations and not warranties. No statement made by the Insured

The Legal Actions provision appearing in **SECTION**

shall be used in any contest unless a copy of the instrument containing the statement is or has been furnished to the Insured or to the Insured's beneficiary, if any. A misrepresentation, unless it is made with actual intent to deceive or unless it materially affects the acceptance of the risk assumed by the Company, shall not prevent a recovery under the Certificate.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE-HI

IDaho

The Policy/Certificate are hereby amended for Idaho as follows:

1. The following is added at the bottom of SECTION V General Provisions: Contact Information for the Idaho Department of Insurance:

Idaho Department of Insurance
Consumer Affairs
700 W. State Street, 3rd Floor
PO Box 83720
Boise, ID 83720-0043

1-800-721-3272 or 208-334-4250 or www.DOI.Idaho.gov

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.
T210-AE-ID

- B. Item 1. in the Injury definition in both TRIP CANCELLATION AND INTERRUPTION DUE TO YOUR INABILITY TO DIVE and LOST DIVING DAYS appearing in SECTION I COVERAGES is deleted and replaced as follows:
- 1) received or received a recommendation for a test, examination, or medical treatment for a condition which manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment;

- C. Item B. in the Exclusions in TRIP CANCELLATION AND INTERRUPTION DUE TO YOUR INABILITY TO DIVE is deleted and replaced as follows:

- B. The Company will not be liable for claims, under the Coverage Part B, directly arising from any hazardous pursuit or occupation or flying except while flying as a passenger in a fully-licensed multi-engine passenger-carrying aircraft.

- D. The last sentence in the definition of "Injury" or "Injuries" appearing in SECTION II DEFINITIONS is deleted and replaced as follows: The Injury must be the direct cause of loss and must be independent of disease or bodily infirmity and must not be caused by, or result from, Sickness.

- E. The definition of "Complications of Pregnancy" appearing in SECTION II DEFINITIONS is deleted and replaced as follows:

- "Complications of Pregnancy" means conditions (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, hyperemesis gravidarum, preeclampsia, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include nonselective cesarean section, ectopic pregnancy which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible. Complications of Pregnancy does not include false labor, occasional spotting, Physician-prescribed rest during the period of pregnancy, morning sickness and similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct complication of pregnancy.

- F. Item 1) in the definition of "Pre-Existing Condition" appearing in SECTION II DEFINITIONS is deleted and replaced as follows:
- 1) received or received a recommendation for a test, examination, or medical treatment for a condition which manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment;

- G. Item 1) in the Pre-Existing Condition Exclusion appearing in SECTION IV General Exclusions is deleted and replaced as follows:

- 1) received or received a recommendation for a test, examination, or medical treatment for a condition which manifested itself, worsened or became acute or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment;

- H. The Time of Payment of Claims provision appearing in SECTION V General Provisions is deleted and replaced as follows:

- Time of Payment of Claims: We, or Our designated representative, will pay the claim within 30 days after receipt of acceptable proof of loss. Failure to pay within such period shall entitle the insured to interest at the rate of 9% per annum from the 30th day after receipt of acceptable proof of loss to the date of late payment, provided that interest amounting to less than one dollar need not be paid. T210-AE-II

LOUISIANA

The Policy/Certificate are hereby amended for Louisiana as follows:

1. The Time of Payment of Claims provision appearing in SECTION V General Provisions is deleted and replaced as follows:

- Time of Payment of Claims: We, or Our designated representative, will pay the claim within 30 days after receipt of acceptable proof of loss.
2. The Legal Actions provision appearing in SECTION V General Provisions is deleted and replaced as follows:

- A. Item b.(i) under "Other Covered Reasons" in both TRIP CANCELLATION and TRIP INTERRUPTION appearing in SECTION I COVERAGES is deleted and replaced as follows: the building structure itself is unstable and there is a risk of collapse;

Legal Actions: No legal action for a claim can be brought against the Company until 45 days after the Company receives proof of loss. No legal action for a claim can be brought against the Company more than 3 years after the time required for giving proof of loss. This 3-year time period is extended from the date proof of loss is filed and the date the claim is denied in whole or in part.

3. The **Concealment and Misrepresentation** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:

Concealment and Misrepresentation: The entire coverage will be void, if when applying for coverage, You the Insured made a fraudulent statement or misrepresentation with the intent to deceive. Fraud or misrepresentation with the intent to deceive after coverage is in force is grounds for cancellation and grounds to deny coverage for benefits related to such fraud, concealment, or misrepresentation. Coverage for other benefits will continue until the cancellation is effective.

4. The **Subrogation** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:

Subrogation: If the Company make any payment under this coverage and the person to or for whom payment is made has a right to recover damaged from another, the Company shall be subrogated to that right. However, the Company's right to recover is subordinate to Your the Insured's right to be fully compensated.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE LA

MARYLAND

The Policy/Certificate are hereby amended for **Maryland** as follows:

- On the **Cover Page**, the last sentence in the third paragraph indicating "When so returned, the coverage under this Certificate is void from the beginning" is deleted and will not appear.

- The **Concealment and Misrepresentation** provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE ME

MINNESOTA
The Certificate is hereby amended for **Minnesota Residents** as follows:

- The third paragraph of the **Face Page** is deleted and replaced as follows:

Insurance is provided by a Group Policy issued in a state other than Minnesota. Certificates delivered to residents of Minnesota are subject to the terms of the Certificate and this Minnesota Amendatory Endorsement and not the Group Policy.

- References to "Confirmation of Benefits" are hereby deleted and will not apply.

- The following is added to appear as General Exclusion 31. or will appear as the last numbered Exclusion in **SECTION IV GENERAL EXCLUSIONS:**

31. Air, water or other pollution, or threat of a pollutant release;

- The Time of Payment of Claims and **Concealment and Misrepresentation** provisions in **SECTION V GENERAL PROVISIONS** are deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim within five business days after receipt of acceptable proof of loss. **Concealment and Misrepresentation:** The entire coverage will be void, if before, during or after a loss, any material fact or circumstance relating to this insurance was orally misrepresented or misrepresented in writing with intent to deceive and defraud, or the misrepresentation increases the risk of loss.

- The following is added as the last sentence in the **Subrogation** provision in **SECTION V GENERAL PROVISIONS:**

The Company may not subrogate itself to the rights of an Insured to proceed against another person if that other person is an Insured by the Company for the same loss.

T210-AE NE

NEVADA

The Policy is hereby amended for Nevada as follows:

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.

T210-AE MN

NEBRASKA

The Policy/Certificate are hereby amended for Nebraska as follows:

A. Item 1. in the definition of **Pre-Existing Condition** appearing in **SECTION II DEFINITIONS** is deleted and replaced as follows:

1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute or exhibited a subjective indication of a disease or a change in condition as perceived by You which would have prompted a reasonable person to seek diagnosis, care or treatment;

D. Item 1. in the **PRE-EXISTING CONDITION EXCLUSION** provision appearing in **SECTION IV GENERAL EXCLUSIONS** is deleted and replaced as follows: received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute or exhibited a subjective indication of a disease or a change in condition as perceived by You which would have prompted a reasonable person to seek diagnosis, care or treatment;

E. The **Time of Payment of Claims** provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim immediately (or within 30 days) after receipt of acceptable proof of loss.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern.

13 T210-CER

of the Certificate:
WARNING: Any person who knowingly, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

B. The Who is Eligible For Coverage provision appearing **SECTION III INSURING PROVISIONS** is deleted and replaced as follows:

Who Is Eligible For Coverage:
A citizen or resident of the United States of America who is booked for travel on Your Trip, completes the enrollment form and for whom the required premium payment is paid.

C. The **Excess Insurance** provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and will not appear.

D. **SECTION V GENERAL PROVISIONS** is amended to include the following provision at the end:
required Ohio Statement regarding termination of Participating Organization or Master Group Policy: In the event of termination of the Participating Organization or the Master Group Policy, coverage issued under this Certificate for which the required premium payment has been paid prior to that termination date will continue until the end of Your Trip.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE OH
OKLAHOMA

The Policy/Certificate are hereby amended for Oklahoma as follows:

1. The third paragraph on the Face Page is deleted and replaced as follows:

Insurance provided by this Certificate is subject to all the terms and conditions of the Group Policy, issued in a state other than Oklahoma. Certificates delivered to residents of Oklahoma are subject to the terms of this Certificate and not the Group Policy.

A. The following statement is added to the Face Page

2. The following statement is added to the Face Page of the Certificate:

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information, is guilty of a felony.

3. Exclusion 2, pertaining to war appearing in **SECTION IV General Exclusions** is deleted and replaced as follows:

2. war or any act of war (whether declared or undeclared) while serving in the military or an auxiliary unit attached to the military or working in an area of war whether voluntarily or as required by an employer. The last sentence in the **Medically Fit to Travel Exclusion** provision appearing in **SECTION IV General Exclusions** is deleted and replaced as follows:

If Coverage for a Trip is purchased and it is later determined that You, Family Member booked to travel with You were not Medically Fit to Travel, as defined in this Certificate Plan, at the time of purchase of Coverage for a Trip, the Coverage is cancelled and premium paid will be returned.

4. The **Payment of Claims** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:
- If any benefit is payable to: (a) an insured who is a minor or otherwise not able to give a valid release; or (b) the Insured's estate. We may pay up to \$1,000 to the Insured's beneficiary or any relative whom We find entitled to the payment. Any payment made in good faith shall fully discharge Us to any party to the extent of such payment.

5. The **Concealment and Misrepresentation** provision appearing in **SECTION V General Provisions** is deleted and replaced as follows:
- Concealment and Misrepresentation:** The entire coverage will be cancelled, if before, during or after a

loss, any material fact or circumstance relating to this insurance has been concealed or misrepresented.

6. **SECTION V General Provisions** is amended to include the following provisions:

Conformity with Oklahoma statutes: The provisions of this Certificate conform to the requirements of Oklahoma law and this Certificate controls over any conflicting statutes of any state in which You reside on or after the effective date of this Certificate.

Required Oklahoma Statement regarding premium: The exact amount of premium will be determined upon purchase of the coverage under this Certificate, and the basis and rates upon which the premium will be determined are the plan design, Trip cost and age of the Insured. The average per Trip premium is \$39.49 USD.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Oklahoma Endorsement will govern. T210-AE OK

RHODE ISLAND

The Certificate is hereby amended for Rhode Island as follows:

1. The definition of **Family Member** in **SECTION II DEFINITIONS** is deleted and replaced as follows: "**Family Member**" means any of the following: Your legal spouse (or common-law spouse where legal), legal guardian or ward, son or daughter (adopted, foster, step or in-law), brother or sister (includes step or in-law), parent (includes step or in-law), grandparent (includes in-law), grandchild, aunt, uncle, niece or nephew, a person who is a party to a civil union with You as Your dependent and spouse.

2. The Time of Payment of Claims provision in **SECTION V General Provisions** are deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, will pay the claim within 60 days after receipt of acceptable proof of loss.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE RI

SOUTH CAROLINA

The Certificate is hereby amended for South Carolina as follows:

1. The **Payment of Claims, Physical Examination and Autopsy and Legal Actions** provisions in **SECTION V GENERAL PROVISIONS** are deleted and replaced as follows:

Payment of Claims: Benefits will be paid to the Insured. Loss of Life benefits are payable in accordance with the beneficiary designation in effect at the time of payment. If none is then in effect, the benefits will be paid to the Insured's estate. Any other benefits unpaid at death may be paid, at the Company's option, either to the Insured's beneficiary or estate.

Physical Examination and Autopsy: The Company at its own expense may have the Insured examined as often as reasonably necessary while a claim is pending and in cases of death of the Insured the Company at its own expense also may have an autopsy performed during the period of contestability unless prohibited by law. The autopsy must be performed in South Carolina.

Legal Actions: No legal action may be brought to recover on this Certificate within sixty days after written proof of loss has been given as required by this Certificate. No such action may be brought after six years from the time written proof of loss is required to be given.

2. The following provision is added as the last provision in **SECTION V GENERAL PROVISIONS:**

Change of Beneficiary: The Insured can change the beneficiary at any time by giving the Company written notice. The beneficiary's consent is not required for this or any other change in the Certificate, unless the designation of the beneficiary is irrevocable.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE SC

SOUTH DAKOTA
The Policy/Certificate are hereby amended for South Dakota as follows:

2. The definition of Family Member appearing in **SECTION II DEFINITIONS** is amended to include a child placed for adoption with the Insured.

1. The following Exclusion 4. appearing in **SECTION IV GENERAL EXCLUSIONS** is deleted in its entirety:

4. being intoxicated as defined herein, or under the influence of any controlled substance unless administered or prescribed by a Legally Qualified Physician"; Exclusion 10. appearing in **SECTION IV GENERAL EXCLUSIONS** is deleted and replaced as follows:
 10. any amount paid under any Worker's Compensation, Disability Benefit or similar law;

2. The last sentence of the Legal Actions provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

No legal action for a claim may be brought against Us after 6 years from the time written Proof of Loss is required to be furnished.

If there is a conflict between the Policy/Certificate and this Rider, the terms of this Endorsement will govern. T210-AE SD

UTAH

The Policy/Certificate are hereby amended for Utah as follows:

1. The third paragraph of the Exposure and Disappearance provision in **ACCIDENTAL DEATH AND DISMEMBERMENT** appearing in **SECTION I COVERAGES** is deleted and replaced as follows:

If, while insured under this Coverage, You are in an Accident resulting in the disappearance, sinking or damaging of an air or water conveyance on which You are covered by this Coverage, it will be presumed, unless there is evidence to the contrary, that You suffered loss of life as a result of those injuries.

B. The definition of "Usual and Customary" appearing in **SECTION II DEFINITIONS** will now appear as the definition of "Reasonable and Necessary".

C. The following exclusions appearing in **SECTION IV GENERAL EXCLUSIONS** are deleted and/or deleted and replaced as follows:

4. riding or driving in races, or speed or endurance competitions or events, when racing in a professional capacity;
5. deleted in its entirety (relating to mountaineering);
7. participating in bodily contact sports, parachuting;
25. deleted in its entirety (relating to device, weapon, material employing chemical, biological, radiological).

D. The Time of Payment of Claims provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:

Time of Payment of Claims: We, or Our designated representative, after settlement has been agreed upon, will pay the claim in the agreed amount within 10 working days.

E. The last sentence in the Physician Examination and Autopsy provision appearing in **SECTION V GENERAL PROVISIONS** is deleted and replaced as follows:
The Company may have an autopsy done (at the expense of the Company) unless the law or Your religion forbids it.

F. The following is added as the last sentence in the Legal Actions provision appearing in **SECTION V GENERAL PROVISIONS**:
However, Your right to bring legal action against Us is not conditioned upon Your compliance with the provisions of any appraisal condition.

G. **SECTION V GENERAL PROVISIONS** is amended to include the following provision at the end of that

- A. The references to "Usual and Customary" are replaced by "Reasonable and Necessary".

section:

Marc J. Ade *B. Kraus*

Vermont law regarding civil unions: Vermont law requires that insurance policies and certificates offered to married persons and their families be made available to parties to a civil union and their families. In order to receive benefits in accordance with Vermont law regarding civil unions, the civil union must be established in the state of Vermont according to Vermont law. It is understood that definitions and provisions within this Certificate designating Insured, Eligible Person, Family Member, You/and or Your and another other certificate definitions and provisions designating an Insured under this Certificate are amended, whenever appearing, where terms denoting a marital relationship or family relationship arising out of a marriage are used to indicate parties to a civil union and their families under Vermont law.

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE VT

WYOMING

The Certificate is hereby amended for Wyoming as follows:

1. In the definition of **Pre-Existing Condition** appearing in **SECTION II DEFINITIONS**, Item 1) is deleted and replaced as follows:

- 1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute, resulting in actual diagnosis, care or treatment received;

2. In the **Pre-Existing Condition Exclusion** provision appearing in **SECTION IV GENERAL EXCLUSIONS**, Item 1) is deleted and replaced as follows:

- 1) received a recommendation for a test, examination, or medical treatment for a condition which first manifested itself, worsened or became acute, resulting in actual diagnosis, care or treatment received;

If there is a conflict between the Policy/Certificate and this Endorsement, the terms of this Endorsement will govern. T210-AE WY

If there is a conflict between the Policy and the Endorsements, the terms of this Endorsement will govern. Signed for United States Fire Insurance Company By:

us the opportunity to immediately resolve the problem.

If we don't have all the information necessary to review your complaint, we will request any additional information within 5 business days of receiving your complaint. After we receive all the necessary information, we will provide you, your authorized representative, or a provider acting on your behalf with our written decision within 30-days after receiving the complaint and all necessary information.

If the problem cannot be resolved in this manner, you still have the right to submit a written request for the complaint to be reviewed through the Formal Grievance Procedure, as outlined below.

FORMAL GRIEVANCE PROCEDURE

A formal Grievance may be submitted by you, your authorized representative, or in the event of an Adverse Determination, by a provider acting on your behalf.

If you file a formal Grievance, you will have the opportunity to submit written comments, documents, records and other information you feel are relevant to the Grievance, regardless of whether those materials were considered in the initial Adverse Determination.

First Level Review

Within 3 working business days after receiving the Grievance, we must acknowledge the Grievance and provide you, your authorized representative or a provider with the name, address, and telephone number of the coordinator handling the Grievance and information on how to submit written material. The person(s) who reviews the Grievance will not be the same person(s) who made the initial Adverse Determination. During the review, all information, documents, and other materials submitted relating to the claim will be considered, regardless of whether they were considered in making the previous claim decision. The Insured will not be allowed to attend, or have a representative attend, a First Level Review. The Insured may, however, submit written material for consideration by the reviewer(s).

GRIEVANCE

When the Grievance is based in whole or in part on a

GRIEVANCE PROCEDURES

When you submit a claim and that claim is denied, we will provide a written statement containing the reasons for the Adverse Determination. You have the right to request a review of any Company decision or action pertaining to our contractual relationship and to appeal any adverse claim determination we've made by filing a Grievance. These procedures have been developed to ensure a full investigation of a Grievance through a formal process.

DEFINITIONS

A "Grievance" is a written complaint requesting a change to a previous claim decision, claims payment, the handling or reimbursement of health care services, or other matters pertaining to your coverage and our contractual relationship.

An "Adverse Determination" is a determination by the Company or its designated utilization review organization that (i) a service, treatment, drug, or device, is experimental, investigational, specifically limited or excluded by your coverage; or (ii) a facility admission, the availability of care, continued stay or other health care services proposed or furnished have been reviewed and, based upon the information provided, does not meet the contractual requirements for medical necessity, appropriateness, health care setting, level of care or effectiveness and therefore, the benefit coverage is denied, reduced or terminated in whole or in part.

INFORMAL GRIEVANCE PROCEDURE

You, your authorized representative, or a provider acting on your behalf may submit an oral complaint to us within 60-days after an event that causes a dispute. Telephoning allows you to discuss your complaint or concerns and gives

medical judgment, the review will be conducted by, or in consultation with, a medical doctor with appropriate training and expertise to evaluate the matter.

Following our review of your Grievance, we must issue a written decision to you and, if applicable, to your representative or provider, within 20-days after receiving the Grievance. The written decision must include:

- (1) The name(s), title(s) and professional qualifications of any person(s) participating in the First Level Review process.
- (2) A statement of the reviewer's understanding of the Grievance.
- (3) The specific reason(s) for the reviewer's decision in clear terms and the contractual basis or medical rationale used as the basis for the decision in sufficient detail for the Insured to respond further to our position.
- (4) A reference to the evidence or documentation used as the basis for the decision.
- (5) If the claim denial is based on medical necessity, experimental treatment or similar exclusion, instructions for requesting an explanation of the scientific or clinical rationale used to make the determination.
- (6) A statement advising you of your right to request a Second Level Review, if applicable, and a description of the procedure and timeframes for requesting a Second Level Review.

Second Level Review

The Second Level Review process is available if you are not satisfied with the outcome of the First level Review for an Adverse Determination. Within ten business days after receiving a request for a Second Level Review, we will advise you of the following:

- (1) the name, address, and telephone number of a person designated to coordinate the Grievance review for the Company;
- (2) a statement of your rights, including the right to:
 - attend the Second Level Review
 - present his/her case to the review panel;
 - submit supporting materials before and at the review meeting;
 - ask questions of any member of the review panel;
 - be assisted or represented by a person of his/her choice, including a provider, family member, employer

representative, or attorney.

- request and receive from us free of charge, copies of all relevant documents, records and other information that is not confidential or privileged that were considered in making the Adverse Determination.

We must convene a review panel and hold a review meeting within 45-days after receiving a request for a Second Level Review. We will notify you in writing of the meeting date at least 15-days prior to the date. The review meeting will be held during regular business hours at a location reasonable accessible to you. In cases where a face-to-face meeting is not practical for geographic reasons, we will offer you the opportunity to communicate with the review panel at our expense by conference call or other appropriate technology. Your right to a full review may not be conditioned on whether or not you appear at the meeting.

If you choose to be represented by an attorney, we may also be represented by an attorney. If we choose to have an attorney present to represent our interests, we will notify you at least 15 working days in advance of the review that an attorney will be present and that you may wish to obtain legal representation of your own. The panel must be comprised of persons who:

- (1) were not previously involved in any matter giving rise to the Second Level Review;
- (2) are not employees of the Company or Utilization Review Organization; and
- (3) do not have a financial interest in the outcome of the review.

EXPEDITED REVIEW

You are eligible for an expedited review when the timeframes for an informal, formal First Level review or Second Level review would reasonably appear to seriously jeopardize your life or health, or your ability to regain maximum function. An expedited review is also available for all Grievances concerning an admission, availability of care, continued stay or health care service for a person who has received emergency services, but who has not been discharged from a facility.

A request for an expedited review may be submitted orally or in writing. An expedited review must be evaluated by an appropriate clinical peer in the same or similar specialty as would typically manage the case being reviewed. If we don't have the information necessary to decide an appeal, we will send you notification of precisely what is required within 24-hours of our receipt of your Grievance. All

your representative or provider, within 10 business days after completing the review meeting. The decision must include:

- (1) the name(s), title(s) and qualifying credentials of the members of the review panel;
- (2) a statement of the review panel's understanding of the nature of the Grievance and all pertinent facts;
- (3) the review panel's recommendation to the Company and the rationale behind the recommendation;
- (4) a description of, or reference to, the evidence or documentation considered by the review panel in making the recommendation;
- (5) in the review of a Utilization Review non-certification or other clinical matter, a written statement of the clinical rationale, including the clinical review criteria, that was used by the review panel to make the determination;
- (6) the rationale for the Company's decision if it differs from the review panel's recommendation;
- (7) a statement that the decision is the Company's final determination in the matter;
- (8) notice of the availability of the Commissioner's office for assistance, including the telephone number and address of the Commissioner's office.

GRIEVANCE

We must issue a written decision to you and, if applicable, to

necessary information, including our decision, will be transmitted by telephone, facsimile, or the most expeditious method available. Provided we have enough information to make a decision, you, your authorized representative, or a provider acting on your behalf will be notified of the determination as expeditiously as the medical condition requires, but in no event more than 72-hours after the review has commenced. Written confirmation of our decision will be provided within 2 working business days of the decision and will contain the same items described in the written decision requirements for First Level reviews.

If the expedited review does not resolve the situation, you, your representative or a provider acting on your behalf may submit a written Grievance.
We will not provide an expedited review for retrospective reviews of Adverse Determinations

When used throughout this document "The Company", "Our", "We", or "Us" means:
United States Fire Insurance Company

PRIVACY POLICY AND PRACTICES

The Company values your business and your trust. In order to administer insurance policies and provide you with effective customer service, we must collect certain information about our customers. We want you to know that we are committed to protecting your private information and we will comply with all federal and state privacy laws. Below is a Privacy Notice describing our policy regarding the collection and disclosure of personal information. Please review this Notice and keep a copy of it with your records.

Your Privacy is Our Concern

When you apply to The Company for insurance or make a claim against a policy written by The Company, you disclose information about yourself to us. There are legal requirements governing the collection, use, and disclosure of such information. The Company maintains physical, electronic, and procedural safeguards that comply with state and federal regulations to guard your personal information. We also limit employee access to personally identifiable information to those with a business reason for knowing such information. The Company instructs our employees as to the importance of the confidentiality of personal

information, and takes measures to enforce employee privacy responsibilities.

What kind of information do we collect about you and from whom?

We obtain most of our information from you. The application or claim form you complete, as well as any additional information you provide, generally gives us most of the information we need to know. Sometimes we may contact you by phone or mail to obtain additional information. We may use information about you from other transactions with us, our affiliates, or others. Depending on the nature of your insurance transaction, we may need additional information about you or other individuals proposed for coverage. We may obtain the additional information we need from third parties, such as other insurance companies or agents, government agencies, medical personnel, the state motor vehicle department, information clearinghouses, credit reporting agencies, courts, or public records. A report from a consumer reporting agency may contain information as to creditworthiness, credit standing, credit capacity, character, general reputation, hobbies, occupation, personal characteristics, or mode of living.

What do we do with the information collected about you?

If coverage is declined or the charge for coverage is increased because of information contained in a consumer report we obtained, we will inform you, as required by state law or the federal Fair Credit Reporting Act. We will also give you the name and address of the consumer reporting agency making the report. We may retain information about our former customers and may disclose that information to affiliates and non-affiliates only as described in this notice.

To whom do we disclose information about you?

We may disclose all the information that we collect about you, as described above. We may disclose such information about you to our affiliated companies, such as:

- Insurance companies;
- Insurance agencies;
- Third party administrators;
- Medical bill review companies; and
- Reinsurance companies.

We may also disclose nonpublic personal information about you to affiliated and nonaffiliated third parties as permitted by law. You have a right to access and correct the personal information we collect, maintain and disclose about you.

How to contact Us

You may obtain a more detailed description of the information practices prescribed by law by contacting us at the address below. Remember to include your name, address, policy number, and daytime phone number.

Privacy Policy Coordinator
Fairmont Specialty
5 Christopher Way, 3rd Floor
Eatontown, New Jersey 07724

Policy Type: Results**Academic Performance**

Students will achieve academically at levels commensurate with challenging and yearly personalized learning goals. Each student will achieve at or above grade level in the following disciplines:

1. Language Arts
2. Math
3. Science
4. Social Studies
5. The arts, including music, art and drama
6. Technology
7. Physical education

Students will graduate career and/or college ready, having successfully completed career or technical programs; and/or, graduate with an ACT score at or above the state average.

Priority is focused on reading, writing and math achievement as fundamental to any further achievement.

Adopted: 2016

Monitoring Method: **Board self-assessment**

Monitoring Frequency: **Language Arts: Annually in September**

Math: Annually in October

Science: Annually in November

Social Studies: Annually in November

The Arts: Annually in February

Technology: Annually in February

Physical Education: Annually in February



SDWD Social Studies & Science Update

November 14, 2016

Social Studies Update:

The contents of this report are intended to provide the School District of Wisconsin Dells Board of Education with updated information (including brief historical data) on student performance in the area of Social Studies. There are different testing requirements for Social Studies compared to English/Reading and Mathematics. Whereas testing in these areas is largely driven by Federal Law, Social Studies is exempt from Federal requirement, however, the State of Wisconsin currently requires that districts administer a state-sponsored Social Studies exam in grades 4, 8, and 10. The current assessment instrument is the *Wisconsin Forward Exam for Social Studies* and for many years prior the *Wisconsin Knowledge and Concept Exam (WKCE)* was utilized at these levels to assess student progress within the Social Studies standards.

Social Studies Standards:

There currently are not a set of “common core state standards” for Social Studies. We continue to utilize the Wisconsin Model Academic Standards that were last revised/published in 1998. Although there has been some discussion on the topic of new standards, there has been no adoption by the State of Wisconsin to date.

As required by WI Act 55 (2015), beginning with the Class of 2017, it is a requirement that each student takes a Civics Exam comprised of 100 questions that are identical to the 100 questions that may be asked of an individual during the process of applying for U.S. citizenship by the United States Citizenship and Immigration Services. Students must answer 60/100 correctly to be eligible for a high school diploma. Students with IEP's were originally required to take the exam but were not required to get 60% correct but the law now allows for flexibility in whether a student with special needs takes the exam at all. The creation, administration, scoring, and record keeping falls on districts to develop as it is a graduation requirement, rather than a state test. The test can be taken in any language. Our WDHS Social Studies Department currently administers the test as part of our Civics course, scores it, and communicates results with the administration. Students can take the test multiple times until the requirement is fulfilled.

American Indian Studies—“Act 31,” requires part of the social studies curriculum to include instruction in the history, culture, and tribal sovereignty of the federally recognized American Indian tribes and bands located in Wisconsin at least twice in the elementary grades and at least once in the high school grades. We continually examine Act 31 as a district to monitor for compliance.

SDWD Social Studies & Science Update

November 14, 2016

Historical State Social Studies Comparisons Percentages of Students Proficient or Advanced:

4th Grade:

School Year	Assessment	State Average	SDWD Average
2011-12	WKCE	93.2	99.1
2012-13	WKCE	91.7	91.0
2013-14	WKCE	92.4	97.3
2014-15	WKCE	91.0	94.6
2015-16	Wisconsin Forward	53.2	64.3

8th Grade:

School Year	Assessment	State Average	SDWD Average
2011-12	WKCE	81.2	79.8
2012-13	WKCE	82.1	84.2
2013-14	WKCE	80.7	86.7
2014-15	WKCE	82.4	83.0
2015-16	Wisconsin Forward	49.4	55.6

10th Grade:

School Year	Assessment	State Average	SDWD Average
2011-12	WKCE	75.6	82.3
2012-13	WKCE	80.5	83.2
2013-14	WKCE	76.8	79.8
2014-15	WKCE	80.5	85.1
2015-16	Wisconsin Forward	46.7	48.9

SDWD Social Studies & Science Update

November 14, 2016

Social Studies Scope and Sequence:

The majority of Social Studies instruction in the early grades is delivered through a literacy-based approach. Our current reading series (Little Treasures 4K, Treasures K, and Lead-21 grades 1-5) encompass the following topics:

Grade Level	Social Studies Topics
4K	Family Members, Community Places
K	Families, Friends, Neighbors, Places, and People
1	Neighborhood, Good Citizenship
2	Community Life, Local Leaders
3	The Shape of the Land, Making a Difference (historical impact of humans)
4	A Nation's Beginnings, The Wide Open West
5	The Early America's, Foundations of Freedom

Students in 4th grade also learn about Wisconsin and local history and in 5th grade our students go deeper into American History as part of a 5-12 scope and sequence. Since success in the social sciences in general weighs heavily on one's ability to read, write, and interpret different forms of text, most agree that more time being spent on reading foundational skills at the lower levels can lead to greater content-area success at the higher levels.

Grade Level	Social Studies Topics
6	Western Hemisphere Geography
7	Eastern Hemisphere Geography
8	U.S. History

We have made some recent adjustments to the 6-8 Social Studies curriculum by flip-flopping what were our 7th and 8th grade courses. Some districts made this modification many years ago so that 8th-9th grade students can focus on U.S. History for consecutive years prior to the 10th grade state assessment which is largely U.S. History based. The current year is a transition year, so our 8th grade course is being taught as a combination of early U.S. History and Eastern Hemisphere. Prior to 2011-12, U.S. History was taught as a 10th grade course but we made the adjustment to 9th grade largely to give students more in-depth learning of U.S. History prior to 10th grade.

SDWD Social Studies & Science Update

November 14, 2016

Current High School Offerings:

Course	Credits	Grade Level (s)
U.S. History (required or AP Prep)	1	9
AP Prep U.S. History (required or U.S.)	1	9
AP U.S. History	1	11-12
World History (required or AP Prep)	1	10
AP World History (required or World)	1	10-12
Civics (required)	.5	11-12
Social Problems	.5	11-12
Sports History (2017-18)	.5	11-12
Wisconsin History	.5	9-12
Economics	.5	11-12
Philosophy	.5	11-12
Psychology	.5	11-12
Sociology	.5	11-12
World Geography (2017-18)	.5	11-12

At least three credits of Social Studies including state and local government are required for public high school graduation. WDHS has the same requirement.

AP Courses and Results:

Per the Strategic Plan Goals, WDHS has expanded AP offerings in multiple areas in recent years including Social Studies. AP World History was offered for the first time during the 2015-16 school year (and again this year) and AP U.S. History is currently being taught during this 2016-17 school year.

2015-16 AP World History Results:

Number of Students	Number Passed (3 or higher)	Pass Rate National Average	Pass Rate State Average	Pass Rate WDHS
26	13	51.2	56.1	50.0

It is not untypical for results in the first year of an AP offering to be lower than average. We anticipate higher pass rates at the conclusion of this school year. AP World History is regarded as one of the more difficult AP Exams to pass with a 3 or higher. In 2016, of all 44 AP Exams offered by the College Board, AP World History had the fourth *lowest* pass rate behind only Physics 1, Environmental Science, and Government and Politics.

SDWD Social Studies & Science Update

November 14, 2016

Science Update:

The contents of this report are intended to provide the School District of Wisconsin Dells Board of Education with updated information (including brief historical data) on student performance in the area of Science. Testing requirements for Science are similar to English/Reading and Mathematics with the Federal requirement being that students are tested in Science in 4th and 8th grades and once during high school. The current assessment instrument is the *Wisconsin Forward Exam for Science* and is utilized in 4th and 8th grades (formerly WKCE), and student results from the State-Wide ACT (11th graders) are used for the high school requirement. Until 2015-16, the WKCE 10th Grade Science score was utilized for these purposes.

Science Standards:

The *Wisconsin Model Academic Standards (WMAS) for Science* (1998) are the current state standards. These standards contain many high-quality ideas for effective science instruction. No timeline currently exists for reviewing or changing state science standards. Many districts have locally adopted the *Next Generation Science Standards (NGSS)*. In the SDWD, we have introduced these standards and conducted professional development on them, but have not yet put them in our Annual Notice for school board adoption. In August of 2015, we offered a workshop on NGSS in the elementary and had a CESA #5 consultant present on the topic. In August 2016, we had the DPI Science Consultant review the NGSS with all of our grades 6-12 Science instructors. NGSS is a current topic on our PACT days.

Beginning in 2013-14, our 6-12 Science educators also began to work more closely with the *ACT College/Career Readiness Standards* through the *Aligned by Design* process. We have continued in this process as recently as our October 12 PACT Day, when we had our consultant revisit to work with our 6-12 Science PACT. Our strategic work with the ACT Standards has in part led us to increased assessment results on the various ACT assessments.

SDWD Social Studies & Science Update

November 14, 2016

Historical State Science Comparisons Percentages of Students Proficient or Advanced:

4th Grade:

School Year	Assessment	State Average	SDWD Average
2011-12	WKCE	77.3	75.5
2012-13	WKCE	77.5	82.0
2013-14	WKCE	76.1	83.6
2014-15	WKCE	79.6	87.4
2015-16	Wisconsin Forward	51.8	60.5

8th Grade:

School Year	Assessment	State Average	SDWD Average
2011-12	WKCE	80.4	76.0
2012-13	WKCE	77.3	72.6
2013-14	WKCE	80.3	84.7
2014-15	WKCE	79.3	75.5
2015-16	Wisconsin Forward	49.4	48.4

10th Grade:

School Year	Assessment	State Average	SDWD Average
2011-12	WKCE	72.5	72.6
2012-13	WKCE	75.5	75.6
2013-14	WKCE	73.2	76.0
2014-15	WKCE	76.3	87.2

11th Grade:

School Year	Assessment	State Average Comp	SDWD Average Comp	Converted to Proficiency State	Converted to Proficiency SDWD	STEM Comp State	STEM Comp SDWD
2015-16	ACT Science	20.5	20.9	34.3%	40.9%	20.6	20.8

SDWD Social Studies & Science Update

November 14, 2016

Science Scope and Sequence:

The majority of Science instruction in the early grades is delivered through a literacy-based approach. Our current reading series (Little Treasures 4K, Treasures K, and Lead-21 grades 1-5) encompass the following Science topics:

Grade Level	Science Topics
4K	Body Parts, Foods, Plants, Transportation, Animals, Nature, Weather, Habitats
K	Transportation, Food, Animals, Weather, Plants, Insects, Fish, 5 Senses
1	Movement, Matter, Earth, Habitats
2	Fields of Science, Seasons & Weather, Life Cycles
3	Science and Recreation, Water Cycle and Earth, Extreme Environments
4	Conserving Earth's Resources, Solar System, Ecosystems, Matter, Weather
5	Space and Exploration, Earth's composition, Plant Purposes, Energy, Human Body

Science instruction gets more specialized as students' progress through our school system. More time is devoted specifically to explicit Science instruction in the upper elementary grades. Due to multiple sections, there is more Science specialization happening at Spring Hill. Through platooning efforts, two teachers team together with one teaching Math and Science and the other teaching ELA and Social Studies. In 5th grade at Spring Hill, one teacher teaches all of the Science for the grade level.

MS STEM Efforts:

Grade Level	Science Content	STEM Courses
5	Spring Hill Only	Input/Output Computer Systems and Energy Collision
6	Earth Science	Infection Detection and Infection Modeling and Simulation
7	Life Science	Automation & Robotics and Design and Modeling
8	Physical Science (Chem/Physics)	Magic of Electronics and Computer Science

SDWD Social Studies & Science Update

November 14, 2016

Current High School Offerings:

Course	Credits	Grade Level (s)
Biology	1	9-12
Conceptual Chemistry	1	10-12
Chemistry	1	10-12
AP Prep Chemistry	1	10-12
Organic Chemistry	1	11-12
AP Chemistry	1	11-12
Physics	1	11-12
Anatomy & Physiology	1	11-12
AP Biology	1	11-12
Forensic Science	.5	9-12
Principles of the Biomedical Sciences PLTW Course	1	10-12
Human Body Systems (2017-18) PLTW Course	1	10-12
Medical Interventions (2018-19) PLTW Course	1	10-12

WDHS requires 3.5 credits of Science for graduation.

Introduction to Engineering Design is another PLTW STEM Course offered at WDHS but outside of the Science Department.

AP Courses and Results:

Per the Strategic Plan Goals, WDHS has expanded AP offerings in multiple areas in recent years including Science. AP Biology and Chemistry have both been offered in recent years. During the current year, only AP Biology is being taught but AP Chemistry will again be an option during the 2017-18 school year.

2015-16 AP Chemistry Results:

Number of Students	Number Passed (3 or higher)	Pass Rate National Average	Pass Rate State Average	Pass Rate WDHS
12	8	52.3	56.5	66.7

School District of Wisconsin Dells

Connect. Inspire. Achieve.

Everyone. Every Day.

WISCONSIN SCHOOL DISTRICT REFERENDUM HISTORY – 2000-2016



Summary

Election Month	Issue Debt			Non-recurring			Recurring		
	Pass			Pass			Pass		
	Failed	Passed	Percentage	Failed	Passed	Percentage	Failed	Passed	Percentage
February	41	64	61.0%	28	43	60.6%	28	20	41.7%
April	190	205	51.9%	134	196	59.4%	94	54	36.5%
August/September	19	20	51.3%	15	19	55.9%	8	5	38.5%
November	68	144	67.9%	31	66	68.0%	25	34	57.6%
Special	103	80	43.7%	32	54	62.8%	50	35	41.2%
Total	421	513	54.9%	240	378	61.2%	205	148	41.9%

Election Year	Issue Debt			Non-recurring			Recurring		
	Pass			Pass			Pass		
	Failed	Passed	Percentage	Failed	Passed	Percentage	Failed	Passed	Percentage
Presidential Election									
2000	45	67	59.8%	16	17	51.5%	23	26	53.1%
2004	17	32	65.3%	9	16	64.0%	13	10	43.5%
2008	27	30	52.6%	23	32	58.2%	19	10	34.5%
2012	11	29	72.5%	10	19	65.5%	3	4	57.1%
2016	18	64	78.0%	9	38	80.9%	5	20	80.0%
Total	118	222	65.3%	67	122	64.6%	63	70	52.6%
Non-Presidential Election									
2001	49	35	41.7%	13	16	55.2%	33	20	37.7%
2002	35	24	40.7%	13	11	45.8%	18	2	10.0%
2003	44	13	22.8%	13	8	38.1%	24	5	17.2%
2005	25	17	40.5%	14	16	53.3%	13	10	43.5%
2006	22	40	64.5%	22	32	59.3%	11	10	47.6%
2007	25	31	55.4%	18	22	55.0%	14	9	39.1%
2009	14	13	48.1%	17	19	52.8%	10	3	23.1%
2010	16	26	61.9%	18	19	51.4%	8	2	20.0%
2011	20	13	39.4%	10	22	68.8%	1	4	80.0%
2013	16	19	54.3%	11	21	65.6%	3	1	25.0%
2014	18	33	64.7%	15	39	72.2%	7	8	53.3%
2015	19	27	58.7%	9	31	77.5%	0	4	100.0%
Total	303	291	49.0%	173	256	59.7%	142	78	35.5%

UPCOMING REGULAR ELECTION DATES¹

	2017		2018		2019	
	Primary	General	Primary	General	Primary	General
Spring	02/21/2017	04/04/2017	02/20/2018	04/03/2018	02/19/2019	04/02/2019
Fall	No Fall Elections		08/14/2018	11/06/2018	No Fall Elections	

School Finance Team

Brian Brewer

Michel Clark - Lisa Voisin

BairdPublicFinance@rwbaird.com

School Business Solutions Team

Debby Schufletowski

Marleen Clark - Karen Dvornik - Diane Pertzborn

SchoolBusinessSolutions@rwbaird.com

¹The governing board required to file adopted referendum ballot resolutions with their municipal clerks at least 70 days prior to the election date indicating the amount and purpose.
©2015 Robert W. Baird & Co. Incorporated. Member SIPC. Source: Department of Public Instruction

Is the Need for Referendum Unique to your District?

BAIRD

Since 2010:

- By the end of 2016, over 68% of Wisconsin schools will have gone to referendum, many of them multiple times, for over 670 debt or revenue limit override questions

2016 Year to Date:

- 154 questions on the referendum ballot for the year
 - Over \$2.3 billion of total funding requests in 2016
 - 47 questions for NR Revenue Limit increases totaling \$360.423 million
 - 38 questions passed (81%) for a sum of \$317.180 million
 - 25 questions for RR Revenue Limit increases totaling \$60.887 million
 - 20 questions passed (80%) for a sum of \$51.411 million
 - 82 questions for new Debt Authority totaling \$1.894 billion
 - 64 questions passed (78%) for a sum of \$1.354 billion

Issue Debt Question Breakdown	2016	# Passed	Pass %	Fail %
Over \$20M	34	26	76%	24%
Over \$10M to \$20	9	7	78%	22%
Over \$5M to \$10M	18	13	72%	28%
\$5M or Less	21	18	86%	14%

Source: Department of Public Instruction-data as of 11-2016