MASTERCARD PHILIPPINES TRAVEL INSURANCE Terms and Conditions

SUMMARY OF COVER

Travel Insurance Coverage***	Maximum Benefit Amount (USD)
Travel Medical Benefits:	
Medical Expenses (Injury or Sickness)	Up to USD 100,000
Emergency Medical Evacuation/Return of Mortal Remains	Up to USD 100,000
Daily In-Hospital Cash Benefit (minimum 3 days, maximum 15 days)	USD 100 per Day
Overseas Quarantine Allowance (maximum 14 days)	USD 100 per Day
Assistance Department Services	Included

^{***} Sub-limits apply for Spouse and Children on all Accident & Health Coverage benefits listed above. The sub-limit for Spouse and Children is equivalent to 50% of all Travel Insurance Coverage benefits.

Please see Covid-19 Covered Conditions And Exclusions section for more information.

Please see also Assistance Department section for information on additional features and benefits.

Each insurance benefit limit described in this document is in United States Dollars (USD). Payment of claims will be made in local currency where required by law using the official Foreign Exchange Rate published on the date Claim payment is made.

GENERAL CONDITIONS

Eligibility Criteria

You are eligible for cover under the Policy if:

- (i) you are an eligible cardholder; and
- (ii) you have completed the Travel Insurance Benefit registration process prior to the commencement of your trip; and
- (iii) the entire cost of Common Carrier fare has been charged to your eligible card or has been acquired with points earned by a rewards program associated with Your card (i.e. mileage points for travel).

Except for One-way Trips, coverage is valid for trips up to one hundred eighty (180) days where the entire cost of the Common Carrier fare was purchased using the Eligible Card and commencing within twelve (12) months from the date of your registration.

Who is Covered

An Eligible Cardholder, his Spouse and Children, whether traveling together or separately on a Covered Trip.

One-Way Trips

For one-way trips, the following benefits end seven (7) days after Your arrival at Your final destination outside of Your Country of Residence:

- 1. Emergency Medical Expenses;
- 2. Emergency Medical Evacuation/Transportation expenses;
- 3. Emergency Dental Treatment;
- 4. Repatriation of Mortal Remains;
- 5. Hospital Daily Cash Benefit;
- 6. Overseas Quarantine Allowance Benefit.

Claims

In the event of a claim, you will be required to provide documentation which is reasonably necessary to support your eligibility.

Payments

All payments to be made by the Insurer shall be paid to Eligible Cardholders in the Territory. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

Where allowable by law, Benefit for Loss of Life is payable to the beneficiary designated by the Insured Person. If there has been no such designation, payment shall be made in the order of succession under the Civil Code of the Philippines

All other benefits will be paid to the Insured Person or other appropriate party where necessary. Payment of any indemnity shall be subject to the laws and governmental regulations then in effect in the country of payment.

Automatic Extension of Coverage Period

The coverage period for a Covered Trip will automatically extend for up to thirty (30) days from the original date of return stated on the Common Carrier ticket if on Your original date of return You are under Hospital Confinement and/or quarantined as advised by a Medical Practitioner.

Economic Sanctions Exclusions

If, by virtue of any law or regulation which is applicable to an Insurer, its parent company or its ultimate controlling entity, at the inception of the Policy or at any time thereafter, providing coverage to the Insured is or would be unlawful because it breaches an applicable embargo or sanction, that Insurer shall provide no coverage and have no liability whatsoever nor provide any defense to the Insured or make any payment of defense costs or provide any form of security on behalf of the Insured, to the extent that it would be in breach of such embargo or sanction.

Consumer Notice

AIG is subject to compliance with US sanctions laws. For this reason, the Policy does not cover any loss, injury, damage or liability, benefits or services directly or indirectly arising from or relating to a planned or actual trip to or through Cuba, Iran, Syria, North Korea, or the Crimea region. In addition, the Policy does not cover any loss, injury, damage or liability to residents of Cuba Iran, Syria, North Korea, or the Crimea region. Lastly, the Policy will not cover any loss, injury, damage or legal liability sustained directly or indirectly by any individual or entity identified on any applicable government watch lists as a supporter of terrorism, narcotics or human trafficking, piracy, proliferation of weapons of mass destruction, organized crime, malicious cyber activity, or human rights abuses.

Governing Law and Jurisdiction: The Policy is governed by the laws of the Philippines where the Mastercard card was issued. Any dispute arising between the Insured Person and the Insurer is subject to the exclusive jurisdiction of the competent courts of the Philippines.

GENERAL KEY TERMS AND DEFINITIONS

Accident means a sudden, unforeseen, uncontrollable and unexpected physical event to the Insured Person caused by external, violent and visible means occurring during a Covered Trip.

Cardholder(s) means all individuals who have been issued an Eligible Card, including secondary or additional cardholders on the same account, in the Territory where such Eligible Card is issued by a participating Issuer.

Child or Children means the Eligible Cardholder's child/children whether biological or legally adopted, more than 6 months old and not over eighteen (18) years of age (or under twenty three (23) years of age if a full time student), unmarried and primarily dependent on the Insured Person for support.

Common Carrier means any land, sea or air travel arrangements for a scheduled tour, trip or cruise to any location pre-paid with the Eligible Card.

City of Permanent Residence means the city in which You are residing.

Country of Permanent Residence/ Country of Residence means the country where Insured Person is currently residing and holds a valid residency visa or where the Insured Person was born.

Covered Trip means an Insured Person's land, sea or air travel arrangements for a scheduled tour, trip or cruise purchased with the Eligible Card that starts on or after the Eligible cardholder's registration from the country of the Eligible Card issuance. For round trips, coverage will be from the departure date until the return date as shown on the ticket purchased with the Eligible Card up to a maximum of one hundred eighty (180) days. For one-way trips, coverage will be from the departure date up to a maximum of seven (7) days.

Eligible Card means participating Issuer's Mastercard Elite credit cards issued from time to time in the Philippines.

Eligible Cardholder(s) means Cardholders aged eighteen (18) years old to sixty nine (69) years old with Eligible Cards who are entitled to receive benefits as is provided for in the Policy.

Emergency Evacuation means:

- a. Your medical condition warrants immediate transportation from the place where You are injured or got sick to the nearest Hospital where appropriate medical treatment can be obtained; or
- b. after being treated at a local Hospital, Your medical condition warrants transportation to Your current place of residence; or
- c. both (a) and (b) above.

Excess/Deductible/Elimination Period means the amount of expenses or the number of days of each and every Loss payable by You before the Policy benefits become payable.

Family means the Spouse and up to three (3) Children.

Hospital means a place that:

- 1. holds a valid license (if required by law where it conducts business);
- 2. operates primarily for the care and treatment of Sick or injured persons;
- 3. has a staff of one or more Physicians available at all times;
- 4. provides 24-hour nursing service and has at least one registered professional nurse on duty at all times;
- 5. has organized diagnostic and surgical facilities, either on premises or in facilities available to the Hospital or a pre-arranged basis; and
- 6. is not, except incidentally, a clinic, nursing home, rest home, or convalescent home for the aged, or a facility operated as a drug and/or alcohol treatment center.

Immediate Family Member means a person's legal spouse; children; children-in-law; siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal guardian, ward; step or adopted children; stepparents; aunts, uncles; nieces, and nephews, who reside in the Country of Residence.

Injury means a bodily injury caused solely and directly by violent, accidental, external and visible means resulting directly and independently of all other causes occurring during a Covered Trip while the Policy is in effect.

Inpatient means an Insured Person who is confined at a Hospital, under the recommendation of a Physician, and for whom a room and board charge is made.

Insured Person(s) means an Eligible Cardholder or other eligible person(s) who are defined as being eligible under each program's "Who is Covered" provision in this guide.

The Policy offers coverage only to the Eligible Cardholders who are residents of the Philippines and whose Eligible Card was issued in the Philippines.

Insured Events means any occurrence which is outlined in the Benefits as a circumstance covered in the Policy which takes place during a Covered Trip. This includes those that occur during acts of Terrorism.

Insurer/We/Us mean AIG Philippines Insurance, Inc. which shall be responsible for providing Travel Insurance to cardholders in their country of registration.

Issuer means a Bank or financial institution (or like entity) that is admitted and/or authorized by Mastercard to operate a Mastercard credit card program in the Territory and is participating in the Travel Insurance offering to Cardholders.

Mastercard means Mastercard Asia/Pacific Pte. Ltd, a corporation organized under the laws of Singapore, with office at 3 Fraser Street, Duo Tower, Singapore, 189352.

Medically Necessary medical services or supplies are those which:

- a. are essential for diagnosis, treatment or care of the covered loss under the applicable benefit for which it is prescribed or performed;
- b. meets generally accepted standards of medical practice; and
- c. are ordered by a Physician and performed under his or her care, supervision or order.

Natural Disaster means extreme weather conditions (including but not limited to typhoons, hurricanes, cyclones or tornados), fires, floods, tsunamis, volcanic eruptions, earthquakes, landslides or other convulsion of nature or by consequences of any of the occurrences mentioned above.

Overseas means beyond the territorial limits of Your Country of Departure or Country of Residence as applicable depending on the country from where You originally depart as per Your travel itinerary, but in no circumstance includes Your Country of Residence.

Physician means a Doctor of Medicine or a Doctor of Osteopathy licensed to render medical service or perform surgery in accordance with the laws of the country where such professional services are performed, however, such definition will exclude chiropractors, physiotherapists, homeopaths and naturopaths.

Policy means an Accident and Travel Insurance policy and any attached endorsements or riders issued by the Insurer to Mastercard.

Pre-existing Medical Condition means a condition for which medical care, treatment, or advice was recommended by or received from a Physician or which first manifested or was contracted within a period up to 12 months preceding the Covered Trip.

Quarantine means a restriction on movement or travel placed by a medical or governmental authority, in order to stop the spread of a communicable disease.

Sickness means illness or disease of any kind contracted and/or commencing during a Covered Trip.

Spouse means the Eligible Cardholders' legally married husband or wife between the ages of eighteen (18) years and sixty-nine (69) years.

Territory means the Republic of the Philippines.

Terrorist Act means the use or threatened use of force or violence against person or property, or commission of an act dangerous to human life or property, or commission of an act that interferes with or disrupts an electronic or communication system, undertaken by any person or group, whether or not acting on behalf of or in any connection with any organization, government, power, authority or military force, when the intent is to intimidate, coerce or harm a government, the civilian population or any

segment thereof, or to disrupt any segment of the economy. Terrorism shall also include any act which is verified or recognized as an act of terrorism by the government where the event occurs.

Transportation means any land, water or air conveyance required to transport You during an Emergency Evacuation. Transportation includes, but is not limited to, air ambulances, land ambulances and private motor vehicles.

Travelling Companion means person(s) who is/are booked to accompany You on the Trip.

War means any declared or undeclared war or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

You means the beneficiary of the insurance coverage.

Your means belonging or pertaining to You.

TRAVEL MEDICAL BENEFITS

We will pay the usual Reasonable and Customary charges for Covered Medical Expenses, not due to a Pre-Existing Medical Condition, incurred by an Insured Person while travelling outside of Your Country of Permanent Residence.

3. Key Features

- Trips are covered for travel worldwide.
- Coverage is provided for Injury or Sickness sustained while on a Covered Trip, even if it is not an emergency.
- Medical Expense coverage up to a maximum benefit amount of USD 100,000 per person (sub-limits apply to Spouse and Children. Please refer to the SUMMARY OF COVER for more details).
- No limitation on the number of trips.
- Coverage is provided for both one-way or roundtrip travel.
- Covered losses caused by or resulting from Acts of Terrorism are included.

MEDICAL EXPENSES

1. If You suffer an Injury or Illness and need medical attention while outside of Your Country of Permanent Residence, benefits are provided for Covered Medical Expenses. This coverage provides a maximum benefit up to USD 100,000 per person (sublimits apply to Spouse and Children. Please refer to the SUMMARY OF COVER for more details).

2. Covered Medical Expenses include:

- a. The services of a Physician which includes diagnosis, treatment and/or;
- Hospital charges such as room and board, floor nursing and other services, including professional fees except fees for personal services of a non-medical nature, provided, however, that expenses do not exceed the Hospital's average charge for semi-private room and board accommodation;
- c. Anesthetics (including administration), x-ray examinations or treatments, and laboratory tests, the use of radium and radioactive isotypes, oxygen, blood transfusions, iron lungs and medical treatment;
- d. Ambulance Services;
- e. Dressings, drugs, medicines and therapeutic services and supplies that can only be obtained upon a written prescription from a Physician or surgeon; and
- f. Dental Treatment resulting from injuries sustained to sound, natural teeth subject to a maximum of USD 100 per tooth.

The charges for services enumerated above shall not include any amount of such charges that are in excess of Regular and Customary charges or are excluded.

Regular and Customary means the average charge for such services and supplies in the locality where received, considering the nature and severity of the Sickness or Injury for which the services and supplies are rendered or received.

If the charge incurred is in excess of such average charge, such excess amount shall not be recognized as covered expenses. All charges are deemed be incurred on the date such services or supplies which give rise to the expense or charge are rendered or obtained.

3. What is Not Covered by "Medical Expenses" (In addition to General Exclusions):

In addition to the General Exclusions, "Medical Expense" benefits are not payable for any losses, fatal or non-fatal, which are caused by or resulting from:

- 1. a Pre-existing Medical Condition, as defined herein;
- 2. services, supplies or treatment, including any period of hospital confinement, which was not recommended, approved and

- certified as necessary and reasonable by a Physician;
- 3. routine physicals, laboratory diagnostic, x-ray examinations or other examinations, except in the course of a disability established by the prior call or attendance of a Physician while on a Covered Trip;
- 4. Elective, cosmetic or plastic surgery, except as the result of an Accident;
- 5. Dental care, except as the result of Injury to sound, natural teeth caused by accident while the Policy is in effect;
- 6. Expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails;
- 7. The diagnosis and treatment of acne;
- 8. Deviated septum, including sub mucous resection and/or other surgical correction thereof;
- 9. Organ transplants that competent medical professionals consider experimental;
- 10. Well child care including exams and immunizations;
- 11. Expenses which are not exclusively medical in nature;
- 12. Any expenses incurred in Country of Residence;
- 13. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof, unless an Injury or Sickness has caused the impairment of vision or hearing;
- 14. Treatment provided in a government hospital or services for which no charge is normally made;
- 15. Mental, nervous, or emotional disorders or rest cures; and
- 16. Pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices.

EMERGENCY MEDICAL EVACUATION

1. We will pay up to the maximum combined benefit of up to USD 100,000 per person (sub-limits apply to Spouse and Children. Please refer to the SUMMARY OF COVER for more details) for covered expenses due to Emergency Medical Evacuation or Return of Mortal Remains if incurred outside of Your Country of Permanent Residence. An Emergency Evacuation must be ordered by the Assistance Department or a Physician who certifies that the severity or the nature of Your Injury or Sickness and warrants Your Evacuation.

Covered expenses are those for Transportation and medical treatment, including medical services and medical supplies necessarily incurred in connection with Your Emergency Evacuation. All Transportation arrangements made for evacuating You must be by the most direct and economical route possible.

Expenses for Transportation must be:

- a. recommended by the attending Physician;
- b. required by the standard regulations of the conveyance transporting You; and
- c. arranged and authorized in advance by the Assistance Department.

RETURN OF MORTAL REMAINS

We will pay benefits for covered expenses reasonably incurred while travelling outside of Your Country of Permanent Residence, to repatriate the mortal remains of the Insured Person. Benefits will not exceed the combined maximum limit of USD 100,000 per person (sub-limits apply to Spouse and Children. Please refer to the SUMMARY OF COVER for more details) for both the Medical Evacuation and Return of Mortal Remains.

Covered expenses include, but are not limited to, expenses for:

- a. embalming;
- b. cremation;
- c. coffins; and
- d. transportation.

These expenses must be authorized and arranged by the Assistance Department. You or Your Family must contact the numbers listed in the Customer Service Section.

DAILY IN-HOSPITAL CASH BENEFIT

1. If You are hospitalized as an Inpatient, due to Injury or Illness while outside Your Country of Permanent Residence, a benefit of USD 100 per day per person (sub-limits apply to Spouse and Children. Please refer to the SUMMARY OF COVER for more details) will be provided for each day an Insured Person is hospitalized. The Hospital confinement must be recommended by a Physician.

2. What is Not Covered by "Daily In-Hospital Cash Benefit" (In addition to General Exclusions):

- a. Pre-existing Medical Condition;
- b. Hospitalization in Your Country of Residence;

- c. Pregnancy and resulting childbirth, miscarriage or disease of the female reproductive organs;
- d. Routine physical exams;
- e. Cosmetic or plastic surgery, except as a result of Injury;
- f. Any mental or nervous disorder or rest cures.

OVERSEAS COVID-19 DIAGNOSIS QUARANTINE ALLOWANCE

1. We will pay up to USD 100 per day as specified in the Summary of Cover per person (sub-limits apply to Spouse and Children. Please refer to the SUMMARY OF COVER for more details) for up to fourteen (14) consecutive days, if while Overseas, You test positive for COVID-19, and as a result are unexpectedly placed into mandatory Quarantine outside of the Territory.

We will pay the amount specified above to cover reasonable and necessary accommodation costs, meals or other expenses directly related to Quarantine.

Any claim for Overseas COVID-19 Diagnosis Quarantine Allowance shall be offset against any amount We have paid or are liable to pay under Travel Cancellation or Travel Curtailment in respect of the same event.

2. What is NOT Covered by "Overseas Covid-19 Diagnosis Quarantine Allowance" (In addition to General Exclusions):

- a. This benefit will not apply where Quarantine measures are mandatory for all arriving passengers or Quarantine mandates exist for all passengers from a particular country/region of origin;
- b. We will not cover any loss if You are travelling against a medical practitioner's or doctor's advice, or any claim arising from You acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms).

COVID 19 COVERED CONDITIONS AND EXCLUSIONS

Benefit Covered Conditions And Exclusions Medical Expenses If You are diagnosed with COVID-19 whilst Overseas, We will pay up to the limit stated in the Summary of Cover for the necessary and reasonable medical costs incurred during your Covered Trip, as a result of You contracting COVID-19 during Your Trip. **Emergency Medical Evacuation** Included within the Medical Expenses benefit limit stated in the Summary of Cover, if You contract COVID-19 during Your Trip, We will cover the cost of emergency evacuation if deemed medically **Return of Mortal** necessary. Remains This benefit includes the cost of returning Your body or Your ashes to the Territory up to the limit stated in the Summary of Cover. We will not cover any loss if You are travelling against a medical practitioner's or doctor's advice, or any claim arising from You acting in a way that goes against the advice of a medical practitioner or doctor (including, but not limited to, travelling with COVID-19 symptoms). In all cases, You or someone on Your behalf must contact Our assistance Department immediately. **Daily In-Hospital Cash** The Policy will only pay for a claim in respect of either Daily In-Hospital Cash Benefit or Overseas **Benefit** Covid-19 Diagnosis Quarantine Allowance for the same event, but not both. **Overseas COVID-19** Please note: This benefit is only payable for the time that You are placed into an unexpected **Diagnosis Quarantine** mandatory Quarantine Overseas and ceases if You are required to Quarantine upon Your return **Allowance** to Your Country of residence. This amount is meant to help You pay reasonable and necessary accommodation costs directly related to Your Quarantine. What you are covered for: We will pay up to the amount shown in the Summary of Cover if while on an Overseas Trip, You are unexpectedly placed into a mandatory Quarantine outside Your Country of Residence by a written order of a governmental body for one of the following two reasons: You test positive for COVID-19; or Such governmental body identifies You or any Travelling Companion, specifically, as having been exposed to the coronavirus that causes COVID-19. We will pay to cover reasonable and necessary accommodation costs directly related to such

Quarantine up to the amount specified in the Summary of Cover for up to fourteen (14)

consecutive days.

What you are not covered for under this section:

In addition to the exclusions set out in the General Exclusions section, the Policy does not cover any loss or expenses arising out of, based upon, or attributable to any Quarantine mandate that generally or broadly applies to:

- all arriving/transiting passengers, or all arriving/transiting passengers from a particular geographic area of origin;
- all individuals currently located in a particular geographic area;
- all passengers, or a sub-group of passengers that is broader than just You and Your Travelling Companion(s), in any Common Carrier.

Please note that the conditions set out in the General Conditions section apply to all benefit sections.

Claims evidence required for this section may include:

- Proof of a positive COVID-19 test, if applicable
- Proof of a Quarantine mandate issued by a governmental body
- Proof of Your Hospital admission and discharge dates and times, if hospitalized
- Proof of travel (confirmation invoice, travel tickets)

Please note: We may require other evidence to support Your Claim depending on the circumstances, in which case We will request this from You.

GENERAL PLAN EXCLUSIONS

The Policy does not provide coverage for any of the following:

- 1. Intentional self-inflicted injury, suicide or any attempted suicide; nor
- 2. War, civil war, invasion, insurrection, revolution, use of military power or usurpation government o or military power; nor
- 3. Any period an Insured Person is serving in the Armed Forces of any country or international authority, whether in peace or war; nor
- 4. Loss sustained or contracted in consequence of an Insured Person being intoxicated or under the influence of any narcotic or drug unless administered on the advice of a physician; nor
- 5. Any loss of which a contributing cause was the Insured Person's attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or resistance to arrest by the Insured Person; nor
- 6. Any loss sustained while flying in any aircraft or device for aerial navigation except as specifically provided herein; nor
- 7. Congenital anomalies and conditions arising out of or resulting therefrom, hernia or dental treatment except to sound natural teeth as occasioned by Injury; nor
- 8. Flying in any aircraft owned, leased or operated by or on behalf of an Insured Person or any member of an Insured Person's household; nor
- 9. Driving or riding as a passenger in or on (a) any vehicle engaged in any race, speed test or endurance test or (b) any vehicle being used for acrobatic or stunt driving; nor
- 10. Any claim caused by opportunistic infection or malignant neoplasm, or any other sickness condition, if, at the time of the claim, the Insured Person had been diagnosed as having AIDS (Acquired Immune Deficiency Syndrome), ARC (AIDS Related Complex) or having an antibody positive blood test to HIV (Human Immune Virus); nor
- 11. The use, release or escape of nuclear materials that directly or indirectly results in nuclear reaction or radiation or radioactive contamination; nor
- 12. The dispersal or application of pathogenic or poisonous biological or chemical materials; nor
- 13. Any loss sustained while the Insured person is participating in any professional sports, winter sports, or in sky diving, parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing, potholing; nor
- 14. Any Pre-existing Medical Condition or congenital anomalies or any complication arising there from; nor
- 15. Any sickness, disease, illness and any complications arising there from, unless specifically covered in the Policy; nor
- 16. Traveling against the advise of a physician; nor
- 17. Any terrorist or member of a terrorist organization, illegal drug traffickers, or purveyor of nuclear, chemical or biological weapons, nor
- 18. Planned or actual travel in, to, or through Cuba, Iran, Syria, Sudan, North Korea, or the Crimea region or actual travel in, to, or through Afghanistan.

ASSISTANCE DEPARTMENT

For Customer Service in case of a medical emergency call our 24 hours Assistance Departments:

When travelling inside the US (N-America): 866 273 9079 toll free number For Travel outside the US (N-America): 001 817-826-7014 call collect

Please keep in mind that the Assistance Department is not insurance coverage and that You will be responsible for the fees incurred for professional or emergency services requested of the Assistance Department (for example, legal bills). This benefit may reimburse You for medical related expenses (Please refer to the Travel Medical section for additional information).

1. Where the service is available:

In general, coverage applies worldwide, but there are exceptions.

Restrictions may apply to regions that may be involved in an international or internal conflict, or in those countries and territories where the existing infrastructure is deemed inadequate to guarantee service. You may contact the Assistance Department prior to embarking on a Covered Trip to confirm whether or not services are available at Your destination(s).

2. Assistance Department:

- During Your trip, in the event of an emergency, the Assistance Department provides information on travel requirements, including documentation (visas, passports), immunizations, or currency exchange rates. The exchange rate provided may differ from the exact rate that issuers use for transactions on Your card. Information on exchange rates for items billed on Your statement should be obtained from the financial institution that issued Your card.
- In case of loss or theft Your travel tickets, passport, visa or other identity papers necessary to return home, the Assistance Department will provide assistance in replacing them by contacting local police, consulates, airline company or other appropriate entities.
- In the event of loss or theft of the transportation ticket to return home, a replacement transportation ticket can be arranged.
- Please note that this service does not provide maps or information regarding road conditions.

3. Medical Assistance Departments:

- Provides a global referral network of general physicians, dentists, hospitals, and pharmacies.
- Provide help with prescription refills with local pharmacists (subject to local laws).
- In the event of an emergency, the Assistance Department will make arrangements for a consultation with a general physician. Additionally, the Assistance Department medical team will maintain contact with the local medical staff and monitor Your condition.
- If You are hospitalized, We can arrange to relay your messages to your home, transfer You to another facility if medically necessary, or facilitate the travel of a family member or close friend to be with you in Your hospital stay, if you are travelling alone. This shall be at cardholder's expense).
- If the medical team determines that adequate medical facilities are not locally available in the event of an Accident or Illness, We will arrange for an emergency evacuation to a hospital or to the nearest facility capable of providing adequate care required.
- If a tragedy occurs, We will assist in securing travel arrangements for You.

4. Legal Referral Services:

If You are arrested or are in danger of being arrested as the result of any non-criminal action resulting from responsibilities attributed to You, We will assist, if required, to provide You with the name of an attorney who can represent You in any necessary legal matters.

GENERAL PROCEDURE - HOW TO FILE A CLAIM

Notice of Service Request / Claim (Non-Medical Emergency Claims on Re-Imbursement Basis)

Written notice of service request / claim must be given no later than thirty (30) days from the date of the incident. Failure to give notice to the claims department listed below, within thirty (30) days from the date of the incident may result in a denial of the claim.

To file a claim, log on to https://ph.mycardbenefits.com or send a claim notification to:

AIG Philippines Insurance, Inc.

Claims Department 30th Floor Philam Life Tower 8767 Paseo de Roxas Avenue 1226 Makati City, Philippines

Mastercard Hotline #: +632 878 5501

Contact Center Hours: 8:30am to 5:30pm, Monday to Friday Except Public Holidays

Email: <u>APAC.Mastercard@aig.com</u>
Languages supported: Tagalog, English

The following procedures should be followed:

- 1. You (cardholder) or the beneficiary or someone legally acting on behalf of either, must notify Us as required in the Claim Notification Period, or Your claim may be denied Upon receipt of a notice of claim, the Insurance Company, will take necessary details from the claimant and provide instructions;
- 2. Submit all Required Information (certificate of registration, proof of loss etc.), as outlined in this section no later than the Submission Period.

Please note, there may be additional information or document that may be required to process Your claim. Failure to submit the required additional information or document may result to the denial of the claim.

For assistance with filing a claim, please contact the numbers listed above.

TRAVEL MEDICAL BENEFIT CLAIMS

Medical Expenses (Injury or Sickness) / Emergency Medical Evacuation & Return of Mortal Remains / Daily In-Hospital Cash Benefit/ Overseas Quarantine Allowance

Claim Notification Period: Within ninety (90) days from the date of loss.

Submission Period: No later than ninety (90) days from the date of Claim Notification.

Required Information (proof of loss):

- 1. Medical report detailing history and nature of injury or sickness together with original medical receipts;
- 2. Transaction verification confirming the full passenger fare for the Covered Trip had been charged to the Eligible Card, including copies of Common Carrier ticket(s) and receipts;
- 3. Hospital Admission/Discharge Card, if hospitalized;
- 4. Copy of the passport including Entry and Exit Stamps;
- 5. Proof of a positive COVID-19 test, if applicable; and
- 6. Proof of a Quarantine mandate issued by a governmental body, if applicable.

Please note: We may require other evidence to support Your Claim depending on the circumstances, in which case We will request this from You.