



First Class Passport

Insurance for Travelers Abroad

December 2024 Version

This Appendix has been translated into English for the convenience of the insured only. It is clarified that in the event of a contradiction and/or lack of clarity between what is stated in this translated policy and the terms of the policy in the Hebrew language - the terms of the policy as they appear in the Hebrew language will prevail.

December 2024 Edition

Dear Insured,

You have just procured overseas travel insurance with **Harel Insurance Company Ltd.**, the leading company which has specialized in overseas travel insurance for dozens of years. "First Class Passport" insurance plan, including all its sections which are included in this booklet, coupled with the Insurance Details Sheet, including all the details, exclusions and comments included therein, constitutes your insurance policy.

The policy extensions that may be purchased for extra premium:

- Deterioration of a Pre-existing Medical Condition - for coverage of Medical Expenses deriving from Pre-existing Medical Condition
- Luggage (accompanied personal baggage) - loss or theft (an extension to the extension of a special coverage for a valuable item can be purchased)
- Trip Cancellation and Shortening (basic or extended coverage can be purchased as well as there is the option to extend coverage in case of an epidemic in exchange for additional insurance premiums)
- Pregnancy up to week 32 to an insured under 42 years of age
- Amateur extreme sport
- Winter sport
- Professional sport (main occupation and/or for a salary)
- Loss or theft of a laptop/tablet
- Loss or theft of a cellular phone
- 2 wheel bicycle (up to 90 days) - total loss or theft or damage exceeding 50%
- Cancellation of deductible in case of accidental damage to a hired car/ caravan abroad (to a driver between 24 to 75 years of age)
- Personal accidents insurance for an accident abroad (up to the age of 70) you may purchase an extension to cancel the amateur extreme sports exception for an accident abroad

Harel Insurance Company Ltd. and its entire staff and assistance services will accompany you in your journey abroad for your safe stay and complete enjoyment.

Have a good trip

Harel Insurance Company Ltd.

Table of Contents

Limits of Liability Table for Part A - Basic Policy.....	5
Part A - Terms of Policy for Overseas Travel Insurance - Basic Policy.....	7
Chapter 1: Definitions.....	7
Chapter 2: Hospitalization Abroad Expenses.....	11
Chapter 3: Non-hospitalization Medical Expenses Abroad.....	13
Chapter 4: Special expenses.....	15
Chapter 5: Search, location and rescue expenses through Harel 669.....	17
Chapter 6: Liability to third parties.....	20
Chapter 7: General exclusions for all Policy chapters including Part B - Extensions.....	22
General Conditions.....	24
Chapter 8: Non-disclosure under the Insurance Contracts Law.....	24
Chapter 9: Claim.....	25
Chapter 10: Policy cancellation.....	28
Chapter 11: Policy extension.....	29
Chapter 12: General.....	31
Chapter 13: Law and jurisdiction.....	33
Limits of Liability Table for Part B - extensions for overseas travel insurance policy for extra premium.....	34
Chapter B - Extensions to the Basic Policy.....	39
Chapter 14: Extension for luggage (personal accompanied baggage) - loss or theft.....	39
Chapter 15: Extension for Trip cancellation and shortening - Basic or Extended.....	43
Chapter 16: Extension for Deterioration of Pre-existing Medical Condition.....	51
Chapter 17: Extension for pregnancy up to week 32 to an Insured under 42 years of age.....	53
Chapter 18: Extension for Amateur Extreme Sports.....	54
Chapter 19: Extension for winter sport.....	55
Chapter 20: Extension for professional sport.....	58
Chapter 21: Extension for loss or theft of a laptop/tablet.....	59
Chapter 22: Extension for loss or theft of a cellular phone.....	61

Chapter 23: Extension for 2 wheel bicycle (up to 90 days) - total loss or theft or damage exceeding 50%.....	61
Chapter 24: Extension for cancellation of Deductible in case of accidental damage to a hired car/caravan Abroad.....	64
Chapter 25: Extension for coverage of personal Accidents.....	67
Call centers in case of need.....	75

Limits of Liability Table for Part A - Basic Policy

Section in Policy	Coverage	Limit of liability	Deductible
Chapter 2 & Chapter 3	Insurer's limit of liability for Medical Expenses	\$5,000,000	
2.1	Medical Expenses Abroad during hospitalization	Included in Medical Expenses Liability Limit	Without Deductible
2.2.1	Land evacuation from place of Event to nearest Hospital	Included in Medical Expenses Liability Limit	Without Deductible
2.2.2	Air and/or water evacuation from place of Event to nearest Hospital	Included in Medical Expenses Liability Limit	Without Deductible
2.3	Medical Flight to Israel	Included in Medical Expenses Liability Limit	Without Deductible
3.1	Non-hospitalization Medical Expenses Abroad such as Physician, diagnostic tests	Included in Medical Expenses Liability Limit	Without Deductible
3.2	Medications	\$1,500	Without Deductible
3.3	Emergency dental treatment	\$400	Without Deductible
3.4	Physiotherapy Abroad	\$500 per treatment and up to 6 treatments	\$50
3.5	Continued treatment in Israel as a result of an Accident that occurred Abroad	\$10,000 and up to 120 days	Without Deductible
3.5.1	Cast removal, nail removal and physiotherapy in Israel	\$6000 included in limit of liability of continued treatment in Israel	20% per treatment
Chapter 4	Special expenses		
4.1	Reimbursement as a result of staying Abroad beyond the Period of Insurance	As specified below	Without Deductible
4.1.1	Accommodation expenses Abroad beyond the Period of Insurance for an Insured and/or an Escort	\$150 per day	\$50
4.1.2	Plane ticket to Israel for the Insured and/or an Escort	\$1,000	\$50
4.2	Flight and stay of an Escort at the Insured's place of hospitalization Abroad	\$2,500	\$50
4.3	Pregnancy first diagnosed Abroad	Included in Medical Expenses Liability Limit	

Section in Policy	Coverage	Limit of liability	Deductible
4.3.1	Non-hospitalization Medical Expenses Abroad	Included in limit Medical Expenses Liability Limit	\$50
4.3.2	Hospitalization Medical Expenses	Included in Medical Expenses Liability Limit	\$50
4.4	Transportation of deceased expenses	Included in Medical Expenses Liability Limit	Without Deductible
Chapter 5	Search, location and rescue expenses through Harel 669	\$250,000	Without Deductible
Chapter 6	Liability to third parties	\$150,000	Without Deductible

Part A - Terms of Policy for Overseas Travel Insurance - Basic Policy

Chapter 1: The definitions apply to all the policy chapters and parts unless otherwise explicitly indicated:

1. Definitions:

1.1. The Insurer:

Harel Insurance Company Ltd.

1.2. The Insured:

Anyone whose name is listed on the Schedule as insured.

1.3. Insured's Age:

The age of the Insured is determined according to the Insured's date of birth, as determined on the Insurance Details Sheet.

1.4. The Policy:

This insurance contract between the Insured and the Insurer, including the Proposal, the Schedule, medical condition statements, and the extensions attached thereto, if any.

1.5. The Basic Policy:

The insurance cover set forth in Part A in Chapters 1–13 including the general terms.

1.6. Proposal:

The Proposal form constituting an application to join the insurance under this Policy when it is complete, including all the details thereof, including the medical statement completed by the Insured and the payment method details.

1.7. The Schedule / Insurance Details Sheet:

A document attached to this Policy constituting an integral part thereof that includes the details, statements and terms required for adjusting the insurance Policy to the terms of the Insured's insurance contract. In any event of contradiction between the terms of the Policy and the terms set forth in the Insurance Details Sheet, the terms set forth in the Insurance Details Sheet shall govern.

1.8. Abroad:

Any place or country outside the State of Israel, including a watercraft or aircraft on their way from or to Israel, excluding the territories of the Palestinian Authority and enemy states.

1.9. Trip:

One exit of Israel Abroad and back to Israel during the Period of Insurance as indicated on the Schedule.

1.10. Trip Destination:

A country Abroad where the Insured stays continuously more than 24 hours during the Period of Insurance.

1.11. The Period or Period of Insurance:

The period of travel insurance as indicated on the Schedule provided that it does not exceed the Maximal Period, plus 48 hours at the most, unless a delay has been caused by the means of transportation the Insured was about to return to Israel.

1.12. The Maximal Period:

The maximum period for the Basic Policy:

Age	Maximal period (in days)
0 - 40 (including)	365
41 - until the age of 60 (including)	180
61 - 75 (including)	120
76 - 80 (including)	60
81 - 85 (including)	30
86 - 95 (including)	30

All the periods above are with an addition of 48 hours at most, if a delay was caused by the transport method with which the insured was planning to return to Israel. The extension of the insurance period is according to the terms detailed in Chapter 11.

1.13. Event/Insured Event:

An Accident and/or Disease and/or medical condition, as detailed in the following Policy chapters, that occurred to the Insured Abroad during the Period of Insurance **which are not the result of a Pre-existing Medical Condition.**

1.14. Pre-existing Medical Condition:

A Disease and/or medical condition due to which the Insured was under treatment, including drug therapy and/or under care when leaving Abroad or during the 6 months preceding his leave and excluding when receiving the treatment was the purpose of the Trip.

1.15. Deterioration of Pre-existing Medical Condition:

An adverse change of a Pre-existing Medical Condition the treatment of which was vital as an emergency treatment Abroad and the Insured could not medically postpone the treatment until returning to Israel.

1.16. Disease:

A medical disorder or problem or disruption in the medical condition of body organs or physical disorder with identifiable signs and symptoms or any inappropriate condition or dysfunction of the body.

1.17. Accident:

A physical injury sustained as a result of applying physical power only, as a result of an abrupt one-time unforeseeable Event, directly caused by an external, visible force, which consists, regardless of any other cause, the only, direct and immediate reason for the occurrence of the Insured Event. **For the avoidance of doubt, physical violence and/or mental stress and/or the accumulation of small repetitive injuries throughout a period that result in incapacity will not be deemed an "Accident".**

1.18. Hospital:

A medical institute acknowledged by the competent authorities Abroad as a general hospital only, **excluding an institute which is sanatorium, convalescent home, nursing home, rehabilitation institute.**

1.19. Hospitalization Expenses:

Payment for hospitalization and medical services given in a Hospital during hospitalization.

1.20. Hospitalization Day:

A continuous stay at a Hospital for 24 hours.

1.21. Medical Expenses:

Expenses for a Physician care and/or diagnostic tests and/or Medication and/or accessory on loan in connection with an Accident (such as crutches, walking frame) given to the Insured during the Period of Insurance, not during Hospitalization and not in any of the following - **sanatorium, convalescent home, nursing home, rehabilitation institute.**

1.22. Medical Flight:

A flight with a regular aircraft service with or without the accompaniment of a medical staff and/or in a special aircraft with the accompaniment of a medical staff which is medically adapted to the condition of the Insured who is transported from Aboard to Israel under the conditions set forth in Section 2.3 hereunder.

1.23. Physician:

A person qualified by the competent authorities to practice medicine in the country where he practices.

1.24. Specialist:

A Physician who was granted a specialist degree in a certain medical area by the competent authorities in Israel under Article 2 of the Physicians' Regulations (Approval of the Title of Specialist and Examinations), 5733-1973, and whose name is included in the list of specialists published under Article 34 of said regulations or a Physician who has a specialist license in a certain medical area by the legally competent authorities in the relevant country Abroad where the service is given.

1.25. Medication:

A chemical or biological substance designed to treat a medical condition Abroad for the purpose of stabilizing the medical condition, preventing its deterioration (including preventing the development of additional medical conditions) or preventing the reoccurrence thereof as a result of a Disease or an Accident, until the Insured's return to Israel.

1.26. Prescription:

A medical document signed by a Physician who confirmed the need for treatment/ Medication, determined the method of treatment, the required dose and the length of required treatment.

1.27. Immediate Relative:

The Insured's spouse, parents, in laws, children, siblings, grandfather, grandmother, grandchildren.

1.28. Escort:

A person accompanying the Insured according to the instructions of a Physician Abroad or accompanies the Insured as a result of an Event during his stay Abroad or return to Israel.

1.29. Limits of Liability Table:

A table under which the maximal coverage amounts are defined which the Insurer undertakes to pay the Insured upon the occurrence of the Insured Events according to the terms of insurance.

1.30. Deductible:

The Insured's share in the expenses due to an Insured Event as set forth in the Limits of Liability Table in the Policy. It is hereby clarified that the Insurer's liability to pay insurance benefits in case the Insured is required to pay deductible shall be according to the Insured's actual expenses up to the maximum amount under the Limits of Liability Table, less deductible, and only with respect of the Insured's expenses beyond that deductible.

1.31. Israel:

The territory of the State of Israel including the territories held by the State of Israel, excluding the territories of the Palestinian Authority.

1.32. Dollar:

US Dollar.

Chapter 2: Hospitalization Expenses Abroad

2. The Insurer will pay the Insured expenses for the occurrence of an Event, will provide the Insured with a letter of financial undertaking or provide him with a service as follows:
 - 2.1. Expenses of Hospitalization, examinations, X-rays, Medications, surgeon, intensive care, provided that these have been made during Hospitalization at a Hospital, **in a 2 bed semi-private ward**. The coverage under this section is up to Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy.
 - 2.2. **In case of evacuating the Insured to Hospital:** insomuch that the Insured's medical condition requires to transport him to the nearest Hospital to his whereabouts or to another Hospital which is suitable to his medical condition, the Insured will be entitled to indemnification from the Insurer for such expenses of evacuation and/or transport, up to the amount stated in the Limits of Liability Table in the Policy and subject to the provisions of Sections 2.2.1 and 2.2.2 hereunder.
 - 2.2.1. **Land evacuation and/or transport:** if the Insured's medical condition enables evacuation and/or transport by any land means of transportation which is suitable to the Insured's medical condition, according to a Specialist's medical evaluation, the Insured will be entitled to reimbursement of such expenses of evacuation and/or transport, up to the Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy.
 - 2.2.2. **Water or air evacuation and/or transport:** if the Insured's medical condition does not enable, according to a Specialist's medical evaluation, evacuation and/or transport by land means of transportation as stated above, the Insured will be entitled to reimbursement of the expenses of evacuation and/or transport by a water and/or air means of transportation (including air ambulance), provided that the Insured filed an application with the Insurer for receiving the Insurer's prior approval for such evacuation/transport prior to the actual evacuation. The Insurer may request the Insured to provide it with such medical evaluation by a Physician on its behalf. In the event that the Insured fails to approach the Insurer for receiving its approval, prior to such evacuation or transport, the Insurer may decrease the amount of insurance benefits to which the Insured will be entitled to the rate the Insurer would have paid had the Insured approach the Insurer applying for receiving such approval prior to the evacuation or transport.

It is clarified and emphasized that the Insurer's undertaking under this section and its sub-sections is for financial indemnification of the Insured only for the Insured's expenses for the evacuation/transport, and the Insurer is not and will not be liable to arranging such evacuation/transport which have not been made on its behalf, in any way of form.

2.3. Medical Flight – upon the occurrence of an Insured Event, the Insurer will enable and arrange a Medical Flight as defined in Section 1.21 of the Definitions, and will transport the Insured to Israel for further treatment, subject to meeting the following **accumulative** conditions:

- (a) A need may arise for medical interference during the flight;
- (b) The Medical Flight is medically possible and necessary;
- (c) The flight is possible in terms of the time and place where the Insured stays.

The way of transport will be determined by a Physician on behalf of the Insurer under coordination with the caring Physician Abroad following receipt of accurate information as to the Insured's medical condition and the option of treating the Insured in the place where he became ill or was injured.

The Insurer's undertaking under this section is conditioned with the above flight being made by the Insurer and/or anyone on its behalf only up to the Medical Expenses Liability Limit of \$ 5,000,000 and subject to the Limits of Liability Table in the Policy. If the flight is not performed by the Insurer and/or anyone on its behalf, the Insurer may decrease the amount of insurance benefits to which the Insured will be entitled to the rate the Insurer would have paid had the flight was performed on its behalf.

For the avoidance of doubt, in the event of a Medical Flight, the plane tickets in possession of the Insured will be assigned in favor of the Insurer, at the Insurer's request.

Chapter 3: Non-hospitalization Medical Expenses Abroad

3. The Insurer will pay the Insured for Medical Expenses incurred Abroad for the occurrence of an Event, for expenses, or provide the Insured with a letter of financial undertaking as follows:
 - 3.1. Physician care, diagnostic tests, imaging tests or medical fittings installed as a result of an Accident up to the Medical Expenses Liability Limit of \$5,000,000 and subject to the Limits of Liability Table in the Policy.
 - 3.2. Prescription drugs - which were purchased Abroad under a treating Physician's instruction who determined that they are vital to stabilize the Insured's condition Abroad (**Medication which are regularly and continuously consumed by the Insured will not be covered**) up to \$1,500 as stated in the Limits of Liability Table in the Policy.
 - 3.3. Emergency dental care - emergency and dental first aid services only which are required immediately for pain relief, including as a result of an Accident up to an amount of \$400 as stated in the Limits of Liability Table in the Policy. (**Regular dental care or treatment that may be postponed until the Insured returns to Israel will not be covered**).
 - 3.4. Physiotherapy following an Accident - 6 physiotherapy sessions following an Accident, given by a qualified physiotherapist directly following and as a result of the Accident, up to an amount of \$500 for session and subject to the amount stated in the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
 - 3.5. Continued treatment in a medical institute as a result of an Accident that occurred Abroad - the Insurer will pay the Insured or provide him with a financial undertaking for Medical Expenses for medical care in Israel during **hospitalization and not during hospitalization**, in a medical institute authorized by the Ministry of Health in Israel to perform medical treatments, continuously to an Accident that occurred Abroad which is covered under this Policy, expensed in a period of up to 120 days from the day of his arrival in Israel or the ending date of the Period of Insurance, whichever comes first, and in any event not more than \$10,000 as stated in the Limits of Liability Table in the Policy.
 - 3.5.1. If the continued care in Israel as a result of an Accident that occurred Abroad as stated above is physiotherapy or removal of cast or nails in Israel, the Insurer's undertaking is up to 80% of the Insured's actual expenses for treatment and up to \$6,000 as stated in the Limits of Liability Table in the Policy. It is clarified that this amount will be included in the coverage overhead for this section at an amount of \$10,000 and will not be in addition thereto.

It is emphasized that the Insurer's liability under Chapter 3, for payment for medical care directly to a service provider Abroad (except in an event of indemnification for expenses which is paid directly to the Insured or in an event where the Insured paid a debt to a service provider due to his entitlement to insurance cover), will be in accordance with the acceptable rates in Israel for receiving treatment, and up to an amount of \$5,000,000 and subject to the Limits of Liability Table in the Policy.

The Insurer's total maximal undertaking for all the Medical Expenses under Chapters 2, 3 (subject to coverage ceiling in subsections 3.2-3.5) and Sections 4.3 and 4.4 hereunder expensed during the Period of Insurance (hereinabove and hereinafter: "Medical Expenses Liability Limit") will not exceed \$5,000,000 and subject to the Limits of Liability Table in the Policy.

Chapter 4: Special expenses

- 4. The Insurer will pay special expenses for an Event as follows:**
 - 4.1. Reimbursement for staying Abroad beyond the Period of Insurance -** In case an Insured Event occurs to the Insured which is covered under this Policy when he is Abroad during the Period of Insurance and the Period of Insurance ended under the terms of the Policy, and the Insurer received a Specialist opinion that there is a risk to the Insured's health and life and therefore he cannot yet fly to Israel and this finding has been confirmed and is acceptable by a Physician on behalf of the Insurer:
 - 4.1.1.** The Insurer will indemnify the Insured for the cost of accommodation expenses of the Insured and/or escort for the period following the Period of Insurance in a hotel in the country of the Insured's whereabouts until the receipt of a medical confirmation under which the Insured is fit to return to Israel and up to an amount of \$150 per day and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
 - 4.1.2.** The Insurer will indemnify the Insured and/or escort for a plane ticket to Israel purchased in advanced and up to an amount of \$ 1,000 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
 - For the avoidance of doubt,** plane tickets to Israel in possession of the Insured will be assigned in favor of the Insurer, at the Insurer's request.
 - 4.2. Flight and stay of an Escort in the Insured's place of hospitalization Abroad -** if the Insured is hospitalized Abroad and his hospitalization exceeds 3 days or the Physician Abroad determines that his life is in danger, the Insurer will pay one Escort the cost of a plane ticket in economy class (as set forth in Chapter 11.2 hereunder) and travel expenses to the Insured's place of hospitalization as well as cost of hotel accommodation, everything up to an amount of \$ 2,500 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.
 - 4.3. Pregnancy up to week 12 first diagnosed Abroad:**

The Insurer will bear Medical Expenses as detailed below for pregnancy up to week 12 first diagnosed Abroad up to a liability limit for medical expenses in the amount of \$ 5,000,000 and subject to the Limits of Liability Table in the Policy.

 - 4.3.1.** The Insurer will bear Non-hospitalization Medical Expenses Abroad as a result of pregnancy **first diagnosed Abroad** by way of a documented medical diagnosis during the Insured's stay Abroad. **Such expenses will be covered provided that they were expensed up to week 12 inclusive.** Deductible of \$50 will apply to this section.
 - 4.3.2.** The Insurer will bear Hospitalization Medical Expenses Abroad as a result of pregnancy **first diagnosed Abroad** by way of a documented medical diagnosis. **Such expenses will be covered provided that they were expensed up to week 12 inclusive.** Deductible of \$50 will apply to this section.

- 4.3.3.** The Insurer will not pay expenses or claims relating to or deriving from one or more of the following cases pursuant to Sections 4.3.1 and 4.3.2:
 - 4.3.3.1.** Induced abortion not following a medical need.
 - 4.3.3.2.** Expenses of pregnancy follow-up, routine tests and genetic tests excluding tests for pregnancy initial diagnosis only.
 - 4.3.3.3.** Expenses incurred after the end of week 12 of the pregnancy unless a Specialist opinion states that there is a danger to the health and/or life of the Insured and/or fetus.

4.4. Transportation of deceased expenses:

In case the Insured passes away during the Period of Insurance following an Insured Event covered under this Policy, the Insurer will bear the deceased transportation expenses to Israel, under the explicit condition that this transportation will be performed by the Insurer and/or anyone on its behalf and under coordination with the Insurer and up to the Medical Expenses Liability Limit at an amount of \$5,000,000 and subject to the Limits of Liability Table in the Policy.

The Insurer's total maximal undertaking under this chapter will not exceed the maximum amount stated in the Limits of Liability Table in the Policy.

Chapter 5: Search, location and rescue expenses through Harel 669

5. Coverage for search, location and rescue will apply to countries where such coverage may be activated and is included in the premium unless the Insured requested not to purchase this coverage -

5.1. Additional definitions for this chapter:

5.1.1. Harel 669:

A group of people selected by the Insurer for its unique qualifications and skills to perform location and rescue actions, as stated in Chapter 5 of the Policy. This team may include a psychologist recognized as such by the competent authorities in Israel.

5.1.2. Call Center:

The Insurer's call center for contact by the telephone number and/or Internet website indicated in the Policy and/or by the following e-mail address: 669@harel-ins.co.il

5.1.3. Loss of Contact:

Discontinuation, for unclear and unknown reasons, for a period exceeding 14 days or less or at the Insurer's discretion, according to the circumstances of the case, of the usual contact between the Insured and any of his Immediate Relatives and/or Escort for the trip and/or the Call Center, and as a result of this discontinuation, none of his Immediate Relatives, the Escort for the trip and/or the Insurer has any information as to the whereabouts of the Insured, and under the explicit condition that such discontinuation occurred during the Period of Insurance.

5.1.4. Location:

Locating the Insured's whereabouts.

5.1.5. Rescue:

The removal of an Insured who is unable to arrive on his own from his whereabouts to a safe place (for this purpose, a safe place - a populated place near his whereabouts with a police station or a Hospital) following an emergency endangering the Insured's life or a condition the deterioration of which might result in a life-threatening situation.

5.1.6. Active Period:

A maximal 30-day period during which a continuous effort is made to search, locate and rescue the Insured in a case of Loss of Contact.

5.1.7. Passive Period:

A maximum 180-day period starting after the end of the Active Period in which the search, Location and Rescue actions are renewed as required in a case of Loss of Contact, according to information and/or other substantial and unequivocal evidence that justify, at the Insurer's discretion, the renewal of said actions and the activity involved therewith.

5.2. Insurer's undertaking - the Insurer will act on its own and/or through anyone on its behalf to search, Locate and Rescue the Insured (hereinafter: "the Search Operation"), in a case of Loss of Contact or if there is a need for Rescue as defined above, during the Active Period or Passive Period and up to such date

when the costs of actions reach a maximal cost of \$250,000 and subject to the Limits of Liability Table in the Policy - the earliest of them, everything as set forth hereunder.

- 5.2.1. In the event that the Call Center is informed of a No-Contact event, the Insurer will activate the Search Operation as follows:
 - 5.2.1.1. The Insurer will, through 669 Team in Israel, investigate the circumstances of the Loss of Contact with the Insured.
 - 5.2.1.2. If the Insured is not located during the investigation process as stated in Section 5.2.1.1 above, within 14 business days as of the Loss of Contact date, the Insurer will activate the Search Operation, in accordance with the details received in the investigation conducted under Section 5.2.1.1 above, whether through Harel 669 team sent by it from Israel or by an international and/or local team activated by the Insurer's Harel 669 team and/or in combination of these teams or part thereof.
 - 5.2.1.3. Notwithstanding the provision of Section 5.2.1.2 above, the Insurer has the right to activate the Search Operation also if the above 14 days have not elapsed at its sole discretion and under such circumstances as it finds fit to do so.
- 5.2.2. Under the Search Operation, the Insurer will bear the flight expenses of one Immediate Relative (as defined in Section 1.27) in a regular aircraft service, if it is requested to do so, so that the foregoing would join the Operation team, provided that the Insured has not been located yet. The Immediate Relative who joins the Operation will not be entitled to interfere with the discretion of the Operation staff members.
- 5.2.3. The Insurer will bear all the expenses related to the Operation and will to that end activate means of transportation of any kind, in accordance with the circumstances.
- 5.2.4. The Insurer undertakes to activate all the provisions of Section 5.2 above throughout the Active Period or until the costs of actions and expenses reach a maximal amount of \$250,000 (as specified in the Limits of Liability Table in the Policy), the earlier of them.
- 5.2.5. The Insurer will continue with the Operation also following the end of the Active Period above for the duration of the Passive Period if the conditions set in the definition of the Passive Period have been met and under the explicit condition that the maximal amount for the Insurer's undertaking has not been exhausted under this chapter (as specified in the Limits of Liability Table in the Policy).
- 5.2.6. After the end of the Passive Period and/or when the costs of actions and expenses reach the maximal amount for the Insurer's undertaking under this chapter, whichever comes first, the Insurer will terminate the Search Operation and its undertaking and liability will end under this chapter. The Insurer will report an Immediate Relative specifying all the actions it has performed within 30 days of the end of the Active or Passive Period, as applicable.

- 5.2.7. In the event that the Insurer finds out, during or prior to the Operation, that the Insured has died, it will act under this chapter for searching and/or Locating and/or Rescuing the Insured's body. The Insurer's undertaking to transport the body to Israel will be in accordance with Section 4.4 above.
- 5.2.8. The cooperation of the Immediate Relatives with the Insurer and/or anyone on its behalf is essential and constitutes a precondition for fulfilling the Insurer's undertakings under this chapter.
- 5.2.9. The Insurer's undertaking under this chapter will not guarantee the success of the Search Operation and the Location and Rescue of the Insured. The Insurer undertakes to reasonably do whatever it can under the existing circumstances for the success of the Search Operation; however, if, despite of the Insurer's efforts, it fails to Locate or Rescue the Insured, this will not be considered a breach of the Insured's undertaking under this chapter and/or any of its conditions.
- 5.2.10. Under no event will the Insured and/or anyone on his behalf be entitled to receive the insurance benefits or part of them due to Location, search and/or Rescue and/or due to expenses they made for these purposes.
- 5.2.11. The Insured undertakes to cooperate with the Insurer regarding anything relating to the actions specified in this chapter.

5.3. The Insurer will not pay for claim/s deriving from or relating to:

- 5.3.1. Loss of Contact as a result from a political and/or security situation Abroad.
- 5.3.2. If the Insurer is unable to activate the Search Operation as a result from a political and/or security situation Abroad.
- 5.3.3. A Search Operation in a country that does not permit and/or allow the actions of a Location and Rescue team including a Search Operation in one of the following countries: Oman, Saudi Arabia, Iraq, Syria, Lebanon, Libya, Kuwait, Qatar, Algeria, Afghanistan, Mauritania, Malaysia, Niger, Iran, Somalia, Sudan, Pakistan, Chad, North Korea, Antarctica, Yemen, territories under control or jurisdiction of the Palestinian Authority or territories held by terrorist factors.
- 5.3.4. A Search Operation in situations where there is an imminent life risk to Harel 660 team.
- 5.3.5. The Insured refuses to cooperate with the Insurer's representatives and/or anyone acting on its behalf and/or refuses to return to Israel.

The Insurer's total undertaking for all the expenses and costs under this chapter will not exceed a maximal amount of \$250,000 and until the end of the Active or Passive Period as defined above, the earlier of them, and as stated in the Limits of Liability Table in the Policy.

Chapter 6: Liability to third parties

- 6.** Coverage for liability to third parties is included in the premium unless the Insured requests not to purchase this coverage.

Insurer's undertaking - the Insurer will indemnify the Insured for damage to a third party that occurred Abroad to body or property for which the Insured owes, up to a total amount of \$150,000 and subject to the Limits of Liability Table in the Policy. A condition to fulfilling the Insurer's liability under this chapter will be adjusting the Insured's liability to a third party to the definition of this liability in Israel under the Torts Ordinance.

It is hereby clarified that immediately when the Insured finds out about an Event that may result in a claim under this chapter and when it finds out about the instigation of proceedings or investigation, he must inform the Insurer accordingly in writing. The Insurer may conduct, on behalf of the Insured, any proceeding or compromise, and the Insured will cooperate with it. The Insured will not conduct any negotiations, make any proposition or admit to any liability, but under coordination with the Insurer. The Insured undertakes to act in cooperation with the Insurer.

6.1. The Insurer will not pay for claims that derive from and/or relate to:

- 6.1.1.** Employers' liability, contractual liability or liability to the Insured's relatives.
- 6.1.2.** Liability following a deliberate act, malicious act or committing a crime or misdemeanor.
- 6.1.3.** Liability to animals that belong to or are under the control of or are held by or are the supervision of the Insured.
- 6.1.4.** Liability to an occupation, business or profession.
- 6.1.5.** Liability to ownership or possession or use of a vehicle, aircraft or watercraft.
- 6.1.6.** Liability as a result of dealing with extreme sport as defined in Chapter 18 and with winter sport as defined in Chapter 19, unless an extension for engagement in extreme amateur sport or winter sport was purchased and indicated in the Insurance Details Sheet.
- 6.1.7.** The Insured' use of a weapon.
- 6.1.8.** Liability due to ownership of or holding real estate or a building (except for when the occupation thereof is for the purpose of temporary residence).
- 6.1.9.** Cash, checks of any kind, stamps, credit cards, photographic films, tickets of all kinds (train, bus, theatre and other shows etc.), computer software, diskettes, compact discs, memory cards, cellular phones.
- 6.1.10.** Business work tools and/or commercial goods including business samples.
- 6.1.11.** Eyeglasses, contact lenses, hearing aids, medical fittings, dentures, Medications (as baggage).
- 6.1.12.** Art objects, all that whether it occurred to the item separately or as part of the entire baggage.

- 6.1.13. Normal wear and tear, erosion, gradual wearing out, any damage to luggage (except in the event of fire of a suitcase or bag), loss resulting from confiscation, expropriation, loss resulting from the Insured's gross negligence which fully contributed to the occurrence of the Insured Event, or failure to take reasonable steps to prevent, mitigate or recover it.
- 6.1.14. Loss caused to valuables held not on the Insured's body (unless unlikely to be worn on the Insured's body all day) or not in his personal bag, unless the valuables have been stored in a safe or another secured place.
- 6.1.15. The Insurer will not be liable to any consequential and/or direct damages.

The Insurer's total maximal undertaking under this chapter will not exceed the maximal stated amount of \$150,000 and subject to the Limits of Liability Table in the Policy.

Chapter 7: General exclusions for all Policy chapters including Part B - Extensions

7. Without prejudice to any exclusions provided for in any chapter and in addition thereto, the Insurer will not pay claim(s) for an Event deriving from or relating to:
- 7.1. Routine tests or screening tests or ongoing medical care including ongoing medication treatment.
 - 7.2. Hospitalization and Medical Expenses for medically unnecessary actions and/or which may medically be postponed until the Insured's return to Israel or that the treatment may be continued in Israel and the return to Israel is medically possible.
 - 7.3. Pregnancy first diagnosed Abroad after week 12.
 - 7.4. Treatment by a chiropractor, naturopath, homeopath, health program, acupuncture, mechanotherapy, hydrotherapy, alternative treatments and complementary medicine, physiotherapy (except as stated in Section 3.4 Chapter 3).
 - 7.5. Periodical inspection or check-up, surgery and/or gum treatments, dental treatments (except for emergency care as stated in Chapter 3 section 3.3 above), cosmetic-aesthetic surgery and/or treatment, plastic surgery, rehabilitation.
 - 7.6. Medical or other devices purchased in Israel and/or Abroad; for damage and/or loss Abroad of eyeglasses, optical glasses, contact lenses, hearing aids and various dentures. This exclusion will not apply to a medical devices installed Abroad as a result of an Accident that occurred Abroad.
 - 7.7. Transplantation of an organ or organs of any kind.
 - 7.8. Medical Flight performed not through the Insurer.
 - 7.9. Volcanic eruption, nuclear fission, nuclear fusion or radioactive pollution.
 - 7.10. Flight not as a passenger with a commercial airline in a regular aircraft service confirmed by the authorities, except for a flight included under the definition amateur "Extreme Sport" if an extension was purchased for extreme sport and was listed on the Insurance Details Sheet.
 - 7.11. The Insured's active participation in an act of war and/or military action.
 - 7.12. The Insured's active participation in a police action, underground action, revolution, rebel, pogroms, riots, sabotage, terror.
 - 7.13. Committing crime, misdemeanor, drug trafficking, activity without a suitable valid license for such activity if required in the country of Event.
 - 7.14. The Insured's use of weapon.
 - 7.15. Insanity, suicide or an attempt thereof, deliberate self-inflicted damage by the Insured.
 - 7.16. The Insured's kidnap except Medical Expenses for it.
 - 7.17. Alcoholism, drug abuse.
 - 7.18. Extreme Sport as defined in Chapter 18 and/or Winter Sport as defined in Chapter 19 under the Policy (except if a coverage was purchased and was listed on the Schedule) and in any event, a Winter Sport not practiced on a resort during the resort's proclaimed activity hours and in the tracks designated to that end will not be covered.

- 7.19. Sport activity in a reward containing competition and/or professional sport, namely sport constituting the Insured's main occupation and/or which entails monetary wage (unless this coverage was purchased and indicated in the Insurance Details Sheet).
- 7.20. The Insured's active participation in car and/or motorcycle race(s) (including snowmobiles) and/or other vehicles including watercraft and/or driving/riding in any vehicle on a racecourse whether or not as part of a race.
- 7.21. Consequential damage, including and without prejudice to the generality of the foregoing, expenses deriving from loss and waste of time for any reason, cancellation of a transaction including postponement, delay, bankruptcy, loss of work days and wage, sick days, loss of benefit, anguish, pain and suffering, nursing assistance etc.
- 7.22. An Accident as a result of using a vehicle (except a motorcycle) as a driver and/or passenger when the Insured or the driver driving the vehicle did not have a valid driver's license for the type of vehicle he drove (a local and/or Israeli and/or international license), even if in the country of Event there is no need for a driver's license in the vehicle.
- 7.23. An Accident as a result of using a motorcycle as a driver and/or passenger when the Insured or the driver did not have a valid driver's license for the type of motorcycle involved in the accidental Event (a local and/or Israeli and/or international license), except for countries where no special license is required for driving the type of motorcycle involved in the Accident.
- 7.24. Expenses for taxi rides, visas, fees, levies, taxes, telephone calls, faxes, legal expenses and attorney's fees, interest, bank expenses, fines etc.
- 7.25. Temporary mental condition.
- 7.26. The Insurer will not be liable for the very availability of medical services, to the provision of services, their quantity, the results of providing them and/or their quality. The Insurer will further not be liable to any case where the Insured refrains from seeking and/or receiving medical assistance.
- 7.27. Any Insured Event that occurs prior to the beginning of the Period of Insurance, between non-consecutive Periods of Insurance (hereinafter - Loss of Contact Situation) within and beyond the Maximal Period.

- General Conditions -

Chapter 8: Non-disclosure under the Insurance Contracts Law

8. Duty of disclosure

- 8.1. If the Insurer presents to the Insured prior to signing the contract, whether by way of an insurance Proposal form or otherwise in writing or in another documented way, a question in a matter which may affect the willingness of a reasonable insurer to sign the contract in general or sign it under the conditions thereof (hereinafter – Material Matter), the Insured must provide a written complete, honest reply.
 - 8.1.1. A comprehensive question that involves various matters, without any distinction between them, does not require such reply, unless it was reasonable at the time of signing the contract.
 - 8.1.2. Concealing with deceitful intentions on the part of the Insured of an issue he knew was a Material Matter will be deemed as providing a reply which is incomplete and dishonest.
- 8.2. If an incomplete, dishonest reply is given to a question on a Material Matter, the Company may, within thirty days of the day it finds out about it and as long as no Insured Event has occurred, cancel the Policy by a written notice to the Insured.
- 8.3. If the Company cancels the Policy by virtue of this section, the Insured is entitled to refund of the premium paid for the period following the cancellation less the Company's expenses, unless the Insured acted with deceitful intentions.
- 8.4. If the Insured Event occurs prior to the cancellation of the Policy by virtue of this section, the Company will only have to pay reduced insurance benefits in a pro-rata rate which is as the ratio between the insurance premium that would have been paid as customary at the Company according to the actual situation and the agreed insurance premium, and the Company is entirely exempt in any of the following:
 - 8.4.1. The reply was given with deceitful intentions.
 - 8.4.2. A reasonable insurer would not have entered into that contract even for a higher insurance premium, had it known the real situation; in this case the Insured is entitled to refund of the insurance premium paid for the period following the occurrence of the Insured Event less the Company's expenses.
- 8.5. The Insurer is not entitled to the above remedies in any of the following, unless the incomplete and dishonest reply was given with deceitful intentions:
 - 8.5.1. It knew or should have known the real situation at the time of signing the contract or it caused the reply to be incomplete and dishonest.
 - 8.5.2. The fact with respect of which an incomplete and dishonest reply was given ceased to exist prior to the occurrence of the Insured Event or did not affect the Event, the Insurer's liability or the scope thereof.

Chapter 9: Claim

9. Provisions for the Claim chapter:

9.1. The Insured will cooperate with the Insurer before and after filing of the claim and will do as required to allow the Insurer to clarify its liability for payment under the terms and scope of the Policy.

9.2. The Insured will inform the Insurer as promptly as possible of any Event and will provide it as soon as possible with all the documents, including a signature of the waiver of medical confidentiality and confirmations, including the following ones:

9.2.1. Hospitalization at a Hospital Abroad:

The Hospitalization documents from the Hospital where the Insured was hospitalized.

9.2.2. Non-hospitalization Medical Expenses Abroad:

- A Physician's document and additional relevant documents required by the Insurer.
- Prescription for the need of purchasing Medications.

9.2.3. Plane ticket:

An unused plane ticket, the new purchased ticket and the caring Physician's confirmation explicitly testifying as to the Insured's inability to return on the originally planned date.

9.2.4. Loss or theft of luggage - provided that an extension for luggage was purchased (personal accompanied baggage) - loss or theft (under Chapter 14):

An accurate, detailed description of the details of the Event, details of the lost or stolen luggage, place of purchase of lost or stolen luggage, and amount of claim for lost or stolen luggage together with the confirmations specified hereunder, as applicable.

Notice confirmation of the Event at the place of Event Abroad:

A vital condition for handling a claim (in each and every case): confirmation of a notice to the airline or office responsible for another public transportation vehicle, as applicable, if the Event occurred during a flight or Trip, purchase confirmations of the lost or stolen luggage, and confirmation of the Customs Authorities in Israel as to the exit of taxable luggage, confirmation of the Police at the place of Event Abroad in the case of a theft.

9.2.5. Loss of payments due to cancellation/shortening of a Trip - provided that an extension for trip cancellation and shortening was purchased (under Chapter 15):

The official and/or medical certificates and documents to the extent possible, proving the reason of cancellation, the Insured's entitlement and its scope, such as: confirmations of the travel agency as for the rate of payment given to the Insured, receipts for payment or confirmations on deposits, confirmations of orders, confirmations of airlines etc. Any receipt and confirmation confirming the cost and charges charged to

the Insured following the cancellation of the Trip and his failure to leave the country and/or as a result of shortening the Trip.

- 9.3. Compliance with the provisions of this chapter, including all sections thereof, by the Insured is a pre condition to the Insurer's liability and to the payment of any compensation or indemnification under the Policy.
- 9.4. The Insurer may, at its discretion, pay the insurance benefits or some of them, directly to the service providers.
- 9.5. The Insured is entitled to receive from the Insurer a letter of financial undertaking for the service provider allowing him to receive medical service, provided that his entitlement under the Policy is not controversial.
- 9.6. Insurance benefits by virtue of this Policy will be paid in Israeli currency, as follows:
 - 9.6.1. Insurance benefits to which the Insured is entitled for reimbursement paid in Israeli currency will be paid in Israeli currency and will be linked to the consumer's price index as of the date of their payment by the Insured until the payment date of the Insurance benefits.

For the purpose of examining the limit of liability, insurance benefits to which the Insured is entitled will be calculated for reimbursement paid in Israeli currency, according to the dollar value of every payment according to the type of exchange rate according to which the Insured paid the insurance premium known at the payment date of the insurance benefits.

For the purpose of this section, "index" - the consumer's price index published by Israel Central Bureau of Statistics or, in the absence of such publication, an index published by another official body replacing it, or any index designated for health services.
 - 9.6.2. Any insurance benefits to which the Insured is entitled for reimbursement paid in a currency which is a non-Israeli currency will be converted from the currency in which they were paid to US Dollar and from it to Israeli currency according to the exchange rate known at the payment date of the insurance benefits of the type of exchange rate according to which the Insured paid the insurance premium.
 - 9.6.3. Any insurance benefits to which the Insured is entitled not for reimbursement will be paid in Israeli currency according to the exchange rate known at the payment date of the insurance benefits of the type of exchange rate according to which the Insured paid the insurance premium.
- 9.7. **The Insured will not be entitled to insurance benefits exceeding the limit of liability. The total insurance benefits paid, for the purpose of examining the limit of liability, will be calculated according to the value in US Dollar of every payment in accordance with the exchange rate according to which the Insured paid the insurance premium known at the date of making the payment.**

Notice of the occurrence of the Insured Event and thwarting liability clarification:

- 9.8. If the Insured Event occurred, the Insured will inform the Insurer of it immediately after he has found out about it, and the beneficiary will inform the Insurer immediately after he has found out about the occurrence of the Event and of his right to the insurance benefits; delivery of such notice by one of these releases the other from his duty.

- 9.9. (a) Once a notice about the occurrence of the Insured Event and a written claim for the payment of insurance benefits have been delivered to the Insurer, the Insurer will immediately do as required to clarify its liability.
- (b) The Insured or the beneficiary, as applicable, will deliver the Insurer, within a reasonable time after he was requested to do so, the information and documents required to clarify the liability, and if these are not in his possession, he will assist the Insurer to obtain them, as much as he can.
- 9.10. (a) If an obligation under Section 9.8 or under Section 9.9(b) has not been fulfilled in a timely manner, and the fulfillment thereof would have allowed the Insurer to reduce its liability, **it is not obligated to pay the insurance benefits but at the extent it would have had to pay them had the obligation been fulfilled; this provision will not apply to any of the following:**
- 9.10.1. The obligation was not fulfilled or was fulfilled in delay for justified reasons;
- 9.10.2. The non-fulfillment or delay of the obligation did not prevent the Insurer to clarify its liability and did not complicate the clarification.
- (b) If the Insured or the beneficiary deliberately makes an action which could prevent the Insurer to clarify its liability or complicate it, the Insured is not obligated to pay the insurance benefits but at the extent he would have had to pay them had such action not been made.
- 9.11. If an obligation is breached under Section 9.8 or under Section 9.9(b) or an action is made as stated in Section 9.10(b) or the Insured or beneficiary provided the Insurer with false facts or concealed from it facts regarding the Insured Event or regarding the Insurer's liability, and this was done with deceitful intentions - the Insurer is exempt from its obligation.

Chapter 10: Policy cancellation

- 10.1. If the Policy is cancelled by the Insured before he goes Abroad and he has not filed a claim for Trip cancellation, the insurance premium he paid will be refunded to him.
- 10.2. In case of shortening a stay Abroad, the Insured will be entitled to a pro-rata refund of the unused daily insurance premium, provided that no claim was filed under this Policy under the framework of extension for cancellation and shortening of a Trip (**insofar as this extension was purchased**). The Insured will be entitled to refund of the insurance premium for the shortened Trip days (during which he is not Abroad) provided that he presents a photocopy of his passport which includes an entry stamp to Israel or a biometric confirmation receipt or alternatively a confirmation from the Ministry of the Interior of the date of entry to Israel.

Chapter 11: Policy extension

- 11.1. **Policy extension within the Maximum Period** - an Insured who wishes to extend his stay Abroad under this Policy within the Maximum Period may request, while still Abroad, to extend the overseas travel insurance for an additional period within the Maximum Period, under the following conditions:
- 11.1.1. The Insured will file an application for the extension of the Period of Insurance prior to the expiration of the Period of Insurance of the Policy.
 - 11.1.2. The Period of Insurance will be extended by the Insurer under insurance continuity for the period requested by the Insured or the end of the Maximum Period of Insurance, without re-examining Pre-existing Medical Condition and without a qualification period.
Such insurance will be under similar conditions (coverage and price) to the conditions of the Insured's insurance Policy, which are valid with the Insurer at the time of extending the Period of Insurance.
 - 11.1.3. If an Insured requests, in a documented application, to extend the Period of Insurance after the expiration of the Period of Insurance of the Policy (in a Loss of Contact situation), the Insurer will extend the insurance for him as of the date of his application and until the end of the Maximum Period, according to which comes first. Such insurance will be under similar conditions (coverage and price) to the conditions of the Insured's insurance Policy, which are valid with the Insurer on the time of extending the Period of Insurance, without re-examining Pre-existing Medical Condition and without a qualification period.
 - 11.1.4. **The Insurance Period with regard to the extension coverage for an Aggravation of a Previous Medical condition (to the extent that the Insured has purchased an extension coverage for an aggravation of a Previous Medical Condition) will be until and no later than the end of the Maximum Period specified in relation to the extension coverage for an Aggravation of a Previous Medical Condition only (Chapter 16, Section 16.1.3 of the Policy) even if the Insurance Period extended for a longer period of time.**
- Anything relating to and/or deriving from an Insured Event that occurred between non-consecutive Periods of Insurance (hereinafter - Loss of Contact Situation) will not be covered within and beyond the Maximum Period.
- 11.2. **Policy extension following a stay Abroad beyond the Period of Insurance** - if an Insured Event occurs to an Insured which is covered under this Policy while being Abroad during the Period of Insurance and/or if he is hospitalized Abroad and following the Event or during his Hospitalization, the Period of Insurance expires under this Policy, and the opinion of a licensed Physician has been provided to the Insurer to the effect that the Insured is unable to return to Israel following the medical event or Hospitalization, the Period of Insurance will be extended until such date as the Physician determined that the Insured may return to Israel. The extension application will be submitted to the Insurer and will be dealt with after the medical documents relating to the Hospitalization are provided to the

Insurer, for extra insurance premium, under such conditions and restrictions as will be determined by the Insurer.

The Insurer's undertaking in this case will be in accordance with the provisions of Section 4.1 above.

- 11.3. The Application for Extension will be submitted to the Insurer, and it will be performed after the medical documents relating to the Hospitalization are presented to the Insurer, for additional Insurance Premium, under the terms and limitations determined by the Insurer.

The Insurer's undertaking in this case will be in accordance with the provisions of Section 4.1 above.

Chapter 12: General

12.1. Deductible:

Deductible will be charged where indicated for any Insured Event or coverage as defined in any of the Policy chapters at the amount specified in the terms of Policy and in the Limits of Liability Table. It is hereby clarified that the Insurer's liability to pay insurance benefits in an event where the Insured must pay Deductible will be according to the Insured's actual expenses up to the maximum amount according to the Limits of Liability Table, less Deductible only with respect of the Insured's expenses beyond such Deductible.

12.2. In the event of receiving medical services Abroad which are covered under the Policy through a supplier which is under an arrangement with the Insurer, a reduced Deductible will apply if this has been indicated on the Insurance Details Sheet.

12.3. Insurance with other firms:

12.3.1. Upon filing a claim, the Insured will provide the Insurer with a written notice of any other insurance he has against the risks covered under this Policy.

12.3.2. This Policy will cover any loss or theft or expense which are covered under the terms of this Policy if such coverage was purchased, even if at the time of the occurrence of the Event subject of such loss or damage or expense other insurance or insurances existed with respect thereof, whether those have been procured by the Insured or by another, up to the limit of liability set in the Policy. The Insurer will have a right of subrogation against the other insurer and/or insurers with respect of the corresponding amount.

12.3.3. If the Insured claims payment from the Insurer for any loss and/or expense and/or damage where there is a third party liability to cover them pursuant to the law and/or under an agreement, including an insurance agreement, and such payment has been paid by the Insurer, the Insurer will have a right of subrogation for the amounts it paid the Insured against the third party and against the Insured if they were paid to the Insured by the third party.

12.3.4. If any payments were made by the Insurer as stated in Section 12.3.3 above, any right the Insured had or has against any third party will transfer to the Insurer at the rate of the amount of insurance benefits the Insurer paid the Insured. The Insured will assign his rights to the third parties in favor of the Insurer up to the rate of the amount stated in this section.

12.3.5. The Insured will cooperate with the Insurer and will take any action so as to allow the receipt of amounts paid by the Insurer and were under the liability of the third party.

12.4. The Insured may not, without the Insurer's prior, written consent, admit to any liability or assume any liability which binds the Insurer.

12.5. The Insurer will be entitled to conduct on behalf of the Insured any proceeding deriving from its liability under this Policy.

12.6. Extensions (Chapters 5, 6, 14-25):

- 12.6.1. It is hereby declared and agreed that if any extension has been purchased by the Insured and the Insurance Details Sheet indicates that it has been purchased, the Company will pay the Insured insurance benefits according to the provisions and exclusions specified in the extension..
It is clarified that the extensions are only in force if they have been purchased, all or some of them, at the Insured's choice, for extra insurance premium and have been explicitly indicated on the Schedule as purchased extensions. If no extensions have been purchased, all or some of them - at the Insured's choice and/or the Schedule does not indicate that extensions have been purchased, no insurance coverage will apply to them.
- 12.6.2. Any purchased extension is subject to all of the terms of the Policy.
- 12.6.3. Any change and/or waiver and/or digression from the stated in the Policy will only be binding for the purpose of any purchased extension if they are explicitly included therein.
- 12.6.4. In any event of contradiction between the provisions of the purchased extension and the provisions of other appendices of the Policy and/or the provisions of the general terms of the Policy, the provisions of the extension, for the purpose thereof, will bind.

12.7. Insurance premium according to the Trip Destination:

- 12.7.1. The insurance premium will be determined in accordance with the Trip Destination(s) chosen by the Insured under the Proposal (**hereinafter - "the Trip Destination"**).
- 12.7.2. It is clarified that the Trip Destination affects the insurance premium and is a Material Matter subject to the duty of disclosure in accordance with the provisions of Chapter 8 above.

12.8. Limitation period:

The limitation period of a claim for insurance benefits is 5 years from the date of Event, except for a third-party claim.

Chapter 13: Law and jurisdiction

- 13.** Any legal proceeding pursuant to or deriving from this Policy will be judged according to the laws of the State of Israel and the exclusive venue in any such proceeding will be at the competent courts in the State of Israel only pursuant to the law.

For the avoidance of doubt, the general terms specified in Chapters 8-13 above will apply to the entire Policy, including Chapter A (the Basic Policy) and Chapter B (Policy extensions - insomuch that these have been purchased by the Insured).

Limits of Liability Table for Part B - extensions for overseas travel insurance policy for extra premium

Section in Policy	Coverage	Limit of liability	Deductible
Chapter 14	Luggage (personal accompanied baggage) - loss or theft out of which:	\$2,250	
14.4.1	Limitation per item (including valuables)	\$300	\$50
14.4.2	All valuables accumulatively	\$500	According to deductible per valuable
14.4.3	Purchase of vital items in the event of late arrival of luggage	\$150	No deductible
14.4.4	Value of suitcase and/or bag and/or purse	\$75	No Deductible
14.4.5	Camera and its accessories	\$350	\$50
14.4.6	Reconstruction of documents	\$250	No Deductible
Chapter 14A	Special coverage for valuable(s) accumulatively - extension for extension of luggage coverage Chapter 14	\$2,000	\$50
	Camera, glider, sacred utensils, baby carriage, surfboard, wheelchair, scooter, musical instrument		
Chapter 15			
Cancellation and shortening of a Trip			
One of chapters 15A or 15B may be purchased - basis or extended			
Chapter 15A	Cancellation and shortening of a Trip - Basic		
15.2A	Trip cancellation out of which: plane ticket for the Insured	\$5,000 \$2,000	\$50
15.3A	Trip shortening out of which: plane ticket for the Insured	\$7,000 \$2,000	\$50
15.3.2	Change of Trip plan - no Trip shortening	\$1,000	\$50
15.4	Reimbursement for a canceled Travel ticket in the event of a medical event due to an epidemic	\$400	No deductible

Section in Policy	Coverage	Limit of liability	Deductible
15.5	Loss of payments abroad in the event of a Medical Event due to an epidemic	\$150 stay expenses per day and up to a maximum amount of \$1,000	No deductible
15.7	Increasing the reimbursement ceiling for expansion for canceling and shortening a trip during an epidemic: (for additional insurance premiums)		
15.7.1	Trip cancellation Out of which: travel ticket for an Insured	\$150 stay expenses and up to a total amount of \$5,000 \$2,000	
15.7.2	Extending or shortening a stay abroad Within it: travel card for the insured	\$150 stay expenses and up to a total of \$5,000 \$2,000	
Chapter 15B	Cancellation of a trip and shortening of a trip - Extended		
15.2 B	Cancellation of a trip Within it: ticket for the insured	\$10,000 \$3,000	\$50
15.3 B	Shortening of a trip Within it: ticket for the insured	\$12,000 \$3,000	\$50
15.3.2	Travel plan change - without travel shortening	\$1,000	\$50
15.4	Reimbursement for a canceled ticket in the event of a medical event due to an epidemic	\$400	No deductible
15.5	Loss of payments abroad in the event of a medical event due to an epidemic	\$150 stay expenses and up to a maximum amount of \$1,000	No deductible
15.7	Increasing the reimbursement ceiling for expansion for canceling and shortening a trip during an epidemic (for additional insurance premiums)		
15.7.1	Cancellation of a trip Within it: ticket for the insured	\$150 stay expenses and up to a total amount of \$5,000 \$2,000	

Section in Policy	Coverage	Limit of liability	Deductible
15.7.2	Extending or shortening a stay abroad Within it: Ticket for the insured	\$150 stay expenses and up to a total amount of \$5,000 \$2,000	
Chapter 16	Deterioration of Pre-existing Medical Condition	\$350,000	
Chapter 17	Pregnancy up to week 32 to an Insured under 42 years of age	\$350,000	
Chapter 18	Amateur extreme sports	Included in the liability limit for medical expenses in the basic policy	\$50
Chapter 19	Winter sport		
19.2	Hospitalization Medical Expenses	Included in the Medical Expenses Liability Limit in the Basic Policy	No Deductible
19.2	Non-hospitalization Medical Expenses	Included in the Medical Expenses Liability Limit in the Basic Policy	\$50
19.2.1	Indemnification for loss of ski days	\$300	\$50
19.2.2	Trip cancellation due to lack of snow at the ski resort Plane ticket Ground services	\$300 \$50 per day up to 6 actual ski days	\$50
19.2.3	Delay in arrival at ski resort due to weather	\$50 per day up to 6 actual ski days	\$50
19.2.4	Loss of 50 ski days as a result of closing the resort for a period of 48 hours and more	\$75 per day up to 6 actual ski days	\$50
19.2.5	Delay in arrival of winter sport equipment Out of which: one item	\$200 \$20	No Deductible
Chapter 20	Professional sports (main occupation and/or paid)	Included in the Medical Expenses Liability Limit in the Basic Policy	\$50
Chapter 21	Loss or theft of a laptop/tablet	\$2,000	\$100
Chapter 22	Loss or theft of a cellular phone	\$750	\$200
Chapter 23	2 wheel bicycle (up to 90 days)		

Section in Policy	Coverage	Limit of liability	Deductible
	Loss or theft (as per required insured sum according to bicycle value which is recorded on the Schedule) Damage or theft while with an air carrier	\$2,500 \$4,500 \$6,000 As per purchased amount	Total loss - \$50 Theft - \$250 \$1,000
Chapter 24	Cancellation of Deductible in case of accidental damage from a hired car/caravan Can be purchased one of chapters 24 or 24A		
Chapter 24	Cancellation of Deductible in case of accidental damage from a hired car/ caravan (for a driver above the age of 24 and up to 75)	\$1,500	No deductible
Chapter 24A	Cancellation of Deductible in case of accidental damage from a hired car/ caravan (for a driver above the age of 24 and up to 75)	\$6,000	

Section in Policy	Coverage	Limit of liability	Deductible
Chapter 25	<p>Personal accidents insurance for an accident abroad</p> <ol style="list-style-type: none"> 1. Death 2. Disability 3. Fractures 4. Burns 5. Day of hospitalization 	<p>Compensation in the amount of:</p> <ol style="list-style-type: none"> 1. Death from an accident: compensation in the full and one-time insurance amount of \$40,000. 2. Disability from an accident: Compensation is calculated according to the percentage of disability multiplied by the full insurance amount. 3. Fracture from an accident: according to the compensation table in section 25.2.3 below and up to \$1,000. 4. Burns: according to the compensation table in section 25.2.4 below and up to \$1,000. 5. Hospitalization from an accident: daily compensation in the amount of \$100 per day starting from the third day and up to 180 days. 	No Deductible
Chapter 25.4	Expansion to the personal accidents chapter – cancellation of the amateur extreme sports exception for an accident abroad	Cancellation of exception 25.3.2 and the coverage will be according to the ceilings and amounts specified in section 25.2.	

Chapter B - Extensions to the Basic Policy

This extension will only be in force if purchased by the Insured for extra premium and the Schedule indicates that an extension was purchased

Chapter 14: Extension for luggage (personal accompanied baggage) – loss or theft

14. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

14.1. Additional definitions for this chapter:

14.1.1. **Luggage:**

Personal baggage for private use accompanying the Insured or located at the hotel and/or apartment where he stays Abroad. For this purpose, **new baggage** - baggage purchased up to 12 months of the purchase date.

14.1.2. **Valuables:**

Precious metal, diamond, jewelries, gem, watch, various photography equipment, computer(s) including PDA, laptop and related accessories, music player.

14.1.3. **Document Reconstruction:**

A document which is a passport, driver's license and/or plane ticket.

14.1.4. **Loss**

Permanently lost and untraceable.

14.2. **Period of Policy regarding Luggage insurance:** as of the Insured's departure of his house directly on his way Abroad or if he delivered the Luggage to the carrier before that - as of the moment of delivery, until his return from Abroad directly to his house, everything within the Period of Insurance as noted on the schedule.

14.3. **Insurer's undertaking:** the Insurer will pay and indemnify the Insured in the event of loss or theft of Luggage up to a total amount of \$2,250 and subject to the Limits of Liability Table in the Policy but not exceeding its actual value (with deduction of wear and tear and Deductible).

14.4. **Insurance benefits:**

Out of the maximal amount for Luggage, the insurance benefits will be limited up to an amount to \$2,250 and subject to the Limits of Liability Table in the Policy for each of the following sections:

14.4.1. One item and/or a set of items (including related items to the set), whether valuable or not, up to an amount of \$300 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

- 14.4.2. All valuables cumulatively and up to an amount of \$500 and subject to the Limits of Liability Table in the Policy. In respect of this section, a deductible will apply according to what is stated in the table of liability limits in the Policy, for something of value.
- 14.4.3. **Purchase of vital items in the event of late arrival of Luggage** - provided that the length of delay will be more than 24 hours of the Insured's arrival at his Destination - against receipts produced by the Insured for purchasing vital items for the continuation of his stay Abroad. The indemnification for this section will be with deduction of the amount paid to the Insured by the airline he used up to an amount of \$150 and subject to the Limits of Liability Table in the Policy. Loss of a suitcase or bag (including a backpack) or wallet up to a total of \$75 and subject to being specified in the table of liability limits in the Policy.
- 14.4.4. Camera and its accessories up to a total amount of \$350 and subject to the Limits of Liability Table in the Policy. A deductible of \$50 will apply to this section.
- 14.4.5. Document Reconstruction up to a total amount of \$250 and subject to the Limits of Liability Table in the Policy.

14.5. Deduction of wear and tear:

- 14.5.1. In the event that the lost or stolen Luggage was new Luggage and the Insured has purchase receipts from dates preceding the date of loss/theft testifying it, the Luggage will be evaluated by the Insurer with no deduction for wear and tear and not exceeding the maximal amount stated in the Limits of Liability Table in the Policy.
- 14.5.2. In the event that the lost or stolen Luggage was not new or the Insured does not have purchase receipts from dates preceding the date of loss/theft, the stolen/lost Luggage will be evaluated by the Insurer but in any event the maximal payment paid for the loss and/or theft of any Luggage will be the value of the item as new less wear and tear (except for in the event of silver/gold jewelries) of up to 35% of the claimed amount but not exceeding the maximal amount stated in the Limits of Liability Table in the Policy.
- 14.6. **Luggage in possession of air carrier (above the amount paid by a carrier or third party):** for any Luggage in possession of an air or land carrier or which was under the responsibility of a third party, the Insurer will indemnify the Insured only for damage which is above the amount paid by the carrier or third party and up to the Insurer's limit of liability under this Policy, everything subject to the provision of Section 12.3 (Insurance with other firms).

- 14.7. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:**
- 14.7.1. Cash, checks of any kind, stamps, credit cards, photographic films, tickets of all kinds (train, bus, theatre and other shows etc.), computer software, diskettes, compact discs, memory cards, cellular phones.
 - 14.7.2. Business work tools and/or commercial goods including business samples.

- 14.7.3.** Eyeglasses, contact lenses, hearing aids, medical fittings, dentures, Medications (as baggage).
- 14.7.4.** Art objects, fragile objects, all that whether the theft and/or loss occurred to the item separately or as part of the entire baggage.
- 14.7.5.** Normal wear and tear, erosion, gradual wearing out, machinery or electric breakdown or malfunction, any damage to Luggage (except in the event of fire of a suitcase or bag), loss resulting from confiscation, expropriation, loss resulting from the Insured's gross negligence which fully contributed to the occurrence of the Insured Event, or failure to take reasonable steps to prevent, mitigate or recover it.
- 14.7.6.** Loss caused to Valuables held not on the Insured's body (unless unlikely to be worn on the Insured's body all day) or not in his personal bag, unless the Valuables have been stored in a safe or another secured place.
- 14.7.7.** The Insurer will not be liable to any consequential and/or direct damages.

**14A: Special coverage for valuable item(s) such as -
camera, drone, sacred utensils, baby carriage, surfboard,
wheelchair, scooter, musical instrument -
extension to baggage extension coverage in chapter 14**

Provided that expansion coverage is purchased for luggage (accompanying personal luggage) - loss or theft in Chapter 14 above and this coverage is purchased for additional insurance fees and is specifically stated on the Schedule.

14 A 1. Another definition for this chapter:

Valuable item: one or several valuable items that the insured took with him abroad and the details of which were specifically stated on the Schedule and that they are only one of the following: camera, drone, scared utensils, baby carriage, surfboard, wheelchair, scooter, musical instrument.

14 A 2. The Policy Period regarding insurance for a valuable item - starting with the Insured leaving his home directly on his way abroad or if he delivered the valuable item to the carrier before - from the moment of delivery, until he returns from abroad directly to his home, all within the insurance period as indicated on the list page.

14 A 3. The Insurer's undertaking: the Insurer will pay the Insured and indemnify him in the event of the loss or theft of all valuable items cumulatively, up to a total of \$2,000 and subject to what is specified in the table of liability limits in the policy, but no more than its actual value (deducting wear and tear and deductibles). It is clarified that the Insurer's undertaking as mentioned above is the coverage ceiling and here is in addition to the ceilings stated in chapter 14 above.

14 A 4. Police report: coverage for this extension is conditional on the Insured providing the Insurer with a report from the local police or the approval of another competent authority at the location of the loss or theft, which will detail the circumstances of the incident, specifying the valuable item that was lost or stolen. Coverage in circumstances where it is not possible to contact the local police or another authorized body in the place where the theft occurred, is conditional on immediate reporting to the Insurer and receiving its approval and consent to coverage under the reported circumstances.

It should be clarified that the stated in Sections 14.5 (wear and tear deductions), 14.6 (luggage in the possession of an air carrier), 14.7 (exception) above shall apply also to this extension for valuable items.

Chapter 15: Extension for Trip cancellation and shortening - Basic or Extended

15. Provided that this cover was purchased for extra premium, and this was explicitly indicated on the Schedule.

15A Trip cancellation and shortening - Basic

15.1. Additional definitions for this chapter:

15.1.1. Trip Cancellation:

Non-departure of the Insured and/or one of the nuclear family members from Israel Abroad on the start date of the Period of Insurance listed on the Schedule.

15.1.2. Trip Shortening:

The return of the Insured and/or one of the nuclear family members from Abroad to Israel prior to the end of the Period of Insurance listed on the Schedule.

15.1.3. Plane Ticket:

A plane ticket purchased for the Insured for a Trip from Israel Abroad; or a plane ticket back to Israel purchased by the Insured Abroad under a Physician's instructions instead of the ticket he purchased upon leaving Israel in order to return to Israel from a certain Destination at the end of the Trip. It is clarified that the coverage under this Policy will apply at the value of a plane ticket in tourist class only.

15.1.4. Nuclear Family: the spouse of the Insured and the children of each of them who purchased with the Insurer an extension for Trip Cancellation and Shortening for that Trip.

15.1.5. Trip Escort: a person accompanying the Insured on a Trip during his stay Abroad.

15.1.6. Period for Loss of Payments for Trip Cancellation: a period starting on the Policy purchase date and ending on the date of flying Abroad.

15.1.7. Epidemic: a situation in which there is a sudden increase in cases of illness that can be isolated to one or several countries and is defined as an epidemic according to the World Health Organization.

15.2. Insurer's undertaking for Loss of Payments for Trip Cancellation for an Insured and/or Nuclear Family:

In the event of Trip Cancellation, the Insurer will indemnify the Insured and/or the Nuclear Family members (who have a valid Policy with the Insurer, for the insurance of Trips Abroad and an extension for Trip Cancellation and Shortening), for loss of non-refundable deposits directly related to Trip and/or Plane Tickets and/or payments directly related to the Trip which have been paid in advance or that the Insured should pay and are not refunded and are non-refundable (such as accommodation and rented car) up to a limit of liability of \$5,000 out of which a Plane Ticket for the Insured of up to \$2,000

and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

15.2.1. The Insurer will only pay under Section 15.2 above only in the event of Loss of Payments (as of the purchase date of this extension) as a result of Trip Cancellation resulting from the following events and provided that they occurred following the purchase of this extension:

15.2.1.1. Death of the Insured and/or an immediate family member and/or travel companion or Hospitalization for a Hospitalization Day or more of one of these.

15.2.1.2. Illness or accident of the Insured and/or an Immediate Family member and/or Travel Escort, for which he is absent from work (according to the employer's approval) on a doctor's order **for at least seven days**, and this in the week preceding the travel date. In the case of an Insured who does not work (that is, without an employer) the aforementioned will apply, subject to medical confirmation that he is unfit to travel and that his medical condition requires complete bed rest for at least seven days in the week preceding the travel date.

15.2.1.3. A medical condition as defined below, which occurred or was discovered, as the case may be, after the purchase of this extension, to the Insured and/or an Immediate Family member and/or a Trip Escort, as a result of which the trip was canceled on the orders of a doctor and is **only one of the following**:

15.2.1.3.1. Surgery or catheterization

15.2.1.3.2. A fracture that includes damage to the integrity of the bone, a tear in the ligament and/or tendon and/or meniscus.

15.2.1.3.3. Pneumonia and/or ear infection that involve the administration of drugs through the vein, **which occurred up to 7 days before the date of travel** and after purchasing this extension.

15.2.1.3.4. Entering a condition of bed rest or the definition of a pregnancy as a high-risk pregnancy.

15.2.1.3.5. Heart attack, diagnosis of cancer, stroke.

15.2.1.4. Trip Cancellation in the period starting 14 days prior to the Trip date and ending on the Trip date, if there was a fire, explosion, malicious damage, storm, flood in the Insured's house, and also if the Insured's personal presence was required for the purpose of a Police investigation as a result of a burglary or attempted burglary to his house or business.

15.2.1.5. Trip Cancellation to an Insured who is in reserve service by virtue of Section 8 (Reserve Service in Emergency) or

Section 9 (Reserve Service in Special Circumstances) to the Reserve Service Law, 5768-2008.

- 15.2.1.6. Cancellation of travel for the Insured who is in permanent service following the Insured's participation in an operational activity.
 - 15.2.1.6.1. "Operation activity" for the purposes of this section means - a military activity that does not last more than 72 hours.
 - 15.2.1.6.2. The Insured must provide the Insurer with a written reference signed by the confirming party that the Operational Activity prevented the Insured from going abroad and as a result of the Operational Activity he is required to cancel the Trip.
"Confirming party" for the purpose of this section means a commander/officer of at least the rank of lieutenant colonel.

15.3. Insurer's undertaking for Loss of Payments for Trip Shortening for an Insured and/or Nuclear Family:

In the event of Trip Shortening as defined in Section 15.1.2, the Insurer will indemnify the Insured and/or the Nuclear Family (**who have a valid Policy with the Insurer, for the insurance of Trips Abroad and an extension for Trip Cancellation and Shortening**), for the pro-rata share of the expenses paid by the Insured in advance (such as accommodation and rented car) calculated proportionally from the date of occurrence of the Insured Event, namely each lost day of planned Trip and/or for Plane Ticket and/or the difference for an existing Plane Ticket and an alternative non-refundable Plane Ticket up to a total amount of \$7,000 out of which a Plane Ticket for the Insured of up to \$2,000 and subject to the Limits of Liability Table in the Policy. Deductible of \$50 will apply to this section.

15.3.1. The Insurer will only pay under Section 15.3 above only as a result of the following events that occur after the purchase of this extension:

- 15.3.1.1. A medical event that occurred Abroad to the Insured and/or the Nuclear Family and/or a Trip Escort which, under a licensed Physician's confirmation the Insured and/or Nuclear Family member and/or Trip Escort was forced to change the planned date of their return to Israel and the originally purchased Plane Ticket could not be used.
- 15.3.1.2. The death or Hospitalization of the Insured or a Nuclear Family individual or an Immediate Relative or a Trip Escort.
- 15.3.1.3. Trip Shortening to the Insured and/or Nuclear Family member and/or Trip Escort following reserve service by virtue of Section 8 (Reserve Service in Emergency) or Section 9 (Reserve Service in Special Circumstances) to the Reserve Service Law, 5768-2008.

- 15.3.2. The insurer's undertaking for loss of payments due to a change in the travel plan (**without travel shortening**) - the insurer will indemnify the insured and/or one of the members of the nuclear family (who hold a valid policy with the insurer, for travel insurance abroad and extension for cancellation and travel shortening for the same trip) for expenses which have been paid in advance and for which it is not possible to receive a refund **up to a total of \$1,000** (such as cruise expenses, accommodation, flight) and subject to being specified in the table of liability limits in the policy. In the case below.

Hospitalization abroad for more than 2 nights in a row - of the insured and/or one of the members of the nuclear family and/or the trip escort, after this extension was purchased, and following the hospitalization, plans for which payment was made in advance for the trip were canceled, even if the trip was not shortened, and a loss was incurred non-refundable payments.

A deductible of \$50 will apply for this section.

- 15.4. The insurer's undertaking for loss of payment for a travel ticket following the cancellation of a trip to the insured and/or to a nuclear family, in the event of a medical event that occurred due to an epidemic:

In the case of an epidemic as defined above, as a result of which a trip was canceled according to the cases listed in this section only, the insurer will indemnify the insured and/or the members of the nuclear family (who hold a valid policy with the insurer, for travel insurance abroad and extension for cancellation and shortening of the trip for that trip), in the relative part of the expenses paid by the insured for a travel ticket only, which are not reimbursed and/or which were paid in advance and are not reimbursed and cannot be reimbursed for them from another party, up to a total of \$400 per travel ticket for the insured, and subject to being stated in the table of liability limits in the policy.

The Insurer will pay according to Section 15.4 only due to the following cases and provided that they occurred during an epidemic, after purchasing this extension:

- 15.4.1. Fever or other symptoms, which may indicate illness in an epidemic and which were discovered in the insured and/or the nuclear family and/or trip escort, at the airport during the pre-flight check, and as a result of which the insured and/or the nuclear family and/or traveling companion were prohibited from joining the flight.
- 15.4.2. The insured and/or the nuclear family and/or traveling companion, in the week preceding the travel date, suffers from an illness for which an epidemic event is declared.
- 15.4.3. The insured and/or the nuclear family are in home quarantine, which is not due to their return from abroad, according to a report to the Ministry of Health, which began during the 14 days before the travel date. With respect to this section (section 15.4.3) a 3-day qualifying period will apply, starting from the date of purchase of this extension, during which there is no entitlement to insurance coverage for an insurance event that occurred during this period.

For the avoidance of doubt, it will be clarified that the coverage for an event as defined in Section 15.4 does not come in addition to the undertaking in Section 15.2 above, and the insured will be entitled to coverage for only one of Sections 15.2 or 15.4 and the lower of them in the ceiling of the liability limits, subject to the stated conditions.

- 15.5.** Insurer's undertaking for loss of payments and additional expenses following a stay abroad in the event of a medical event that occurred due to an epidemic: The insurer's liability for loss of payments and additional expenses following a stay abroad in the event of a medical event that occurred due to an epidemic: In the event of an epidemic as defined above, as a result of which the insured is forced to extend or shorten his stay abroad according to the cases specified in this section only, the insurer will indemnify the insured and/or the members of the nuclear family (who hold a valid policy with the insurer, for travel insurance abroad and extension for canceling and shortening a trip for that trip), in the relative part of the expenses paid by the insured in advance (such as accommodation expenses and a rental car), and/or accommodation expenses in the case of extending a stay abroad beyond the insurance period up to a total of \$150 per day, and/or In respect of a travel ticket to Israel and/or the difference in respect of an existing travel ticket and an alternative travel ticket for which reimbursement cannot be received from another party, up to a total of \$1,000 and subject to being specified in the table of liability limits in the policy.

The insurer will pay according to section 15.5 only due to the following cases and provided that they occurred abroad during an epidemic, to the insured and/or to the nuclear family and/or to the trip escort and after the purchase of this extension:

- 15.5.1.** Fever or other symptoms, which may indicate illness in an epidemic and which were discovered in the insured and/or the nuclear family and/or trip escort, at the airport, and as a result of which the insured and/or the nuclear family and/or traveling companion were prohibited from joining the flight back to Israel.
- 15.5.2.** The insured and/or the nuclear family and/or the trip escort for travel abroad suffers from a disease for which an epidemic event is declared.
- 15.5.3.** Imposing a quarantine in the country of stay abroad, as a result of which it is not possible to fly back to Israel at the planned time. For this matter - a "quarantine" is a blockade of a country that does not allow the departure or entry of aircraft to it.

For the avoidance of doubt, it will be clarified that the coverage for an event as defined in Section 15.5 does not come in addition to the undertaking in Section 15.3 above, and the insured will be entitled to coverage for only one of Sections 15.3 or 15.5 and the lower of them in the ceiling of the liability limits, subject to the stated conditions.

For the avoidance of doubt, the Insured will assign his right to indemnification for an unused Plane Ticket from a third party in favor of the Insured, at the Insurer's request.

15.6. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

The Insurer will not pay any claim(s) deriving from or relating to:

- 15.6.1. Law or government regulation, delay or amendment or revision of the registered timetable of an airline, failure in providing information of any part of the planned vacation (including mistake, failure or omission) by any service provider constituting part of the planned Trip or by any agent or trip organizer through which the Trip was registered or booked.
- 15.6.2. The Insured's unwillingness to go on a Trip or Trip Shortening which derives from any other reason except as stated in Section 15.2, 15.3, 15.4, 15.5 above.
- 15.6.3. Trip expenses and refinance of a Trip Abroad resulting from Trip Cancellation or Shortening.
- 15.6.4. The result of a crime or criminal proceedings of any person on whom the trip plans rely, except for a delay of the Insured and/or Trip Escort to go on the Trip resulting from a subpoena to testify in court.
- 15.6.5. A failure in providing a notice to a travel agency or trip organizer or provider of transportation or accommodation services promptly when it was clarified that the Trip should be cancelled or shortened.
- 15.6.6. A claim for pro-rata refund of an original Plane Ticket used for leaving and returning to Israel or replaced with another by the carrier in an event of delayed return, Trip Shortening or discontinuation.
- 15.6.7. Trip and stay expenses incurred by the Insured which he would have incurred notwithstanding the occurrence of the medical event or return to Israel.

Increasing the reimbursement ceiling for expansion for canceling and shortening a trip - basic:

- 15.7. Possibility of increasing the reimbursement ceiling to the insured for the coverage during an epidemic as stated in Section 15.4 and in Section 15.5 above, provided that an increase in the reimbursement ceiling was purchased as part of the purchase of an extension to cancel and shorten a trip and in exchange for additional insurance premiums, and this was specifically stated on the Schedule - the reimbursement ceiling for Sections 15.4, 15.5 above will be as follows:
- 15.7.1. Increasing the reimbursement ceiling Section 15.4 (except in the case of home quarantine in Section: 15.4.3):

In the case of purchasing an increased ceiling as stated above - the insurer's liability for loss of payments following the cancellation of a trip to the insured and/or the nuclear family as specified in Sections **15.4.1 and 15.4.2** above, and in accordance with the conditions and stipulations set forth in Section 15.4 above, will include a loss for the loss of deposits directly related to the trip and which are not refunded and/or a travel ticket, and/or payments directly related to the trip that have been paid in advance or that the insured must pay and which are not refunded and cannot be reimbursed for them (such as accommodation expenses up to a total of \$150 per day and a rental car) from another party, up to a total of \$5,000 and of which up to \$2,000 per travel ticket for the insured and subject to what is stated in the table of liability limits in the policy. It will be clarified that the increase in the reimbursement ceiling in this section will not apply in the case of home quarantine as specified in Section 15.4.3 above.

It will also be clarified that the total amount in this section comes instead of the total amount stated in Section 15.4 above (except for what is stated in Section 15.4.3 above) and does not come in addition to the total obligation in Section 15.4.

- 15.7.2. Increasing the reimbursement ceiling Section 15.5:

In the case of purchasing an increased ceiling as mentioned above - the insurer's undertaking following a stay abroad in the event of a medical event that occurred due to an epidemic as a result of which the insured is forced to extend or shorten his stay abroad in accordance with the conditions and stipulations set forth in Section 15.5 above, for loss of payments for which reimbursement cannot be received and/or accommodation expenses in the event of an extension of a stay abroad up to a total of \$150 per day, will be up to a total of \$5,000, of which up to \$2,000 for a travel ticket for the insured and subject to being stated in the table of liability limits in the policy. It will be clarified that the total in this section comes instead of the total stated in Section 15.5 above and does not come in addition to the total undertaking in Section 15.5.

It will be clarified that the purchase of an increased reimbursement ceiling for extension to cancel and shorten a trip - basic as detailed above will only increase the reimbursement ceiling in accordance with the above and as stated in the table of liability limits in the policy. The rest of the coverage conditions of the extension to cancel and shorten the trip in these sections will apply without change.

15B - Cancellation and Shortening of a Trip - Extended

On the condition that a trip cancellation and shortening - extended chapter is purchased and in exchange for additional insurance premiums, and this is explicitly stated on the Schedule - the reimbursement ceiling will be in respect of Sections 15.2 and 15.3.1 - in chapter 15A above, as follows:

Section 15.2 in Chapter 15 A: the insurer's undertaking for loss of payments following the cancellation of a trip to the insured and/or to a nuclear family: will be up to a total of \$10,000, of which a travel ticket for the insured up to \$3,000 and subject to what is stated in the table of liability limits in the policy. A deductible of \$50 will apply for this section.

Section 15.3.1 in Chapter 15 A: the insurer's undertaking for loss of payments due to a shortened trip to the insured and/or to a nuclear family in the cases specified in Section 15.3.1: will be up to a total of \$12,000, of which a travel ticket for the insured up to \$3,000 and subject to what is specified in the table of liability limits in the policy. A deductible of \$50 will apply for this section. It will be clarified that there will be no change in the insurer's undertaking for the cases specified in Section 15.3.2.

It is clarified that the insurer's undertaking as stated above is the only coverage ceiling and it is instead of the ceilings specified in Section 15.2 in Chapter 15A and in Section 15.3.1 in Chapter 15A above.

It will be clarified that the purchase of an extended trip cancellation and shortening chapter will only increase the reimbursement ceiling in accordance with the above and as stated in the table of liability limits in the policy. The rest of the coverage conditions of the extension to cancel and shorten the trip - basic (in Sections 15.1-15.6 above, as well as Section 15.7 to the extent purchased), including the definitions, liability limits and deductibles will be valid and will apply unchanged in this chapter.

Chapter 16: Extension for Deterioration of Pre-existing Medical Condition

16. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.

16.1. Additional definitions for this chapter:

16.1.1. **Pre-existing Medical Condition:** disease and/or medical condition due to which the Insured was under treatment, including drug therapy only and/or under care when leaving Abroad or during the 6 months preceding his leave and excluding when receiving the treatment was the purpose of the Trip.

16.1.2. **Special Deterioration of Pre-existing Medical Condition:** an adverse, sudden and unexpected change of a Pre-existing Medical Condition the treatment of which was vital as an emergency treatment Abroad and the Insured could not medically postpone the treatment until returning to Israel.

16.1.3. **The Maximal Period for this chapter (unless otherwise approved by the Insurer):**

For Insured up to the age of 60 (inclusive) - up to 45 days as of the day of leaving Abroad.

For Insured from the age of 61 to the age of 70 (inclusive) - up to 30 days as of the day of leaving Abroad.

For Insured from the age of 71 to the age of 80 (inclusive) - up to 15 days as of the day of leaving Abroad.

For Insured from the age of 81 to the age of 85 (inclusive) - up to 10 days as of the day of leaving Abroad.

For Insured from the age of 86 to the age of 95 (inclusive) - up to 7 days as of the day of leaving Abroad.

16.2. **Insurer's undertaking:** the Insurer will provide service or pay the Insured or provide the Insured with a letter of financial undertaking for reimbursement for Events covered under the Policy and the insurance extensions he purchased with the Insurer and noted on the Schedule, which are the result of a Special Deterioration of Pre-existing Medical Condition as defined above, subject to the terms, definitions, exclusions and limits of liability stated in the Basic Policy and in this extension, according to the lower.

It is clarified that to the extent that the Insured submitted a request to extend the insurance period as stated in chapter 11 above for a longer period of time than the maximum period granted to the Insured under this coverage (extension for aggravation of a pre-existing medical condition), then the insurance period with regard to the coverage of an extension to a pre-existing medical condition will be until and no later than the end of the maximum period stated in relation to this coverage and as detailed in Section 16.1.3 above, including even if the insurance period has been extended to a longer period of time.

The Insurer's undertaking in this chapter is up to a total amount of \$350,000 subject to the Limits of Liability Table of Part B and is not in addition to the Insured's undertaking in the Basic Policy.

16.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

The Insurer will not pay any claim(s) deriving from or relating to transplantation of organ(s).

Chapter 17: Extension for pregnancy up to week 32 to an Insured under 42 years of age

17. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.

17.1. **Insurer's undertaking:** the Insurer will pay an Insured who is not yet 42 years of age on the date of Event and who is pregnant up to week 32 (inclusive) on the date of Event, medical expenses for unexpected aggravation related to pregnancy and medical flight, as follows:

Hospitalization Expenses Abroad and non-Hospitalization Medical Expenses Abroad, premature birth and including expenses relating to treatment and/or Hospitalization of the fetus or preemie and his Medical Flight.

The Insurer's undertaking in this chapter is up to a total amount of \$350,000 subject to the Limits of Liability Table of Part B and is not in addition to the Insured's undertaking in the Basic Policy.

17.2. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to the following conditions:

17.2.1. Abortion.

17.2.2. Routine and genetic tests and/or lab tests relating to the pregnancy and its development.

Chapter 18: Extension for Amateur Extreme Sports

18. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.

18.1. Additional definitions for this chapter:

18.1.1. Extreme Sport:

Sport that include or require, among other things, high levels of difficulty and/or physical effort from those who engage in them or involve a high level of risk in accordance with the list of challenging sports that is correct at the time of purchase of coverage, and which is updated from time to time and published on the company's website www.harel-group.co.il.

18.2. Insurer's undertaking: The insurer will pay the insured hospitalization expenses, medical expenses and insurance benefits for other expenses, which arise from the insured's participation in extreme sports as defined above, as part of a hobby carried out abroad only, which are covered by the basic policy. This, subject to the conditions, definitions, exceptions and liability limits specified in the basic policy. **The purchase of this extension does not constitute a waiver of the license and/or permit required by the very performance of the sport in that country.**

It will be clarified that an insurance event resulting from an extreme sports activity will not be covered if the insured did not have a valid license and/or permit to perform that sport as required in that country abroad at the time the activity was performed.

18.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to the following conditions:

18.3.1. Winter sport (as defined in Section 19.1.1 below), including winter skiing and/or snowboarding and/or snow sledding and/or snowmobiles, unless a winter sport extension has been purchased for additional insurance premiums.

18.3.2. Participation of the insured in extreme sports as a main occupation or as a side hustle.

The insurer's undertaking in this chapter is up to the limit of liability established in the basic policy for medical expenses, which is a total of \$5,000,000 minus the \$50 deductible for this chapter, and subject to the table of limits of liability in Part B of the policy and is included in the insurer's obligation (it does not come in addition to) the limit of liability for medical expenses in the basic policy, so that the total sums that the insurer will pay by virtue of all the chapters included in this policy, including this chapter, will not in any case exceed the limits of liability specified in the basic policy.

Chapter 19: Extension for winter sport

19. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.
- 19.1. Additional definitions for this chapter:
- 19.1.1. **Winter Sport:**
Skiing with skis, snowboard, sleds, snowshoeing, cross country – walk skiing) and snowmobiles, performed in a designated resort in the resort's proclaimed activity hours and in the tracks marked and designated to that end.
- 19.1.2. **Ski Pass:**
Access ticket to the cable car used to climb and descend the ski resort lifts.
- 19.1.3. **Winter Sport Equipment:**
Skis, snowboard, ski boots, ski clothes, thermal clothing, gloves.
- 19.2. **Insurer's undertaking:** the Insurer will pay the Insured Hospitalization Expenses and non-Hospitalization Medical Expenses Abroad which are covered under this Policy up to the Medical Expenses Liability Limit of \$5,000,000 (less Deductible of \$50 for non-Hospitalization Medical Expenses) as well as insurance benefits for other expenses covered under this Policy deriving from the Insured's participation in Winter Sport Abroad as well as indemnification as set forth below and stated in the Limits of Liability Table for this chapter, subject to the terms, exclusions and limits of liability indicated in the Basic Policy and in this chapter.
- 19.2.1. **Loss of ski days:** the Insurer will indemnify the Insured for expenses involved with purchase of a Ski Pass for unused days as a result of an Event sustained by the Insured up to a total amount of \$300 and subject to the Limits of Liability Table in the Policy. A deductible of \$50 will apply to this section.
- For the avoidance of doubt,** the Insurer will not pay any expenses for loss of Ski Pass days which have not been paid in advance by the Insured.
- 19.2.2. **Trip Cancellation due to lack of snow at the ski resort:** the Insurer will indemnify the Insured for Trip Cancellation to a ski resort following the decision of the authorities in the relevant country not to open the resort due to lack of snow, subject to producing to the Insurer a suitable confirmation of the competent authorities for the relevant period. The indemnification will be for payments made in advance by the Insured for a ski package for a period not less than 4 day that was purchased at least 30 days prior to the Insured's Trip, for Trip periods between the dates December 15 and March 31, for each calendar year and up to an amount of \$300 per Plane Ticket and up to an amount of \$50 per day for ground services for a Maximal Period of 6 actual ski days and subject to the Limits of Liability Table in the Policy. A deductible of \$50 will apply to this section.

19.2.3. Delay in arrival at the ski resort due to weather: in an event of a delay of more than 24 hours from the planned date in the Insured's arrival at the ski resort for the first time, which is caused as a result of entitling weather, the Insurer will indemnify the Insured for the period of delay up to an amount of \$50 per day of delay and up to a Maximal Period of delay of 6 actual ski days and subject to the Limits of Liability Table in the Policy. A deductible of \$50 will apply to this section.

Entitling weather for the purpose of this section:

Poor weather conditions due to which the Insured's arrival at the ski resort is denied in the acceptable means of transportation at the place of Event.

19.2.4. Loss of ski days as a result of closing resort closure for a period of 48 hours and more:

The Insurer will indemnify the Insured for loss of actually unused ski days as a result of closing the ski resort for a period of exceeding 48 consecutive hours caused due to an entitling event, provided that the Insured paid for a flight, stay and a Ski Pass in advance and up to an amount of \$75 per unused day following the close of the resort as aforesaid and up to maximal loss of 6 actual ski days. A deductible of \$50 will apply to this section.

It is clarified that the arrival day and departure day will not be counted in the number of days for the purpose of receiving financial compensation.

Entitling event for the purpose of this section:

Poor weather conditions that do not allow the opening of the resort for 48 consecutive hours, provided that the insurer will be presented with an appropriate certificate from the authorized authorities for not opening the site in the relevant period.

It is clarified that the Insured will not be entitled, under these circumstances, to coverage of loss of payments due to a shortened trip but only to the compensation detailed in this section.

19.2.5. Delay in arrival of Winter Sport Equipment:

The Insurer will indemnify the Insured for any delay exceeding 24 hours from the planned date in the arrival of Winter Sport Equipment caused due to the airline's negligence. Indemnification will be made against producing the airline's confirmation for the non-arrival of such equipment in full or in part. The Insurer will indemnify the Insured for renting skiing equipment for the first day only and up to an amount of \$200 out of which up to an amount of \$20 per one item and subject to the amount stated in the Limits of Liability Table in the Policy.

19.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

- 19.3.1.** The Insurer will not pay any claim(s) deriving from or relating to an Insured Event that occurred in view of or as a result of the Insured having acted in non-compliance with the safety rules of the resort or framework where there was activity and/or Winter Sport that was not performed on the designated resort and/or during the resort's proclaimed activity hours and/or in the tracks designated to that end.

The Insurer's undertaking to cover Medical Expenses under this chapter is up to the Medical Expenses Liability Limit stated in the Basic Policy which is a total amount of \$5,000,000 (less Deductible of \$50 for non-Hospitalization Expenses) and subject to the Limits of Liability Table for Chapter B in the Policy and it is included in the Insurer's undertaking (not in addition) to the Medical Expenses Liability Limit in the Basic Policy, such that the total amounts paid by the Insurer by virtue of all the chapters included in the Policy, including this chapter, will in no event exceed the limits of liability indicated in the Basic Policy.

Chapter 20: Extension for professional sport

20. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.

20.1. Additional definitions for this chapter:

20.1.1. Professional Sport (or competitive or paid):

Engaging in a sport that is not defined as an extreme sport (according to the list of extreme sports on the company's website) and which is the insured's main occupation and/or has a financial salary.

20.2. Insurer's undertaking: The insurer will pay the insured hospitalization expenses, medical expenses and insurance benefits for other expenses, which result from the insured's participation in a professional sports activity as defined above, performed abroad only, covered by the basic policy. This, subject to the conditions, definitions, exceptions and limits of liability specified in the basic policy. The purchase of this extension does not constitute a waiver of the license and/or permit required by the very performance of the sport in that country.

It is clarified that an Insured Event that derives from professional sport activity will not be covered if the Insured did not have a valid license and/or permit for performing that sport as required in that country Abroad when performing the activity.

20.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to:

20.3.1. Winter sport (as defined in Section 19.1.1 hereunder) including winter skiing and/or snowboard and/or toboggan and/or snowmobiles unless an extension for winter sport was purchased for extra insurance premium.

20.3.2. Participation of the insured in extreme sports, including if an extension was purchased for amateur extreme sports.

The Insurer's undertaking under this chapter is up to the limit of liability stated in the Basic Policy for Medical Expenses which is a total amount of \$5,000,000 less Deductible of \$50 for this chapter, and subject to the Limits of Liability Table for Chapter B in the Policy and it is included in the Insurer's undertaking (not in addition) to the Medical Expenses Liability Limit in the Basic Policy, such that the total amounts paid by the Insurer by virtue of all the chapters included in the Policy, including this chapter, will in no event exceed the limits of liability indicated in the Basic Policy.

Chapter 21: Extension for loss or theft of a laptop/tablet

21. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.
 - 21.1. Insurer's undertaking: the Insurer will indemnify the Insured for the loss (permanently lost and untraceable) or theft of a laptop/tablet Abroad within the Period of Insurance and provided that the Insured purchased the laptop/tablet prior to the beginning of the Period of Insurance. (In any other case the coverage will be in accordance with Chapter 14 - Extension for Luggage, if purchased - sections 14.4.1 - 14.4.2).
 - 21.2. The amount of indemnification will as specified in the Limits of Liability Table in the Policy but not more than the real value of the laptop (less wear and tear as defined in the Luggage chapter) and less a Deductible of \$100.
 - 21.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:
The Insurer will not pay any claim(s) deriving from or relating to:
 - 21.3.1. Confiscation and/or expropriation of the laptop/tablet.
 - 21.3.2. Damage of any kind, direct or consequential, to the laptop/tablet.
 - 21.3.3. Loss or theft or damage to one or more software, whether or not they are part of the laptop.
 - 21.3.4. A loss caused by the gross negligence of the insured which fully contributed to the occurrence of the insured event, or failure to take measures to prevent, reduce or return it.

The Insurer's undertaking under this chapter is up to an amount of \$2,000 (less Deductible of \$100) and subject to the Limits of Liability Table.

It will be clarified that the conditions, including the exceptions detailed in Chapter 14 - the baggage chapter, also apply to this chapter.

Chapter 22: Extension for loss or theft of a cellular phone

22. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.

22.1. Insurer's undertaking: the Insurer will indemnify the Insured in the event of loss (permanently lost and untraceable) or theft of the cellular phone carried by the Insured when leaving Israel Abroad and provided that the loss/theft of such phone occurred Abroad within the Period of Insurance.

22.2. The amount of indemnification paid by the Insurer to the Insured will as specified in the Limits of Liability Table in the Policy but not more than the real value of the cellular phone and less a Deductible of \$200.

The Insurer's undertaking under this chapter is up to an amount of **\$750** (less Deductible of **\$200**) and subject to the Limits of Liability Table.

It will be clarified that the conditions, including the exceptions detailed in Chapter 14 - the baggage chapter, also apply to this chapter.

22.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

22.3.1. Confiscation and/or expropriation of the cellphone.

22.3.2. Damage of any kind, direct or consequential, to the cellphone.

22.3.3. A loss caused by the gross negligence of the insured which fully contributed to the occurrence of the insured event, or failure to take measures to prevent, reduce or return it.

Chapter 23: Extension for 2 wheel bicycle (up to 90 days) - total loss or theft or damage exceeding 50%

23. Provided that this coverage was purchased for extra premium, and this was explicitly indicated on the Schedule.

23.1. Additional definitions for this chapter:

23.1.1. Bicycle:

Bicycle according to Israeli standards which is ridden by the Insured and has no motor, provided that the bicycle was purchased in Israel or was imported to Israel before the Insured's went Abroad.

23.1.2. Appraiser's Evaluation:

An evaluation given to the Insured up to one month at the most prior to the beginning of the insurance to which an updated photo of the Bicycle was attached or an evaluation given after the overall loss of the bicycle or damage above 50% as detailed in Section 23.1.3 hereunder.

23.1.3. Bicycle Total Loss or Damage Exceeding 50%:

Bicycle which is out of order as a result of an Insured Event covered under this chapter which, according to an Appraiser's Evaluation, cannot be fixed in Israel at a lower cost than 51% of its value (as its value will be determined by the Appraiser).

23.1.4. Loss:

Lost, not found. Damage or total loss to the bicycle will not be covered in this section.

23.2. Provisions regarding Appraiser's Evaluation:

23.2.1. The Insured may disagree with the Appraiser's Evaluation and present a counter evaluation.

23.2.2. An Appraiser's Evaluation up to \$100 will be at the Insurer's account.

23.3. **Insurer's undertaking:** the Insurer will indemnify the Insured for an Event that occurred to the Bicycle Abroad according to the following specification. In an event of Total Loss, the Insurer will pay the real financial value of the Bicycle as it was shortly before the occurrence of damage.

23.3.1. **Insured Bicycle Total Loss or Damage Exceeding 50%** which occurs in the course of the Insured's ordinary use (when it was not in possession of a carrier) and subject to the following accumulative conditions:

23.3.1.1. The Bicycle was used during the hours of darkness when it was equipped with functioning light and reflectors.

23.3.1.2. The Insured produced a Police confirmation at the place of Event Abroad as to the accidental event caused to the Bicycle.

23.3.1.3. The loss or damage was not caused as a direct or indirect result of the Insured's deliberate action.

23.3.1.4. Not more than one person rode the Bicycle at the same time.

23.3.1.5. The Insured produced a Police confirmation, if available, at the place of Event Abroad as to the Bicycle Total Loss of the Bicycle.

- 23.3.2. **Theft of Bicycle** subject to the following accumulative conditions:
- 23.3.2.1. At the time of theft the Bicycle was locked and tied by means of a chain and lock anchored to the ground or to a wall or was in a private place whose openings are closed and locked.
 - 23.3.2.2. The Insured produced a **Police confirmation** at the place of Event Abroad as to the theft of the Bicycle including its whereabouts at the time of theft.
 - 23.3.2.3. If the stolen Bicycle had been found before the insurance benefits were paid for it under this chapter, the Bicycle will be given back to the Insured and the Insurer will not pay insurance benefits, unless Total Loss or Damage Exceeding 50% has been caused to the returned Bicycle.
 - 23.3.2.4. If the stolen Bicycle was found after the insurance benefits had been paid for them, the Bicycle will transfer to the Insurer's ownership.
- 23.3.3. **Insured Bicycle Total Loss as a result of an Accident to a carrier** that occurred in the course of carrying the Bicycle in or on a vehicle, and subject to the following accumulative conditions:
- 23.3.3.1. The transportation through the vehicle was performed by means of a dedicated rack with the Bicycle anchored according to the rack manufacturer's instructions.
 - 23.3.3.2. The Insured produced a **Police confirmation** at the place of Event Abroad as to the accidental Event that occurred to the carrying vehicle.
 - 23.3.3.3. The Insured produced a notice delivery confirmation to the carrier – an Insured who fails to do so will be entitled to insurance benefits at the rate of the difference between the refund that he could have received from the carrier and the cover overhead for this section.
 - 23.3.3.4. **Damage from Accident or theft to Bicycle in possession of an air carrier**, subject to Deductible of \$1,000 and subject to the following accumulative conditions:
- 23.3.3.4.1. The transportation through the vehicle was performed by means of a dedicated rack, as required, with the Bicycle anchored according to the rack manufacturer's instructions.
 - 23.3.3.4.2. The Insured produced a notice delivery confirmation to the carrier – an Insured who fails to do so will be entitled to insurance benefits at the rate of the difference between the refund that he could have received from the carrier and the cover overhead for this section.

Any amount paid to the Insured from any other body as well as Deductible of \$1,000 from the carrier as stated in Section 23.3.4 will be deducted from the amount of indemnification under Sections 23.3.1 - 23.3.4.

- 23.3.4. The Insured will inform the carrier that has the Bicycle in its possession of a damage resulting from an Accident or theft shortly after the occurrence of the Insured Event.
- 23.3.5. The cover under Sections 23.3.1, 23.3.3 and 23.3.4 is upon the condition that the Insured returned the Bicycle to Israel (unless he has no option to return the Bicycle in which case he will forward photos and the authorities' report due to the Event) and present an Appraiser's Evaluation to the Insurer.
- 23.3.6. Other exclusions for this chapter in addition to the exclusions of the Basic Policy:

The Insurer will not pay any claim(s) deriving from or relating to:

- 23.3.6.1. Bicycle Total Loss as a result of using the Bicycle during a race.
- 23.3.6.2. Bicycle Total Loss as a result of extreme activity, including cross country (CX) which is also called Mountain Bike sport (MTB), All Mountain (AM) or Enduro, Down Hill (DH), Free Ride (FR), jumps and/or acrobatic stunts.
- 23.3.6.3. Any Bicycle Damage including natural wearing down, depreciation, wear and tear, breakdowns of any kind, except for damage due to which total loss is caused as specified in Section 23.3.1.
- 23.3.6.4. Bicycle Total Loss as a result of drug or alcohol abuse.
- 23.3.6.5. Riding Bicycle not in paved roads or leveled dirt roads.
- 23.3.6.6. Damage that occurred to the Bicycle prior to the purchase of this extension as a result of which the value of Bicycle has decreased.

23.4. Insurance benefits and Deductible:

The insurance benefits will be up to the amount stated in the Limits of Liability Table in this Policy according to the purchased amount indicated on the Schedule and less Deductible as specified in the Limits of Liability Table in the Policy.

The Insurer's undertaking under this chapter is up to an amount of \$2,500 or \$4,500 or \$6,000 according to the purchased amount indicated on the Schedule (less Deductible for Total Loss \$50, theft \$250, damage or theft when in possession of an air carrier \$1,000) and subject to the Limits of Liability Table.

Chapter 24: Extension for cancellation of Deductible in case of accidental damage to a hired car/caravan Abroad (to a driver between 24 to 75 years of age)

24. Provided that this cover was purchased for extra premium and this was explicitly indicated on the Schedule.

24.1. Additional definitions for this chapter:

- 24.1.1. Insured:** the Insured as defined in the Policy and provided that his name is listed in the rental agreement with the rental company.
- 24.1.2. The Car Rental Agreement:** a car rental agreement Abroad signed between the Insured and a car rental company.
- 24.1.3. Deductible for Rental:** the Insured' share in the expense for theft or damage caused to a vehicle in accordance with a Car Rental Agreement.
- 24.1.4. Vehicle:** a private or commercial vehicle.
- 24.1.5. Caravan:** a motored caravan with a composite body constituting a Vehicle in itself.

24.2. Insurer's undertaking:

The Insurer will indemnify the Insured for Deductible actually borne by the Insured up to a maximal amount of \$1,500 borne or ought to be borne by the Insured in accordance with the Car Rental Agreement, in the event of accidental damage to property that occurred to a Vehicle or Caravan Abroad or in the event of accidental damage to a third party's property as a result of using a Vehicle or Caravan Abroad, which occurred during the Period of Insurance.

The Insured's undertaking under this chapter is up to an amount of \$1,500 and subject to the Limits of Liability Table.

24.3. Other exclusions for this chapter in addition to the exclusions of the Basic Policy: The Insurer will not pay any claim(s) deriving from or relating to:

- 24.3.1. Consequential damage of any kind.**
- 24.3.2. Use of a Vehicle and/or Caravan when the driver had no valid license for the country of Event. In the event that in the country of Event there is no need for a valid license for the relevant Vehicle, cover will only be given under this plan if the Insured had a valid Israeli and/or international license for the type of Vehicle he drove.**
- 24.3.3. Loss or theft or damage to property that was in the Vehicle and/or Caravan including property rented from the Rental Company such as baby safety seat, GPS etc.**
- 24.3.4. Mechanical problem in the Vehicle and/or Caravan, damage to tires except if those have been damaged as a result of an accidental event.**
- 24.3.5. Use of a Vehicle and/or Caravan in contravention of the provisions of the Rental Agreement.**
- 24.3.6. Driving of the Insured or the person licensed to driver under the influence of drugs.**

- 24.3.7. Use of the Vehicle and/or Caravan for competition purpose of any kind.
- 24.3.8. Malice and/or crime and/or misdemeanor committed by the renter and/or driver.
- 24.3.9. Use of the Vehicle and/or Caravan not in a paved dedicated road for the use of all types of vehicles.

24A: Increased reimbursement for cancellation of deductible:

Provided that this chapter to cancel an increased deductible in the event of accidental damage to a car/caravan rented abroad is purchased (for a driver from the age of 24 to the age of 75) in exchange for additional insurance premiums, and this is explicitly stated on the Schedule - the insurer's undertaking will be according to what is stated in Section 24.2 above up to a total of \$6,000 and subject to what is specified in the table of liability limits. Also, in this case, exception 24.3.9 above will not apply regarding the use of a vehicle and/or trailer vehicle on an unpaved road.

Chapter 25: Extension to personal accident insurance - compensation for death or disability, burns or fractures or hospitalization as a result of an accident abroad (up to age 70)

25. Provided that this coverage was purchased for an extra premium, and this was explicitly indicated on the Schedule.

25.1. Additional definitions for this chapter:

25.1.1. Accident:

A sudden event that happened abroad, which was not planned by the insured and caused him to have an insurance event that is covered in this appendix, with the exception of an insurance event caused as a direct result of illness.

25.1.2. Disability:

Permanent medical disability.

25.1.3. Absolute disability:

Complete loss of an organ from the body due to its separation from the body or complete loss of its ability to function.

25.1.4. A disability that is not absolute:

Damage to an organ of the body without separating it from the body or without a complete loss of its ability to function.

25.2. Insurer's undertaking:

In respect of the insurance cases detailed below and provided that they occurred due to an accident abroad, the insurance benefits will be paid as follows:

25.2.1. Death from an accident abroad - An accident that occurred abroad and resulted directly in the death of the insured, provided that the death did not occur more than 3 years after the date of the accident. In this case, one-time compensation will be paid in the amount of the full insurance amount of \$40,000 as specified in the table of liability limits. Insurance benefits for the death of the insured will be paid to the insured's legal heirs.

25.2.2. Disability from an accident abroad - if total disability or disability that is not total occurs, which occurred as a direct result of an accident that occurred abroad, insurance benefits will be paid as detailed below:

25.2.2.1. When an insurance case of disability in one of the body organs occurs, the company will pay the insured insurance benefits which will be calculated as a direct multiple of the qualifying disability rate determined for the insured as detailed in the Section 25.2.2.2 below, in the full insurance amount for this coverage as detailed in the liability limits table, whether it is one or more insurance cases.

25.2.2.2. The degree of disability that qualifies for compensation will be determined by a specialist physician in accordance

with the provisions of Regulation 11 only, of the National Insurance Regulations (Determining the Degree of Disability for Work Injuries), 2017-195.

Example: A total disability of 40% of the leg was determined for the insured by a specialist doctor according to Regulation 11 as mentioned above, and the maximum insurance amount stated in the table of liability limits for disability from an accident is \$40,000. The insurance benefits will be calculated in this case as follows: $40\% \times \$40,000 = \$16,000$.

- 25.2.2.3. If the insured has a claim as a result of the insurance event from the National Insurance Institute - Department of Work Injuries as well, the National Insurance Institute's determination regarding the extent of the insured's medical disability resulting from the insured event shall also bind the parties to this policy. It will be emphasized that the determination of the National Insurance Institute for Work Injuries Department will prevail over the decision of the occupational doctor or a specialist in the field of injury, whether it benefits the insured or not.
- 25.2.2.4. The disability that exists (or was determined) before the start of the insurance will be deducted from the percentage of the disability that qualifies for payment according to this Chapter 24.

- 25.2.2.5. Special exceptions to insurance coverage for total disability from an accident:

- 25.2.2.5.1. The insured will not be entitled to receive insurance benefits if his disability was caused by medical or surgical treatment, provided that the insured was aware of the specific risk from which the disability was caused, prior to the medical or surgical treatment (for example, by way of consent to the treatment).

- 25.2.2.5.2. The insured will not be entitled to receive insurance benefits for mental disability. This is except if there was an accident that resulted in a physical disability (complete or not complete) with a disability rate of over 15%, and in addition to that a mental disability was also caused.

The full insurance amount according to this Section 25.2.2 is \$40,000.

25.2.3. Fractures from an accident abroad

Additional definitions for this section:

Fracture - damage to the integrity of the bone, with or without a change in its original shape, except for a self-inflicted fracture, provided that the existence of the damage was proven by X-ray or

CT or MRI only. For the avoidance of doubt, bone mapping and/or any other test, with the exception of those detailed in this section, will not constitute proof of the existence of a fracture.

Hand - each of the two upper limbs of the person (not including the palm and the wrist). Each bone of one hand will be considered as one bone.

Palm - the bones of the fingers, the metacarpal. All the bones of the hand will be considered as one bone.

Wrist - all the bones of the wrist (carpus) will be considered as one bone.

Shoulder - each of the bones of the human back which will be considered as one bone.

Leg - each of the two lower limbs in the human body that are used for walking (not including fractures in the ankle, the foot, the bones of the comb and the toes). Each bone of one leg will be considered as one bone.

Foot - the bones of the foot, the bones of the comb, and all the toes which you will consider as one bone. Not including the dome of the talus.

Ankle - a joint consisting of the distal part of the tibia and the talus bone. All fractures in the distal tibia that are intra-articular [including hammertoes] will be considered as one bone.

Skull - all the bones of the skull and face (not including the bones of the nose and teeth) which will be considered as one bone.

Pelvis - all the bones of the pelvis which will be considered one bone.

Chest - the ribs, sternum and collarbone, which will be considered as one bone.

Vertebral arch - the transverse cam, the spinous cam and the plate (lamina) will be considered as a vertebral arch. Several fractures in one or several vertebrae will be considered as one fracture for the purposes of the insurance plan.

Vertebral body - any fracture of a vertebra, which is not in the vertebral arch, will be considered a vertebral body. Several fractures in one or several vertebrae will be considered as one fracture for the purposes of the insurance plan.

25.2.3.1. Fracture from an accident abroad:

In the event of an accident abroad, which within three months of the date of occurrence caused a fracture to the insured in the organs listed in the table only, the company will pay the insured insurance benefits at the rate specified in the table below in relation to the organ in which the fracture occurred, out of a maximum insurance amount of \$1,000 to cover fractures due to an accident as stated in the table of liability limits

The limb in which the accidental fracture occurred:	% of insurance sum
Vertebra - a vertebral body (except the coccyx)	100%
Pelvis	100%
Skull	35%
Chest	35%
Shoulder	35%
Hand	35%
Leg	35%
Vertebra - vertebral arch (except the coccyx)	35%
Wrist	10%
Ankle	10%
Tail bone	10
Hand	3%
Foot and one or more fingers	3%
Nose	3%

For the avoidance of doubt, it is clarified that you will not be entitled to receive insurance benefits for fractures that do not originate in an accident, including the following fractures:

- Pathological fractures - due to a disease process located under the bone such as a tumor, cyst, infection, etc.
- Stress fractures and/or walking fractures - due to repetitive processes of compression and/or tension.
- Insufficiency fractures - the thinning of the bone and a decrease in its mechanical strength due to diseases such as calcium leakage, rickets, a defect in the process of creating and building the bone.
- A self-inflicted fracture

25.2.3.2. Special restrictions and exceptions for fractures

It is hereby clarified that if due to an accident several fractures were caused in the same limb - for example several fractures in the hand or a fracture in several fingers in the same palm, the insured will be entitled to only one payment of insurance benefits (according to the rate of the insurance amount for a fracture in only one limb out of the insurance amount for this coverage stated on the insurance details page), for that limb, as if only one fracture had occurred.

25.2.3.2.1. If a fracture occurs in more than one limb as a result of the same accident, the insurance sums for the fractures in the various limbs will be added as stated in the above table, provided that the total amount of the insurance benefits for all the fractures does not exceed the insurance amount specified in the table of liability limits for that insured for this coverage.

25.2.3.2.2. The company will not be liable and the insured will not be entitled to receive insurance benefits for fractures caused to the insured by or as a result of an illness or an ongoing gradual process

25.2.4. Burns from an accident abroad

25.2.4.1. Additional definitions for this chapter:

Burn - a wound/burn in the skin of the body caused by contact with fire or a boiling substance.

Second degree burn - a burn whose damage extends beyond the outer skin layer (epidermis) that forms blisters.

Third degree burn - a burn resulting in the destruction of the full thickness of the skin.

25.2.4.2.

The extent of the burn in relation to the total shell area of the body	Second degree burn	Third degree burn
28% - 100%	50%	100%
20% - 27%	40%	80%
10% - 19%	30%	60%
4.5% - 9%	10%	20%

Example: The insured has a second degree burn with a 30% burn area and the maximum insurance amount stated on the burn insurance details page is \$1,000, the insured will receive in this case: $50\% \times \$1,000 = \500 .

For the avoidance of doubt, a burn of less than 4.5% does not qualify for insurance benefits under this extended coverage.

The calculation of the area of the burn will be done according to the accepted methods: the method of ninths or a percentage of the surface area of the body (bsa).

It is clarified that the diagnosis and determination of the severity of the burn and its scope according to this part, will be done by a specialist surgeon or plastic surgeon who examined the insured.

- 25.2.4.3. Double compensation for an insurance case under this insurance coverage in the event of a burn on the face of the insured - if a burn occurs that qualifies for compensation according to what is stated in Section 25.2.4.2 above, in which the insured is burned on his face, the insured will be entitled to additional compensation beyond what is stated in Section 25.2.4.2 above, in the amount of the compensation specified in Section 25.2.4.2 above.
- 25.2.5. Daily compensation for hospitalization abroad due to an accident abroad
- Additional definitions for this chapter:**
- Waiting period** - a period of 2 days starting from the first day the insured was hospitalized, for which reason the insured will not be entitled to receive any daily compensation.
- Hospitalization period** - a continuous period during which the insured was hospitalized abroad only, and which begins on the day after the end of the waiting period and ends with the release of the insured from hospitalization abroad or at the end of 16 weeks, whichever comes first.
- 25.2.5.1. Hospitalization abroad following an accident abroad
- When an accident occurs abroad as a result of which the insured is hospitalized in a hospital abroad, the company will pay the insured the amount of daily compensation in the amount of **\$100 per day** during the period of hospitalization in a hospital abroad, or in another medical institution abroad if he was discharged from the hospital for hospitalization in another medical institution abroad, including a nursing institution abroad or a rehabilitation institution abroad.
- 25.2.5.2. In any case, the insured will not be entitled to receive insurance benefits for a period of hospitalization abroad due to an accident that exceeds 180 days.
- 25.2.5.3. For the avoidance of doubt, it is hereby clarified that compensation is paid only for days of hospitalization abroad directly following the accident covered by this policy and not for continued hospitalization in Israel.
- 25.3. Additional exceptions to this personal accident insurance chapter, in addition to the existing exceptions in the basic policy:

In addition to the special exceptions specified in the coverage details in this chapter and in addition to the exceptions that exist in the basic policy, the insurer will not pay insurance benefits according to this chapter to a claim arising from or related directly or indirectly by or due to or as a result of one or more of the events/circumstances below:

- 25.3.1. Sports activity within a registered sports association according to the Sports Law, 1988 and/or competitive sports activity and/or professional

- sports activity (which constitutes one's main occupation or has a financial salary alongside).
- 25.3.2. Participation of the insured in extreme sports according to the list that appears on the insurer's website, unless an extension for extreme sports activities has been purchased. For this matter, extreme sports refer to sports that are considered dangerous and include/require, among other things, high levels of difficulty and/or physical effort from those who engage in them. The list of challenging sports will be updated from time to time according to the list that appears on the insurer's website www.harel-group.co.il.
 - 25.3.3. Winter sport activity.
 - 25.3.4. Riding a two-wheeled vehicle, either as a driver or as a passenger, even if the driver held an appropriate and valid driver's license at the time of the accident.
 - 25.3.5. Riding an electric bicycle and/or an electric scooter and/or a Segway and/or another means of transportation with an electric motor, either as a driver or as a passenger.

Extension to cover personal accidents - cancellation of the exception for amateur extreme sports, for an accident abroad:

25.4. Provided that an expansion for personal accident insurance was purchased and an expansion for personal accident coverage was also purchased - cancellation of the exception for amateur extreme sports, for an accident abroad for additional insurance fees, and this was specifically stated on the list page.

The insurer's undertaking: despite what is stated in exception 25.3.2 above, if an insurance case occurs as defined in **Section 25.2 above**, coverage will be provided according to the insurer's undertaking as defined in section 25.2 above, in the event of an accident that occurred abroad due to the insured's participation in an amateur extreme sports activity - which is not the main occupation of the insured, according to the list of extreme sports that appears on the insurer's website www.harel-group.co.il. It will be clarified that no coverage will be provided by virtue of this expansion for medical expenses or any other coverage that exists in the basic policy or in one of the expansions to the policy, except for coverage and insurance cases as defined in Section 25.2 above.

It will be clarified that to the extent that the relevant branch or type of extreme sport requires a license and/or permit for performance, the insured will be entitled to insurance coverage for an insurance event caused as a result of that branch/type of extreme sport, only if he held the said license or permit in effect at the time the insured event occurred.

It will be clarified that the purchase of the expansion to cancel the extreme sports exception for amateurs abroad according to this chapter, refers only to the coverage of personal accidents and does not constitute the purchase of extended coverage for extreme sports as mentioned in Chapter 18 above.

Contact Centers if Necessary

In any case of a claim, contact Harel Insurance Company Ltd., as follows:

For coverage in case of an emergency (hospitalization abroad) you can contact:

The emergency center **24 hours a day, 7 days a week, by phone: 972-3-7547030**

WhatsApp service center - **052-7544589**

Harel 669 Center

Below are the telephone, hotline, fax and e-mail numbers:

E-mail **669@harel-ins.co.il**

Harel 669 tel.: **972-3-7547669**

Harel 669 fax: **972-3-7348484**

Filing a claim in Israel should be addressed to:

Foreign Claims Department

Abba Hillel St., PO Box 10951 Ramat Gan

In any case, you can contact "Harel" by tel.: **03-7547080**

Claims department fax: **972-3-7348168**

Email: **tvioth@harel-ins.co.il**

Contact Information

Harel Service Center

- 📍 3 Abba Hillel St., Harel House
P. O. Box 10951, Ramat Gan 5252202
- ☎ 03-7547080
- ⌚ Sundays to Thursdays,
from 08:00 to 16:00

The Harel Website
www.harel-group.co.il

