

### Getting your children home (return of dependents)

If **you're** told **you** will be hospitalized for more than seven days during **your trip**, **we'll** arrange for and pay (less any **refunds** for unused tickets) to transport **your** children under the age of 23 who are traveling with **you** to one of the following:

- **your primary residence**; or
- a location of **your** choice in the United States.

Transportation will be on a **common carrier** in the same class of service they were originally booked.

### Transporting your remains (repatriation of remains)

**We'll** arrange and pay for the reasonable and necessary services to transport **your** remains to one of the following:

- a funeral home near **your primary residence**; or
- a funeral home located in the United States.

**We'll** also assist the sending and receiving funeral homes coordinate with each other.

This benefit does not include funeral, burial or cremation expenses or related containment expenses for items such as a coffin, urn or vault.

**Your** representative must contact **us** in advance to make these arrangements. If this is not possible, **your** representative must contact **us** within a reasonable time, but no later than one year after the transportation.

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## Flight accident coverage

### When it applies

**You're** in an **accident** on an airplane that results in:

- **your** death.
- total and permanent loss of sight in one or both of **your** eyes.
- permanent loss of one or both of **your** hands or feet when they are severed at or above the wrist or ankle.

Specific requirements: (all must apply)

- **You** are a ticketed passenger on a regularly scheduled airline operating a certified passenger aircraft;
- The **accident** happens while **you're** boarding, traveling in or disembarking from the plane; and
- The loss is a direct result of the **accident** and happens within 365 days of the **accident**.

### What it covers

Please refer to **your letter of confirmation** to confirm **your** coverage and limits in **your plan**.

#### *Death benefit*

In the event of **your** death, **we** will pay 100% of the flight accident benefit shown on **your letter of confirmation**.