



HCC Medical  
Insurance Services  
Lloyd's Coverholder



# coverage around the *world*

Distributed by:

**GOOD NEIGHBOR INSURANCE, INC.**

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Gilbert, AZ 85296

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<http://www.missionaryinsurance.info>



*families*



*missionaries*



*corporate groups*



*student groups*

**daytripper**

# Coverage Around the World with Day Tripper Group Travel

## See the World, Don't Carry It On Your Shoulders

With medical coverage from 5 days to 12 months, *Day Tripper Group Travel* from HCC Medical Insurance Services (HCCMIS) is with you almost anywhere on the planet you may travel with a group of 5 or more for mission trips, large family vacations, student groups abroad, corporate groups, and overseas excursions for other large organizations.



Johannesburg, South Africa



Toberua Island Fiji

## Why choose Day Tripper Group Travel?

Whatever the reason, traveling internationally with a large group should be a pleasant experience. Emergencies and complications such as natural disasters, injury, or illness are a fact of life, and can be even tougher to manage if it is for a large group of people. While we hope none of these happen, we're here to help if they do. For your peace of mind, coverage for medical expenses in case of hospitalization, while in an intensive care unit, outpatient treatment, emergency medical evacuation, and loss of checked baggage, *Day Tripper Group Travel* has benefits you can count on.

## My family has medical insurance in our home country; do we need group travel medical insurance?

Many times the primary medical insurance in your home country will not cover you and your family while traveling abroad. *Day Tripper Group Travel* includes essentials such as translation assistance while being treated, doctor and hospital referrals, and assistance replacing lost prescriptions.

Additionally, medical costs can be very expensive while abroad. Past clients have encountered over **\$68,000** in medical expenses from an emergency medical evacuation alone. With *Day Tripper Group Travel* plans starting at less than **\$1 a day** (per person), can you afford not to have coverage?

## After purchasing coverage, how can I trust the company to be there if I need them?

**Security Matters!** - Day Tripper Group Travel is underwritten by Syndicate 4141 at Lloyd's, London. Lloyd's provides accident and health insurance to more than 1,000,000 people in over 100 countries. Lloyd's currently enjoys an A+ (Strong) rating from Standard & Poor's and is highly qualified to protect you on your next international trip.

**Your Time Matters!** - Manage your account, renew coverage, file claims, locate healthcare providers, and more – all online – with Client Zone. Or call HCCMIS's World Service Center from many countries around the world collect or toll-free.

So get out and see the world with Day Tripper Group Travel from HCCMIS by your side. It's health coverage around the world.

For more information about Day Tripper Group Travel, please contact:



## GOOD NEIGHBOR INSURANCE, INC.

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<http://www.missionaryinsurance.info>

# Did you think about...?



## Snake Bite

They're not cute or cuddly, and they're not kidding.

Treatment: **\$25,730\***

Travel Medical Coverage: **starting under \$1/day per person**

\*This amount is an example of an actual claim handled by HCCMIS. Coverage for similar claims is not to be inferred as all claims are unique.

Punta Cana, Dominican Republic

## Schedule of Benefits

Benefit	Limit
Deductibles	\$0, \$100, \$250, \$500, \$1,000 or \$2,500 per Certificate Period
Coinsurance – Claims incurred in US or Canada	For the Certificate Period, Underwriters will pay 80% of the next \$5,000 of Eligible Expenses after the Deductible, then 100% to the Overall Maximum Limit. Coinsurance will be waived if expenses are incurred within the PPO and expenses are submitted to Underwriters for review and payment directly to the provider
Coinsurance – Claims incurred outside US or Canada	For the Certificate Period, Underwriters will pay 100% of Eligible Expenses after the Deductible up to the Overall Maximum Limit
Hospital Room and Board	Average Semi-private room rate, including nursing services
Local Ambulance	Usual, Reasonable and Customary charges, when covered Illness or Injury results in hospitalization as Inpatient
Intensive Care Unit	Usual, Reasonable and Customary charges
Hospital Indemnity	\$100 per day of Inpatient hospitalization (not subject to Deductible or Coinsurance)
Physical Therapy	\$50 Maximum per visit
All Other Eligible Medical Expenses	Usual, Reasonable and Customary charges
Acute Onset of Pre-existing Condition	\$15,000 Lifetime Maximum for Eligible Medical Expenses \$25,000 Lifetime Maximum for Emergency Medical Evacuation Only available to Members under age 70
Emergency Dental (Acute Onset of Pain)	\$100 limit per Certificate Period (not subject to Deductible or Coinsurance)
Emergency Medical Evacuation	\$500,000 Lifetime Maximum, except as provided under Acute Onset of Pre-existing Condition (not subject to Deductible or Coinsurance)
Return of Minor Children	\$5,000 per Certificate Period (not subject to Deductible or Coinsurance)
Repatriation of Remains	Overall Maximum Limit (not subject to Deductible or Coinsurance)
Emergency Reunion	\$15,000 limit per Certificate Period, subject to a maximum of 15 days (not subject to Deductible or Coinsurance)
Natural Disaster	Maximum \$100 a day for 5 days (not subject to Deductible or Coinsurance)
Trip Interruption	\$5,000 limit per Certificate Period (not subject to Deductible or Coinsurance)
Lost Checked Luggage	\$250 limit per Certificate Period (not subject to Deductible or Coinsurance)
Political Evacuation	\$10,000 Lifetime Maximum (not subject to Deductible or Coinsurance)
Terrorism	\$50,000 Maximum Lifetime Limit, Eligible Medical Expenses only.
Accidental Death and Dismemberment (excludes loss due to Common Carrier Accident) Members age 18 and older	Not subject to Deductible or Coinsurance Lifetime Maximum - \$25,000 Death - \$25,000 Loss of 2 Limbs - \$25,000 Loss of 1 Limb - \$12,500 Benefits reduce 50% at age 70 and an additional 50% at age 75.
Members under age 18	Lifetime Maximum - \$5,000 Death - \$5,000 Loss of 2 Limbs - \$5,000 Loss of 1 Limb - \$2,500  \$250,000 Maximum Benefit any one family
Common Carrier Accidental Death Members age 18 and older	Not subject to Deductible or Coinsurance \$50,000 per Member
Members under age 18	\$25,000 per Member  Subject to a Maximum of \$250,000 any one family
Hospital Pre-certification Penalty	50% of Eligible Medical Expenses
Optional Sports Rider	Overall Maximum Limit
Maximum per Injury / Illness	Age 80 or older: \$10,000. Age 70 to 79: \$50,000. All others: \$50,000, \$100,000, \$200,000, \$500,000 or \$1,000,000
Overall Maximum Limit per Certificate Period (includes all benefits except Accidental Death and Dismemberment, Emergency Medical Evacuation and Common Carrier Accidental Death)	Age 80 or older: \$10,000. Age 70 to 79: \$50,000. All others: \$50,000, \$100,000, \$200,000, \$500,000 or \$1,000,000

# What's covered by Day Tripper Group Travel?

## International Coverage

### Emergency Medical Evacuation and Emergency Reunion

- Would you know what to do if you found yourself in a life-threatening situation far from home? HCCMIS is experienced in arranging emergency medical evacuations. Day Tripper Group Travel will cover the necessary expenses to transport the member to the nearest medical facility qualified to treat the life-threatening condition. We also understand the importance of family support in these difficult situations. Day Tripper Group Travel will also cover the transportation, lodging and meal costs for a relative to join the member after an emergency medical evacuation.

**Repatriation of Remains** - What would your family do if disaster strikes while you are away from home? The death of a loved one is never easy, no matter the circumstances. In the unfortunate event of a member's death while traveling abroad, Day Tripper Group Travel will arrange for and cover the costs associated with the repatriation of his or her remains.

**Hospital Indemnity** - If you are hospitalized, the world around you does not stop. What's more, in some places hospitals do not provide their patients basic necessities like meals, toothpaste or soap. If a member is hospitalized as an inpatient for treatment of a covered illness or injury, Day Tripper Group Travel will provide \$100 for each night spent in the hospital.

**Trip Interruption** - One of a traveler's biggest worries is the safety of his or her home while away. If you learn that a catastrophic event like a tornado, hurricane or flood has caused severe damage to your home while traveling abroad, Day Tripper Group Travel will cover the cost of a one-way, economy class ticket to the airport nearest your home.

## Home Country Coverage

**Incidental Home Country Coverage** - Day Tripper Group Travel will provide you 15 days of incidental coverage for trips to your Home Country for every 3 months of coverage purchased. Incidental visit time must be used within the three-month period earned, and you must continue your international trip in order to be eligible for this benefit, which covers medical expenses only. Return to your Home Country must not be taken for the purpose of obtaining treatment of an illness or injury that began while traveling.

**Benefit Period Medical Coverage** - A Benefit Period begins on the first day you receive medical attention for a covered illness or injury, either in the form of diagnosis or treatment, while you are outside of your home country, and it lasts 180 days. If your coverage terminates during a Benefit Period, Day Tripper Group Travel will continue to cover you for the duration of the Benefit Period for eligible medical expenses only that directly relate to the covered condition for which the Benefit Period began, whether you are abroad or in your home country.

**End of Trip Home Country Medical Coverage** - If you are covered under Day Tripper Group Travel and outside of your Home Country continuously (except for covered Incidental Trips as described above) for six (6) months or more you may purchase an additional 30 days of End of Trip Home Country Medical Coverage

**Home Country Defined** - If you are a US citizen, your Home Country is the United States, regardless of the location of your principal residence. If you are not a US citizen, your Home Country is the country where you principally reside and receive regular mail.

## Other quality benefits offered by Day Tripper Group Travel:

**Return of Minor Children** - If a member of your group is expected to be hospitalized for more than 36 hours due to a covered injury or illness and covered children under 18 years of age will be left unattended as a result, Day Tripper Group Travel will cover the transportation cost for the children to return home.

**Complications of Pregnancy** - Day Tripper Group Travel offers coverage for Complications of Pregnancy during the first 26 weeks of gestation.

**Terrorism** - In these turbulent times the risk of a terrorist attack is a reality. If you are in the wrong place at the wrong time, Day Tripper Group Travel offers coverage against medical expenses resulting from these acts.

**Political Evacuation** - If, during the coverage period and after your arrival, the United States government issues a travel warning for your destination country, Day Tripper Group Travel will coordinate your alternate departure arrangements from that country and cover the associated costs.

**Hospitalization & Outpatient Treatment** - If a covered illness or injury requires hospitalization, the plan provides coverage for costs associated with hospitalization care, including intensive care, and outpatient treatment.

**Natural Disaster Benefit** - Natural disasters can happen anywhere and at anytime. If a natural disaster occurs while on your trip causing a member to become displaced from his or her accommodations, Day Tripper Group Travel will provide relief of \$100 a day to help cover the costs of alternative accommodations.

## Acute Onset of Pre-Existing Conditions

If you are under age 70, you are covered for an Acute Onset of a Pre-existing Condition. Coverage is available up to \$15,000 lifetime maximum for eligible medical expenses and up to \$25,000 lifetime maximum for emergency medical evacuation. An Acute Onset of a Pre-existing Condition is a sudden and unexpected outbreak or recurrence of a Pre-existing Condition which occurs spontaneously and without advance warning either in the form of Physician recommendations or symptoms. Treatment must be obtained within 24 hours of the sudden and unexpected outbreak or recurrence.

## Optional Sports Coverage

Available for extreme sports trips or the adventurous traveler. For an additional 20% premium, this Rider adds coverage for the Amateur sports listed in the exclusion section of this brochure.

If you plan to participate in sporting activities such as mountain climbing or whitewater rafting, you may consider our Sports Rider. This optional Rider will provide medical coverage for injuries resulting from participation in one of these activities otherwise excluded from coverage.

The maximum policy limit for injuries under this Rider is the Overall Maximum Limit you select. The Accidental Death and Dismemberment benefit is deleted during participation in sports activities. Purchase of the Rider does not include coverage for sports participated in for wage, reward or profit.

# Exclusions, Enrollment & Filing a Claim

## What Is Excluded?

The following charges, treatments, surgeries, medications, conditions and circumstances are excluded:

- Charges resulting directly or indirectly from any pre-existing condition, except Members under 70 years of age are covered for an Acute Onset of a Pre-existing Condition subject to the limits set forth in the Schedule of Benefits
- Treatment for or related to any congenital condition
- Pregnancy, including but not limited to pre-natal care, post-natal care, newborn care and childbirth, except for complications of pregnancy within the first 26 weeks after conception
- Mental health disorders; substance abuse; willfully self-inflicted conditions
- Charges for use of emergency room within the US for treatment of illness unless the patient is directly admitted to the hospital as inpatient for further treatment of that illness (does not apply to injuries)
- Venereal disease; treatment of individuals who are HIV+ or have AIDS or ARC
- Treatment by a chiropractor; diseases of the skin; expenses related to vision or hearing; immunizations and routine physical exams
- Dental treatment, including treatment of the temporomandibular joint, except for Emergency Dental Treatment due to covered accident or for emergency relief of acute onset of pain
- Injury resulting from participation in the following activities:
  - a.** Amateur Athletics and Contact Sports; and professional sports or athletic activities. Non-contact and non-organized/non-sanctioned amateur sports or athletic activities engaged in by the Member solely for leisure, recreational, entertainment or fitness purposes are not excluded unless they are excluded by (b) through (j) of this provision; and
  - b.** mountaineering where a reasonably prudent person would use ropes or guides or at elevations of 4,500 meters or higher; and
  - c.** aviation (except when traveling solely as a passenger in a commercial aircraft); and
  - d.** hang gliding, skydiving, parachuting or bungee jumping; and
  - e.** snow skiing or snowboarding, except for recreational downhill and/or cross country snow skiing or snowboarding (no cover provided whilst skiing away from prepared and marked in-bound territories and/or against the advice of the local ski school or local authoritative body); and
  - f.** racing by any animal or motorized vehicle; and
  - g.** spelunking; and
  - h.** subaqua pursuits involving underwater breathing apparatus; and
  - i.** jet skiing; and
  - j.** any other sport or activity which is undertaken for thrill seeking and exposes the Member to abnormal risk of Injury.
- Charges for travel or accommodations, except as provided for in the local ambulance, emergency medical and political evacuations, repatriation of remains, emergency reunion, return of minor children, natural disaster and trip interruption benefits
- Treatment incurred as a result of exposure to non-medical nuclear radiation and/or radioactive material(s)
- Acts of Terrorism, except as provided for herein, war, insurrection, riot or any variation thereof
- Charges for treatment of any condition(s) when the purpose of departing the Home Country was to obtain treatment in the destination country/countries.
- Treatment of all forms of cancer / neoplasm

*This is a summary of exclusions. For more details, or for a complete copy of the Master Policy, contact HCC Medical Insurance Services (HCCMIS).*

## Enrollment

You may access the online quoting and purchasing system or you may complete the attached application and mail or fax along with your payment to your agent or to HCCMIS.

## Pre-certification

To receive full benefits, pre-certification is required for hospitalization, surgery, emergency medical and political evacuations, emergency reunions, trip interruptions, repatriation of remains, CAT Scans, and MRIs.

Pre-certification may be done by contacting HCCMIS by phone, e-mail or live chat or through Client Zone. Please see the certificate for more details.

## Claim Filing

You may file a claim by submitting a Claimant's Statement and Authorization Form. This form may be found online, or you may contact HCCMIS for a copy. Complete the form, attach all itemized invoices and payment receipts, and send them to the address shown on the Claimant's Statement.

## Day Tripper Group Travel is underwritten by Syndicate 4141 at Lloyd's, London. The Plan Administrator is HCC Medical Insurance Services.

HCC Medical Insurance Services, LLC (HCCMIS), headquartered in Indianapolis, Indiana, is a full service organization offering a comprehensive portfolio of insurance products designed specifically to address the insurance needs of consumers worldwide. HCCMIS is a wholly-owned subsidiary of HCC Insurance Holdings, Inc. (NYSE: HCC), a leading international specialty insurance group headquartered in Houston, Texas. HCC has assets of \$8.8 billion, shareholders' equity of \$3.0 billion and is rated AA (Very Strong) by Standard & Poor's and AA (Very Strong) by Fitch Ratings. In addition, HCC's major domestic insurance companies are rated A+ (Superior) by A.M. Best Company.

HCC Medical Insurance Services  
251 North Illinois Street, Suite 600  
Indianapolis, Indiana 46204

# Rates

## Day Tripper Group Rates - Valid through 12/31/2010

### Day Tripper International - For travel outside of the US

Option	1	2	3	4	5
<b>Maximum Limit</b>	<b>\$50,000</b>	<b>\$100,000</b>	<b>\$200,000</b>	<b>\$500,000</b>	<b>\$1,000,000</b>
<b>Age</b>	<b>Daily</b>	<b>Daily</b>	<b>Daily</b>	<b>Daily</b>	<b>Daily</b>
<b>18-29</b>	\$0.72	\$0.90	\$0.95	\$1.06	\$1.13
<b>30-39</b>	\$0.84	\$1.03	\$1.09	\$1.40	\$1.57
<b>40-49</b>	\$1.48	\$1.69	\$1.83	\$1.91	\$2.03
<b>50-59</b>	\$2.57	\$3.02	\$3.27	\$3.21	\$3.29
<b>60-64</b>	\$2.85	\$3.60	\$4.10	\$4.55	\$5.38
<b>65-69</b>	\$3.07	\$4.19	\$4.88	\$4.79	\$5.82
<b>70-79</b>	\$5.63	N/A	N/A	N/A	N/A
<b>80+*</b>	\$11.36	N/A	N/A	N/A	N/A
<b>Dep. Child</b>	\$0.50	\$0.75	\$0.78	\$0.93	\$0.91
<b>Child Alone</b>	\$0.77	\$0.87	\$0.92	\$0.98	\$1.03

### Day Tripper America - For non-US citizens traveling to the US

Option	6	7	8	9	10
<b>Maximum Limit</b>	<b>\$50,000</b>	<b>\$100,000</b>	<b>\$200,000</b>	<b>\$500,000</b>	<b>\$1,000,000</b>
<b>Age</b>	<b>Daily</b>	<b>Daily</b>	<b>Daily</b>	<b>Daily</b>	<b>Daily</b>
<b>18-29</b>	\$1.22	\$1.51	\$1.59	\$1.97	\$2.24
<b>30-39</b>	\$1.63	\$1.99	\$2.12	\$2.57	\$2.91
<b>40-49</b>	\$2.43	\$2.84	\$3.08	\$3.81	\$4.23
<b>50-59</b>	\$3.61	\$4.53	\$4.91	\$5.45	\$6.35
<b>60-64</b>	\$4.28	\$5.52	\$6.29	\$6.69	\$7.84
<b>65-69</b>	\$4.86	\$6.82	\$7.94	\$7.95	\$9.27
<b>70-79</b>	\$6.55	N/A	N/A	N/A	N/A
<b>80+*</b>	\$11.36	N/A	N/A	N/A	N/A
<b>Dep. Child</b>	\$0.74	\$0.89	\$0.94	\$1.13	\$1.22
<b>Child Alone</b>	\$1.21	\$1.46	\$1.54	\$1.82	\$2.03

Displayed rates are for \$250 Deductible Option (in USD). Rates include Surplus Lines taxes and fees when applicable.

\* \$10,000 Maximum Limit

### Deductible and Sports Rider Factors

Deductible	Factor
\$0	1.25
\$100	1.1
\$250	1
\$500	0.9
\$1,000	0.8
\$2,500	0.7
<b>Sports Rider</b>	<b>Factor</b>
Optional	1.2

If for any reason you wish to cancel your policy, you must submit your cancellation request in writing to HCC Medical Insurance Services in order to receive a refund of premium. To be eligible for a full refund, the request for cancellation must be received prior to your effective date. Cancellation requests received after the effective date will be subject to the following conditions:

- 1) a \$25 cancellation fee will apply if the entire group is being cancelled; and
- 2) only the unused portion of the plan cost will be refunded; and
- 3) only members who have no claims are eligible for premium refund.

**Privacy Policy:** HCCMIS respects individual privacy and values the confidence of its customers, employees, consumers, business associates and others. Please contact us or visit our website to obtain a full version of our Privacy Policy.

**DAY TRIPPER GROUP TRAVEL APPLICATION**  
**HCC Medical Insurance Services**  
**Lloyd's Coverholder**

Print all Names as you would like them to appear on your Identification Cards.  
Please print clearly and provide complete information.

Name of Sponsoring Organization:		Contact Name:	
COMPLETE Mailing Address for all correspondence:			
Telephone #:	Fax #:	E-mail Address:	
Destination:		Purpose of Trip:	

Names of all individuals to be covered.	Deductible: \$			Maximum Benefit: \$				
	Birth Date (mm/dd/yy)	Gender	Citizenship	Departure Date (mm/dd/yy)	Return Date (mm/dd/yy)	# of Days	Daily Rate	Individual Subtotal
1.	/ /			/ /	/ /			
2.	/ /			/ /	/ /			
3.	/ /			/ /	/ /			
4.	/ /			/ /	/ /			
5.	/ /			/ /	/ /			

**Group Subtotal – Total from above and from additional census (if any) (A):** \_\_\_\_\_

<b>Florida Surplus Lines question</b> (for Day Tripper Group America only):	
Will your group be traveling to Florida to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Enter Deductible Factor from Deductible Factor Table (B):** \_\_\_\_\_

**Enter Factor for Sports Rider, if Selected (1.2). Otherwise Enter 1.0 (C):** \_\_\_\_\_

**Total Amount Due (A x B x C):** \_\_\_\_\_

Form of Payment: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card <input type="checkbox"/> Check/Money Order	Name as it appears on card:
Credit Card #: _____ Expiration Date (mm/yy): _____	Complete Billing Address (include daytime phone #):
Signature: _____	Checks and Money Orders should be made payable to HCC Medical Insurance Services. Please send your Check or Money Order along with this Application via mail or courier to: Bank of America Lockbox Services c/o Lockbox # 15748 540 W. Madison 4th Floor Chicago, IL 60661
<b>Payment by Credit Card:</b> By signing above, the cardholder authorizes HCC Medical Insurance Services to debit his or her Discover, VISA, MasterCard or American Express account for the amount specified above. Please submit this completed Application by mail or by fax to your Agent or to HCCMIS. Good Neighbor Insurance, Inc. 690 E. Warner Rd., Ste. 117 Gilbert, AZ 85296	
Total payment for the initial term of coverage requested must be entirely paid in U.S. dollars at time of application or prior to the Effective Date of Coverage. Coverage purchased by credit card is subject to validation and acceptance by the credit card company.	

The Sponsoring Organization (Sponsor), on behalf of and as authorized agent and proxy for each of the group participants listed on the Application, hereby applies for membership in the Atlas/International Citizen Group Insurance Trust, Hamilton, Bermuda, and for the insurance provided to members by Lloyd's. The Sponsor and all group participants understand that the insurance applied for is not a general health insurance policy, but is intended for use by members in the event of a sudden and unexpected event while traveling outside their Home Country(ies). The Sponsor and all group participants understand this insurance contains a Pre-existing Condition exclusion, a Pre-certification Penalty and other restrictions and exclusions. The Sponsor and all group participants understand that coverage under this insurance is not renewable and successive periods of insurance will require re-satisfaction of the Deductible, Coinsurance, Pre-existing Condition provision, and all other conditions of the insurance following acceptance of a new Application. The Sponsor and all group participants understand that the information contained herein is a summary of the Master Policy and that they may obtain a complete copy of the Master Policy upon request to HCC Medical Insurance Services. The Sponsor and all group participants understand that Lloyd's, as underwriter of the plan, is solely liable for the coverage and benefits provided under the insurance. The Sponsor and all group participants understand that Lloyd's operates as an approved, non-admitted insurer in all states of the United States except Illinois and Kentucky where they are admitted. As such, claims under this insurance may not be made against any state guaranty fund. The Sponsor and all group participants understand and agree that the insurance agent/broker, if any, assisting with this Application is their representative. Licensed insurance brokers and independent agents are compensated through commissions calculated as a percentage of premium for the purchase, renewal, placement or servicing of insurance coverage. Additionally, some licensed producers may also receive bonuses and incentive trips or prizes associated with sales contests based on sales criteria, such as the overall sales volume or for the percentage of completed sales through HCC Medical Insurance Services. Please contact your insurance broker to obtain information about the specific compensation they may receive in connection with the issuance of your coverage. If signed by a representative of the Sponsor, the undersigned warrants his/her capacity to so act. If signed as Sponsor, the undersigned warrants his/her authority to so act. By acceptance of coverage and/or submission of any claim for benefits, the each group participant ratifies the authority of the signer to so act and bind the group participant.

Signature of Sponsor: _____	Date of Signature: _____
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**For more information or for assistance completing this application, please contact:**  
Good Neighbor Insurance, Inc. / 690 E. Warner Road, Suite 117 / Gilbert, AZ 85296  
Phone: 480-813-9100 / Fax: 480-813-9930 / E-mail: info@gninsurance.com

**Producer Number: 9870SS**



## HCC Medical Insurance Services' Outstanding Customer Service

### HCCMIS's Client Zone and World Service Center

HCCMIS's Client Zone is an online account management and resource tool that allows you to:

- Renew coverage and reprint ID cards
- Obtain details about claim filing and downloading forms
- Pre-certify for certain medical procedures and hospitalizations
- Locate providers within the PPO Network
- Study destination, weather and travel security information using our Travel Intelligence and Planning System (TIPS)

You may access Client Zone by logging in at  
<https://zone.hccmis.com/clientzone/>.



If you prefer to speak to one of our professional service representatives, you may contact our World Service Center by calling toll-free from various countries around the world or by calling collect. Our World Service Center can provide you with service in many different languages.

### 24/7 Worldwide Travel and Medical Assistance

Day Tripper Group Travel includes valuable travel and medical assistance services, which are available to you 24 hours a day, 7 days a week. Contact HCCMIS to access any of these services.

**Pre-Trip Destination Information** - Up-to-date information regarding the required vaccinations, health risks, travel restrictions, and weather conditions specific to your destination country

**Medical Monitoring** - Consultations with attending medical professionals during your hospitalization and establishment of a single point-of-contact for family members to receive ongoing updates regarding your medical status

**Provider Referrals** - Contact information for Western-style medical facilities, medical and dental practices, and pharmacies in your destination country where English is spoken

**Travel Document Replacement** - Assistance with obtaining replacement passports, birth certificates, visas, airline documents, and other travel-related documents

**Lost Luggage Assistance** - Tracking service to assist in locating luggage or other items lost in transit

#### Other travel and medical assistance services available include:

- **Prescription Drug Replacement**
- **Emergency Travel Arrangements**
- **Dispatch of Physician**
- **Translation Assistance**
- **Credit Card/Traveler Check Replacement**

For a complete list of available assistance services or for more information, please contact HCCMIS.

Travel and Medical Assistance Services are not insurance benefits. Any travel or medical assistance service provided is not a guarantee of any insurance benefit.

