

SPORTS AND ACTIVITIES

A. INTERCOLLEGIATE, INTERSCHOLASTIC, INTRAMURAL, OR CLUB SPORTS

YOU ARE COVERED:

1. Subject to the limit set forth in the Schedule of Benefits and Limits, **you** are covered for a new injury or illness sustained while covered under this policy and taking part in sanctioned intercollegiate, interscholastic, intramural, or club sports.

YOU ARE NOT COVERED IF:

1. The sports or athletics are not sanctioned by **your** school; or
2. The activity is performed in a professional capacity or for any wage, reward, or profit; or
3. The injury or illness is sustained while **you** are not actively covered hereunder; or
4. Expenses arise directly or indirectly from anything mentioned in the General Exclusions.

B. LEISURE, RECREATIONAL, ENTERTAINMENT, OR FITNESS SPORTS AND ACTIVITIES

YOU ARE COVERED:

1. Subject to the overall maximum limit, **you** are covered for injury or illness sustained while taking part in sports and activities, unless it is excluded below.

You must ensure the activity is adequately supervised and that appropriate safety equipment (such as protective headwear, life jackets etc.) are worn at all times.

YOU ARE NOT COVERED IF:

1. The sports or athletics involve regular or scheduled practice and/or games; or
 2. The activity is performed in a professional capacity or for any wage, reward, or profit; or
 3. Expenses arise directly or indirectly from anything mentioned in the General Exclusions; or
 4. Any of the excluded items listed below:
 - Aviation (except when traveling solely as a passenger in a commercial aircraft)
 - Base Jumping
 - BMX freestyle
 - Bungee Jumping
 - Free-Diving
 - Hang-Gliding
 - Jet Skiing
 - Mountaineering where a reasonably prudent person would use ropes or guides or at elevations of 4,500 meters or higher
 - Parachuting
 - Racing by any Animal, Motorized Vehicle, or BMX
 - Skateboarding
 - Sky Diving
 - Sky Surfing
 - Snow Skiing and Snowboarding, except recreational downhill and/or cross country snow skiing or snowboarding (no cover provided while skiing away from prepared and marked in-bound territories and/or against the advice of the local ski school or local authoritative body)
 - Spelunking
 - Sub Aqua Pursuits involving underwater breathing apparatus unless accompanied by a certified instructor at depths less than 10 meters, or PADI/NAUI certified
 - Surfing
 - Whitewater Kayaking and Rafting
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PERSONAL LIABILITY

YOU ARE COVERED:

Up to the sum insured shown in the Schedule of Benefits and Limits (inclusive of legal costs and expenses) if **you** become legally liable to pay damages in respect of:

1. Accidental bodily **injury**, including death, **illness** and disease to a **third person**; and/or
2. Accidental loss of or damage to a **third person's** material property (property that is both material and tangible); and/or
3. Accidental loss of or damage to a **related third person's** material property (property that is both material and tangible).

YOU ARE NOT COVERED unless **you** fulfill the following conditions:

1. **You** or **your** legal representatives will give **us** written notice immediately if **you** have received notice of any prosecution or inquest in connection with any circumstances which may give rise to liability under this section.
2. No admission, offer, promise, payment or indemnity shall be made by or on behalf of **you** without **our** prior written consent.
3. Every claim notice, letter, writ or process or other document served on **you** shall be forwarded to **us** and immediately upon receipt.
4. **We** shall be entitled to take over and conduct in **your** name the defense or settlement of any claim or to prosecute in **your** name for **our** own benefit any claim for indemnity or damages against all other parties or persons.
5. **We** may at any time pay **you** in connection with any claim or series of claims the sum insured (after deduction of any sums already paid as compensation) or any lesser amount for which such claim(s) can be settled. Once this payment is made **we** shall relinquish the conduct and control and be under no further liability in connection with such claim(s) except for the payment of costs and expenses recoverable or incurred prior to the date of such payment.
6. **We** will consider paying or advancing, but without any obligation or contractual duty to do so, up to \$2,500 to **you** or for **your** benefit to settle and compromise an asserted claim against **you** so long as:
 - a. The asserted claim is one that may be eligible for coverage under this insurance;
 - b. A lawsuit has not yet been filed, or, if already filed, no response has been filed;
 - c. **You** obtain a full written release and/or covenant-not-to-sue satisfactory to **us**; and
 - d. A full **proof of claim** and other necessary documentation is satisfactorily provided to **us**.

YOU ARE NOT COVERED FOR:

1. Intentionally committed acts, or arising from the influence of alcohol or drugs not medically prescribed by a licensed **physician**;
2. Bodily **injury**, **illness** or disease of any person under a contract of employment, service or apprenticeship with **you** when the bodily **injury**, **illness** or disease arises out of and in the course of their employment to **you**, or in connection with any trade, business or profession;
3. Loss or damage to property belonging to or held in trust by or in the custody or control of **you** other than temporary accommodation occupied by **you** in the course of the trip;
4. Bodily **injury** or damage caused directly or indirectly in connection with the ownership, possession or use by **you** or on behalf of **you** of: aircraft, hovercraft, watercraft, motorized vehicles, parachute, parasail, glider, firearms, fireworks, explosives, deadly weapons, or any racing activity;
5. Any damages, losses or claims caused in whole or in part by **you** during any hunt or as a result of hunting;
6. Bodily **injury** caused directly or indirectly in connection with the ownership, possession or occupation of land or buildings, immobile property or caravans or trailers;
7. Damages resulting from any fire, flood, wind, hail, waterleak, gas leak, explosion or other catastrophe;
8. Fraudulent, dishonest or criminal acts of **you** or any person authorised by **you**;
9. The consequences of any breach, violation or failure to perform any contractual undertakings or obligations, whether verbal or in writing;

10. Punitive or exemplary damages, or fines, penalties, assessments or claims by any governmental authorities or regulatory bodies;
11. Gambling, gaming, or betting of any kind;
12. Animals or pets belonging to **you**, or in **your** care, custody or control;
13. Anything mentioned in the General Exclusions.

Third Person means any individual, natural person, or other legal entity or person, other than **you** or a related third person.

Related Third Person means **your** relative, **your** traveling companion, **your** traveling companion's relative, and any other person, individual or family member with whom **you** are residing or being hosted.

TERRORISM

YOU ARE COVERED:

1. Eligible Medical Expenses for treatment of **injuries** and **illnesses** resulting from an Act of Terrorism, up to the limit set forth in the Schedule of Benefits and Limits, provided all of the following conditions are met.

YOU ARE NOT COVERED unless **you** fulfill the following conditions:

1. The **injury** or **illness** does not result from the use of any biological, chemical, **cyber**, radioactive or nuclear agent, material, device or weapon;
2. **You** have no direct or indirect involvement in the Act of Terrorism;
3. The Act of Terrorism is not in a country or location where the U.S. Department of State has issued a level 3 or level 4 travel advisory that has been in effect within the 6 months immediately prior to **your** date of arrival; and
4. **You** have not failed to depart a country or location within 10 days following the date a level 3 or level 4 travel advisory for that country or location is issued by the United States government.

YOU ARE NOT COVERED IF:

1. Loss, damage, cost or expense directly or indirectly caused by, resulting from or in connection with any of the following regardless of any other cause or event contributing concurrently or in any other sequence to the loss, damage, cost or expense:
 - a. War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power;
 - b. The use of any biological, chemical, **cyber**, radioactive or nuclear agent, material, device or weapon; however, this exclusion shall not apply where **you** are exposed to nuclear radioactive and/or radioactive material for the purpose of medical treatment;
 - c. Any Act of Terrorism, not specifically covered above;
 - d. Coverage for loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to (a), (b) or (c) above; or
 - e. Expenses arise directly or indirectly from anything mentioned in the General Exclusions.

For the purpose of this insurance, an "Act of Terrorism" means an act, including but not limited to, the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or government(s) committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

If **we** allege that by reason of this exclusion, any loss, damage, cost or expense is not covered by this insurance, the burden of proving the contrary shall be upon **you**.

In the event any portion of this exclusion is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

Cyber means the use or operations, as a means for inflicting harm, of any computer, computer software program, malicious code, computer virus or process or any other electronic system.

GENERAL EXCLUSIONS

Excluded Conditions, Treatments (includes Diagnoses, Tests, and Examinations), Services, Supplies, Acts, Omissions, and/or Events:

1. **Pre-existing Conditions** during the first six (6) months of coverage, except charges resulting directly from an Emergency Medical Evacuation or Repatriation of Remains, subject to the limits set forth in the Schedule of Benefits and Limits.
2. Congenital illnesses.
3. Immunizations, routine physical exams, and other diagnostic labs, x-rays, and procedures for screening or preventative purposes, except as provided for under the Wellness benefit.
4. Dental treatment and treatment of the temporomandibular joint, except for emergency dental treatment necessary to replace sound natural teeth lost or damaged in an accident covered hereunder or for the emergency relief of acute onset of pain.
5. **Mental health disorders** if treatment is obtained at a **student health center**.
6. Physical therapy if treatment is obtained at a **student health center**.
7. Chiropractic treatment, unless ordered in advance by a **physician** for **medically necessary** treatment related to a covered **injury** or **illness**, and not obtained at a **student health center**.
8. Routine pre-natal care, pregnancy, child birth, post-natal care, and nursery care of a newborn, unless directly related to a **covered pregnancy**.
9. Elective termination of pregnancy.
10. Promotion or prevention of conception including but not limited to: artificial insemination, treatment for infertility, sterilization or reversal of sterilization.
11. All **sexually transmitted diseases** and conditions.
12. HIV, AIDS, or ARC, and all diseases caused by and/or related to HIV.
13. Organ or tissue transplants or related services.
14. Self-inflicted **injury** or **illness** and/or suicide or attempted suicide whether sane or insane.
15. **Injury** sustained that is due wholly or partially to the effects of intoxication or drugs other than drugs taken in accordance with treatment prescribed by a **physician** and except drugs prescribed for the treatment of **substance abuse**.
16. Voluntarily using any drug, narcotic or controlled substance, unless as prescribed by a **physician**.
17. Charges resulting from or occurring during the commission of a violation of law, including without limitation, the engaging in an illegal occupation or act, but excluding minor traffic violations.
18. Eye **surgery**, such as corrective refractory **surgery**, when the primary purpose is to correct nearsightedness, farsightedness or astigmatism.
19. Corrective devices and medical appliances, including eyeglasses, contact lenses, hearing aids, hearing implants, eye refraction, visual therapy, and any examination or fitting related to these devices, dentures or dental appliances, and all vision and hearing tests and examinations.
20. Orthoptics and visual eye training.
21. Orthopedic shoes, orthopedic prescription devices to be attached to or placed in shoes, treatment of weak, strained, flat, unstable or unbalanced feet, metatarsalgia or bunions, and treatment of corns, calluses or toenails.
22. Hair loss including wigs, hair transplants or any drug that promises hair growth, whether or not prescribed.
23. Acne, moles, skin tags, diseases of sebaceous glands, seborrhea, sebaceous cyst, hypertrophic and atrophic conditions of skin, nevus.
24. Sleep apnea or other sleep disorders.

25. Speech, vocational, occupational, biofeedback, acupuncture, recreational, sleep or music therapy, holistic care of any nature, massage and kinestherapy.
26. Psychometric, intelligence, competency, behavioral and educational testing.
27. While confined primarily to receive **custodial care**, educational or rehabilitative care, or any medical treatment in any establishment for the care of the aged, except rehabilitative care received upon direct transfer from an acute care **hospital**.
28. Cosmetic or aesthetic reasons, except for reconstructive **surgery** when such **surgery** is directly related to and follows a **surgery** which was covered hereunder.
29. Modifications of the physical body intended to improve the psychological, mental or emotional well-being, including but not limited to sex-change **surgery**.
30. Obesity or weight modification, including but not limited to wiring of the teeth and all forms of intestinal bypass **surgery**.
31. Exercise programs, whether or not prescribed or recommended by a **physician**.
32. Incurred as a result of exposure to non-medical nuclear radiation and/or radioactive material(s).
33. Charges resulting from a disease outbreak in a country or location for which the U.S. Centers for Disease Control and Prevention (CDC) has issued a Level 3 Travel Warning if a) the warning has been in effect within the 6 months immediately prior to **your** date of arrival, or b) within 10 days following the date the warning is issued **you** have failed to depart the country or location.
34. **Investigational, experimental or for research** purposes.
35. Complications or consequences of a treatment or condition not covered hereunder.
36. Incurred outside **your certificate period**.
37. Submitted to **us** for payment more than 60 days after the last day of the **certificate period**.
38. Exceeding **usual, reasonable and customary**.
39. Not **medically necessary**.
40. Not administered by or ordered by a **physician**.
41. Provided by a **relative**, family member or any person who ordinarily resides with **you**.
42. Provided at no cost to **you**.
43. Telephone consultations or failure to keep a scheduled appointment.
44. When departure from the **home country** is to obtain treatment in the destination country/countries.
45. Travel or accommodations, except as provided for in the Local Ambulance, Emergency Medical Evacuation, Repatriation of Remains, and Emergency Reunion sections of this insurance.
46. Payable under any government system, including the Australian Medicare system.
47. War, military action or while on duty as a member of a police or military force unit.
48. Not included as Eligible Expenses as described herein.

DEFINITIONS

Accident means a sudden, unintentional and unexpected occurrence caused by external, visible means and resulting in physical **injury** to **you**. The cause or one of the causes of such **accident** is external to **your** own body and occurs beyond **your** control.

Accidental Death means a sudden, unintentional and unexpected occurrence caused solely by external, visible means resulting in physical **injury** to **you** and **your** subsequent death. Death must occur within 30 days of the sudden, unintentional and unexpected occurrence and not be contributed to by **illness** or disease.

Accidental Dismemberment means a sudden, unintentional and unexpected occurrence caused solely by external, visible means and resulting in complete severance from the body of one or more limbs or eyes and not contributed to by illness or disease. For purposes of the Accidental Death and Dismemberment benefit, the term "limb" shall mean: the arm when the severance is at or above (toward the elbow) the wrist, or the leg when the severance is at or above (toward the knee) the ankle. Loss of eye(s) shall mean: complete, permanent, irrevocable loss of sight.

Acute Onset of Pain (Emergency Dental) means a sudden and unexpected occurrence of pain which occurs spontaneously and without advance warning, either in the form of **physician** or dentist recommendation or

symptoms, including pain, which would have caused a prudent person to seek medical or dental attention prior to the onset of pain. Treatment must be obtained within 24 hours of the sudden and unexpected occurrence of pain.

Alcohol Abuse means any pattern of pathological use of alcohol that causes impairment in social or occupational functioning, or that produces physiological dependency evidenced by physical tolerance or by physical symptoms when it is withdrawn.

Beneficiary means the individual named in **your** application to be the recipient of any Accidental Death or Common Carrier Accidental Death benefit. If **you** do not designate a **beneficiary** on the application, the **beneficiary** is automatically as follows:

Members age 18 or older: 1. Spouse (if any), 2. Children (if any) equally, 3. **Your** estate.

Members under age 18: 1. Custodial Parent(s) (if any), 2. Siblings (if any) equally, 3. **Your** estate.

Certificate means the document issued to **you** that provides evidence of benefits payable under the Master Policy.

Certificate Period means the period of time beginning on the date and time of the **certificate effective date** and ending on the date and time of the **certificate termination date**.

Coinsurance means **your** payment of eligible expenses at the percentage specified in the Schedule of Benefits and Limits.

Covered Pregnancy means a pregnancy which began after the effective date of coverage.

Custodial Care means that type of care or service, wherever furnished and by whatever name called, that is designed primarily to assist **you** in performing the activities of daily living. Custodial care also includes non-acute care for the comatose, semi-comatose, paralyzed or mentally incompetent patients.

Cyber means the use or operations, as a means for inflicting harm, of any computer, computer software program, malicious code, computer virus or process or any other electronic system.

Deductible means the dollar amount of eligible expenses, specified in the Schedule of Benefits and Limits that **you** must pay per **certificate period** before eligible expenses are paid.

Dental Treatment means the care of teeth, gums or bones supporting the teeth, including dentures and preparation for dentures.

Dependent means the **participant's** legally married spouse, or the **participant's** unmarried child under age 19 years and chiefly dependent on the **participant** for support and maintenance, who is enrolled for coverage under this plan.

Drug Abuse means any pattern of pathological use of a drug that causes impairment in social or occupational functioning, or that produces physiological dependency evidenced by physical tolerance or by physical symptoms when it is withdrawn.

Durable Medical Equipment means a standard basic hospital bed and/or a standard basic wheelchair.

Educational or Rehabilitative Care means care for restoration (by education or training) of one's ability to function in a normal or near normal manner following an **illness** or **injury**. This type of care includes, but is not limited to, vocational or occupational therapy and speech therapy.

Emergency means a medical condition manifesting itself by acute signs or symptoms which could reasonably result in placing **your** life or limb in danger if medical attention is not provided within 24 hours.

Extended Care Facility means an institution, or a distinct part of an institution, which is licensed as a **hospital**, **extended care facility** or rehabilitation facility by the state in which it operates; and is regularly engaged in providing 24-hour skilled nursing care under the regular supervision of a **physician** and the direct supervision of a registered nurse; and maintains a daily record on each patient; and provides each patient with a planned program of observation prescribed by a **physician**; and provides each patient with active treatment of an **illness** or **injury**. **Extended care facility** does not include a facility primarily for rest, the aged, **substance abuse** treatment, **custodial care**, nursing care or for care of **mental health disorders** or the mentally incompetent.

Full-time Scholar means an individual who is affiliated with an educational institution and is engaging in educational activities for at least 30 hours per week. These activities may include but not be limited to performing research in an area of specialty or teaching for a temporary period of time.

Full-time Student means a student at a college or university who is taking 10 credit hours (undergraduate students) or 6 credit hours (graduate students). Full-time student status for individuals enrolled at colleges or universities that do not use a credit hour system must provide documentation of full-time student status.

Home Country means, for U.S. Citizens, the United States of America, regardless of the location of **your** principal residence. For non-U.S. Citizens, **home country** is the country where **you** principally reside and receive regular mail.

Home Health Care Agency means a public or private agency or one of its subdivisions, which operates pursuant to law and is regularly engaged in providing home nursing care under the supervision of a registered nurse, and maintains a daily record on each patient, and provides each patient with a planned program of observation and treatment by a **physician**.

Home Nursing Care means services provided by a **home health care** agency and supervised by a registered nurse, which are directed toward the personal care of a patient, provided always that such care is provided in lieu of **medically necessary inpatient** care in a **hospital**.

Hospital means an institution which operates as a **hospital** pursuant to law, and is licensed by the state or country in which it operates; and operates primarily for the reception, care and treatment of sick or injured persons as **inpatients**; and provides 24-hour nursing service by registered nurses on duty or call; and has a staff of one or more **physicians** available at all times; and provides organized facilities and equipment for diagnosis and treatment of acute medical conditions on its premises; and is not primarily a rehabilitation facility, long-term care facility, **extended care facility**, nursing, rest, **custodial care** or convalescent home, a place for the aged, drug addicts, alcoholics or runaways; or similar establishment.

Host Country means the country, other than the **home country**, in which **you** will engage in educational pursuits. For legal residents and citizens of the U.S., the host country must be outside the U.S., including the U.S. Virgin Islands, Puerto Rico, Guam, American Samoa, and the Northern Mariana Islands.

Illness means a sickness, disorder, **illness**, pathology, abnormality, ailment, disease or any other medical, physical or health condition. **Illness** does not include learning disabilities, attitudinal disorders or disciplinary problems.

Injury means an unexpected and unforeseen harm to the body caused by an accident that requires medical treatment.

Inpatient means a person who is an overnight resident patient of a **hospital**, using and being charged for room and board.

Intensive Care Unit means a cardiac care unit or other unit or area of a **hospital** that meets the required standards of the Joint Commission on Accreditation of Hospitals for Special Care Units.

Investigational, Experimental or for Research Purposes means procedures, services or supplies that are by nature or composition, or are used or applied, in a way which deviates from generally accepted standards of current medical practice.

Medically Necessary means a service or supply which is necessary and appropriate for the diagnosis or treatment of an **illness** or **injury** based on generally accepted current medical practice as determined by **us**. A service or supply will not be considered **medically necessary** if is provided only as a convenience to **you** or the provider, and/or is not appropriate for **your** diagnosis or symptoms, and/or exceeds in scope, duration or intensity that level of care which is needed to provide safe, adequate and appropriate diagnosis or treatment of an **illness** or **injury**.

Member means an individual who is covered under this insurance.

Mental Health Disorder means a mental or emotional disease or disorder which generally denotes a disease of the brain with predominant behavioral symptoms; or a disease of the mind or personality, evidenced by abnormal behavior; or a disorder of conduct evidenced by socially deviant behavior. Mental health disorders include: psychosis, depression, schizophrenia, bipolar affective disorder, and those psychiatric illnesses listed in

the current edition of the diagnostic and Statistical Manual for Mental Disorders of the American Psychiatric Association.

Outpatient means a **member** who receives **medically necessary** treatment by a **physician** for **injury** or **illness** that does not require overnight stay in a **hospital**.

Participant means the **full-time student** or **full-time scholar** who is pursuing international educational activities outside of his/her **home country** and who is enrolled for coverage under this plan.

Physician means a Doctor of Medicine (MD), Doctor of Dental Surgery (DDS), Doctor of Dental Medicine (DDM), Doctor of Podiatry (DPM), Doctor of Osteopathy (DO), a licensed Physical Therapist or Physiotherapist, and a Doctor of Psychiatry (Psy.D) and a Doctor of Psychology (Ph.D.). Physician also includes a Certified Nurse Practitioner (CNP), Certified Registered Nurse Anesthetist (CRNA), Nurse Midwife or a Physician Assistant (PA) under the direction of a medical doctor. A physician must be currently licensed by the jurisdiction in which the services are provided, and the services must be within the scope of that license and covered under this Master Policy.

Related Third Person means **your** relative, **your** traveling companion, **your** traveling companion's relative, and any other person, individual or family member with whom **you** are residing or being hosted.

Relative means biological or step parent current spouse, biological or stepsiblings, or child or stepchild, age 18 or older.

Routine Physical Exam means an examination of the physical body by a **physician** for preventative or informative purposes only, and not for the diagnosis or treatment of any condition. Routine physical exam also includes diagnostic labs, x-rays, and other procedures for screening, preventative, or informative purposes.

Sexually Transmitted Diseases means diseases including but not limited to syphilis, chlamydiosis, trichomoniasis, genital herpes, and Human Papillomavirus (HPV).

Student Health Center means a medical facility of an educational institution that provides basic health services for students for a minimum of 10 hours per week during the school semester. Basic services must include staffing by a licensed medical provider (MD, CNP, or RN) for the purpose of assessment and treatment of minor **illnesses** and **injuries** and/or referral to another medical provider.

Substance Abuse means alcohol, drug or chemical abuse, overuse or dependency.

Surgery or Surgical Procedure means an invasive diagnostic procedure, or the treatment of **illness** or **injury** by manual or instrumental operations performed by a **physician** while the patient is under general or local anesthesia.

Therapeutic Termination of Pregnancy means willful termination of pregnancy determined to be **medically necessary** for the wellbeing of the mother.

Third Person means any individual, natural person, or other legal entity or person, other than **you** or a related third person.

Usual, Reasonable and Customary means the lesser of the following:

1. One and a half times (150%) of the charges payable under the United States Medicare program, for claims incurred outside the PPO network within the U.S., or
2. Most common charge for similar services, medicines or supplies within the area in which the charge is incurred, so long as those charges are reasonable. What is defined as **usual, reasonable and customary** charges will be determined by **us**. In determining whether a charge is **usual, reasonable and customary**, **we** may consider one or more of the following factors: the level of skill, extent of training, and experience required to perform the procedure or service; the length of time required to perform the procedure or services as compared to the length of time required to perform other similar services; the severity or nature of the **illness** or **injury** being treated; the amount charged for the same or comparable services, medicines or supplies in the locality; the amount charged for the same or comparable services, medicines or supplies in other parts of the country; the cost to the provider of providing the service, medicine or supply; such other factors **we**, in the reasonable exercise of discretion, determine are appropriate.

You/Your means each insured person named in the **certificate**.

We/Us/Our means Tokio Marine HCC Medical Insurance Services Group.