



LANEXANG ASSURANCE PUBLIC COMPANY (LAP)

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LANEXANG ASSURANCE PUBLIC COMPANY

LEISURE TRAVEL INSURANCE

POLICY WORDING

LAP

SECTION I: COVERAGES

1. DEFINITIONS

ACCIDENT/ACCIDENTAL refers to an immediate unexpected event caused by outside factors causing Accident to the Insured.

AIRCRAFT refers to fix-winged aircrafts.

AIRLINE refers to an aircraft operating only between established and recognized commercial airports or licensed commercial heliports and includes publicly or privately chartered flights by a licensed operator.

APPOINTED ASSISTANCE COMPANY refers to a company appointed by Lanexang Assurance Public Company to provide the Insured with travel assistance and medical emergency services.

BAGGAGE refers to luggage bags or other kind of bags being checked in and under the care of physical control of the Common Carrier, but excluding golf/sports or musical equipment or bags containing golf, sports or musical equipment.

COMMON CARRIER refers to any form of air, land or water transport which is operated by a licensed carrier authorized to provide transportation services to individuals travelling as fare-paying passenger and which is operated only on fixed established routes as part of a scheduled regular transportation service and includes aircraft operated by airlines and excludes Public transportation.

DEDUCTIBLE refers to the amount of any claim which Insured must pay themselves.

EFFECTIVE DATE refers to the Policy Commencement Date or Date of the Insured's first enrollment into the Policy, whichever is the later.

ILLNESS refers to sickness or disease contracted by the Insured during the Trip.

INSURED refers to natural person or legal entity that purchases an Insurance Policy, and in some cases an insured can be a policy owner as well as an insured person.

MEDICAL EXPENSE refers to the services fee that the Hospital or Medical Center charges Insured that are considered Normal and Customary while he/she is their Inpatient.

MEDICAL PRACTITIONER refers to a person who has a medical degree, is licensed or registered in the country which they operate and is accredited by a medical board or equivalent organization to render medical services, except of Family Members.

LOSS OF SIGHT refers to a physical condition where the Insured is completely blind and cannot be cured.

PERIOD OF INSURANCE refers to the period of cover shown in the Policy Schedule for which the appropriate premium has been paid.

PERMANENT DISABLEMENT refers to Injury which:

- i. falls into one of the categories listed in the Scale of Permanent Disablement Benefits Table.
- ii. having lasted for a continuous period of twelve (12) calendar months from the date of the Accident entirely prevents the Insured from engaging in gainful employment of any and every kind and from which there is no hope of improvement.

PREMIUM refers to amount paid by an insured to an insurer under an Insurance Policy as consideration for the obligations assumed by the insurer.

REASONABLE AND CUSTOMARY CHARGES refer to charges or fees which are generally prevailing and of normal standard for the medical condition concerned at the country and city where the insured is treated.

THE COMPANY refers to Lanexang Assurance Public Company.

TRAVELING ROUTE refers to the journey between Republic of the Lao People's Democratic Republic and Thailand that is in line with the itinerary, as passenger of a commercial airline including scheduled transit for refueling and flight connection or by any other common carrier.

TRIP refers to the period between the Commencement of Cover and Expiry of Cover. Any one trip is limited to 90 days.

COVID-19 Coronavirus disease 2019 (COVID-19) is an infectious disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

2. SCOPE OF COVER

❖ PERSONAL ACCIDENT BENEFITS

- **ACCIDENTAL DEATH**

The Company will pay the sum insured as stated in the Schedule of Benefit, if the Insured sustained Accident during the Trip which results in Death within **180 days** from the day the incident occurred.

- **PERMANENT DISABLEMENT**

The Company will pay the sum insured as stated in the Schedule of Benefit, if the Insured sustained Accident during the Trip, which results in Permanent Disablement. The disablement must be certified by a Medical Practitioner.

	Table of Benefits	Scale of Compensation
1	Accident Death	100%
2	Permanent Total Disablement	
2a	Loss of Sight (both eyes)	100%
2b	Loss of two limbs	100%
2c	Loss of one Limb and one eye	100%
2d	Permanent Total and absolute disablement as certified by Medical Practitioner	100%
3	Permanent Partial Disablement	
3a	Loss of Sight on one eye	50%
3b	Loss of one limb	50%
3c	Loss of all toes	20%
	Two Phalanges	5%
	One Phalange	2%
	More than one toe, each	1%
	Loss of hearing (both ears)	50%
	Loss of hearing (one ear)	15%
	Loss of Speech	50%
	Loss of four fingers and thumb of one hand	40%

	Loss of four fingers	35%
	Loss of thumb – both phalanges	25%
	Loss of thumb – one phalange	10%
	Loss of Index finger	
	i) One Phalange	4%
	ii) Two Phalanges	8%
	iii) Three Phalanges	10%
	Loss of Middle finger	
	i) One Phalange	2%
	ii) Two Phalanges	4%
	iii) Three Phalanges	6%
	Loss of ring finger	
	i) One Phalange	2%
	ii) Two Phalanges	4%
	iii) Three Phalanges	5%
	Loss of little finger	
	i) One Phalange	2%
	ii) Two Phalanges	3%
	iii) Three Phalanges	4%
	Loss of Metacarpals	
	i) First or second (additional)	3%
	ii) Third, fourth or fifth (additional)	2%
	Any other part permanent partial disablement	As assessed by Medical Practitioner appointed by us

❖ **MEDICAL AND EVACUATION BENEFITS**

● **OVERSEAS EMERGENCY MEDICAL EXPENSES**

The Company will reimburse to the Insured up to the limit specified in the Schedule of Benefit and Medical Expense Sub-limit Section which is reasonably and customary charges incurred whilst overseas as a direct, sole and independent result of Accident or Illness suffered by the Insured.

Medical Emergency describes an acute injury or illness that poses an immediate risk to the insured's life or long-term health.

Deductible: 25 USD each claim.

- **OVERSEAS EMERGENCY MEDICAL EXPENSES DUE TO COVID-19**

The Company will reimburse to the Insured up to the limit specified in the Schedule of Benefit which is reasonably and customary treatment charges incurred whilst overseas as a direct, sole and independent result of Covid-19 infection suffered by the Insured.

Deductible: 25 USD each claim.

- **EMERGENCY MEDICAL EVACUATION**

In the event of an accident or sudden illness, the Company will take charge the costs of transferring or repatriating the Insured to a properly equipped health centre or to his/her usual country of residence.

The Company, through its medical team, will decide which health centre the Insured is transferred to or whether repatriation is necessary, depending on the situation or gravity of the state the latter is in.

Afterwards, the Company's medical team will maintain the telephone contacts necessary with the medical centre and with the doctors attending to the Insured, and on the basis thereof will decide whether to transfer or repatriate the Insured, and on the most suitable means of transport to use.

For minor or less serious illnesses or accidents, which in the opinion of the medical team do not require repatriation, transfer will be performed in ambulance or another means of transport, to the place where adequate medical assistance can be provided.

The Insured will not be transported from one hospital to the other without getting the attending doctor to approve the medical report. This assistance is not a first-aid, it is secondary assistance.

- **FOLLOW UP TREATMENT IN LAO PEOPLE'S DEMOCRATIC REPUBLIC**

We will reimburse You, up to the limit specified in the schedule of benefit for Medical Expenses necessarily incurred as follow-up medical treatment in Lao People's Democratic Republic for

Injury which You had sustained whilst Overseas. The time limit for seeking such medical treatment is as follows:

(i) if prior medical treatment has not been sought Overseas, You must seek medical treatment in Lao People's Democratic Republic within 48 hours upon Your arrival in Lao People's Democratic Republic. From the date of the first medical treatment in Lao People's Democratic Republic, You have up to a maximum of 30 days to continue medical treatment in Lao People's Democratic Republic up to the limit specified in the table of benefits, provided always that each visit for medical treatment is capped at USD250; or

(ii) if medical treatment had already been sought Overseas, You have up to a maximum of 30 days upon Your arrival in Lao People's Democratic Republic to continue medical treatment in Lao People's Democratic Republic up to the limit specified in the schedule of benefit.

For Sickness sustained while Overseas and where emergency medical evacuation has been arranged by the Third Party Administrator to return You to Lao People's Democratic Republic We will reimburse You, up to the limit specified in the table of benefits, the Medical Expenses necessarily incurred in Lao People's Democratic Republic for follow-up medical treatment for sickness which You had sustained whilst Overseas and where the Third Party Administrator has judged it to be medically appropriate to return You to Lao People's Democratic Republic for medical treatment and has arranged for such evacuation.

Deductible: 25 USD each claim.

❖ **TRAVEL INCONVENIENCE BENEFITS**

- **LOSS OF BAGGAGE AND PERSONAL EFFECTS**

The Insurer will supplement the compensation for which the carrier is liable up to a limit as indicated in the schedule of benefits, as a sum of both compensation payments, for the collection of baggage and possessions checked in by each Insured, in the event of loss during the carriage by air performed by the carrier company, for the purpose of which the Insured shall furnish a list of the contents including the estimated price and date of purchase of each item, as well as the settlement document of the compensation payment by the carrier.

Compensation payment for loss will be calculated according to the procedures recommended by international carriage by air organisations.

The minimum period of time that must elapse for the baggage to be considered to have been lost once and for all will be that stipulated by the carrier company but shall not be less than 21 days.

In addition to the General Exclusions to all the guarantees of this policy described in Section III of these General Conditions, Claims under LOSS OF BAGGAGE AND PERSONAL EFFECTS are not guaranteed when they are brought about by:

- Breakage of glass or china unless caused by an accident to the conveyance in which the Insured Person is travelling;
 - Loss or damage caused by moth, vermin, electrical or mechanical breakdown, machinery breakdown, gradual deterioration or wear and tear (this does not apply to the loss of or damage to any item resulting from wear and tear to a clasp, setting or other fastening, carrier or container);
 - Loss of cash, bank or currency notes, checks, postal orders, credit cards, charge cards, travel cards, bankers cards, travellers checks, travel tickets, passports, driving licences, green cards and petrol or other coupons;
 - Claims resulting from confiscation, requisition, detention, destruction or damage by customs authorities or other such officials;
 - Losses which are not reported to the Police or appropriate authorities within 24 hours of discovery or as soon as is reasonably practicable, and a Police or Property Irregularity report obtained;
 - Breakage of sports equipment whilst in use or loss of or damage to pedal cycles or hired equipment;
 - Loss of or damage to contact, corneal or micro-corneal lenses.
- **PERSONAL MONEY AND DOCUMENTS**

In the case of loss of the Insured's passport, driving license while abroad, The Insurer will take charge of the expenses of the displacements necessary for obtaining a new passport driving license, national identity card or equivalent consular document, up to the sum insured as stated in the table of benefits.

- **BAGGAGE DELAY**

The Insurer covers the minimum delay of 6 hours in the arrival of registered and tagged luggage on an IATA Member Airline in the event the luggage was registered, with as maximum limit as stated in the Schedule.

All such claims shall be accompanied by documents duly certified by the Airline attesting to the occurrence of the event.

- **TRAVEL DELAY**

In the event that transport services on which the Insured Person has previously booked to travel are delayed by at least 6 hours, the Company, subject to presentation of the corresponding original invoices, shall reimburse any additional expenses incurred as a result of the said delay with maximum limit as stated in the Schedule as follows:

In respect of the outward journey at commencement of the Covered Trip:

- The cost of the additional expenses (transport and hotel accommodation, as well as maintenance incurred as a result of the delay.
- Such payment will be made on presentation of the relevant original invoices up to USD 200 in the event of delay of more than 6 hours.

The Insured Person must obtain written confirmation from the carriers or their agents of the actual date and time of departure and the reasons for delay before a claim is considered under this Section of the Policy.

Claims under this Section shall be calculated from the actual time of departure of the conveyance on which the Insured Person was booked to travel, as specified in the booking confirmation.

- **TRAVEL REROUTE**

We will pay a Reroute Benefit if during the Insured's overseas trip, the Common Carrier the insured person is on is rerouted and arrives at its intended destination at least six hours later than the original scheduled arrival time stated in the Insured Person's travel document or ticket.

Such Rerouting must have been caused by Natural Disaster, inclement weather conditions, mechanical breakdown of the Common Carrier or any event beyond the control of its passengers.

The period of delay shall be calculated from the original arrival time of the Common Carrier as stated in the Insured Person's travel document or ticket to the actual arrival time of the Common Carrier at the intended destination

Details of the rerouted travel must be verified in writing by the operator of the common carrier.

If a claim is made for this benefit in respect of any event, a claim cannot be made for the Travel Delay Benefit.

We will not pay for claims arising directly or indirectly from, in respect of, or caused by:

- The delay of the Insured Person's arrival at the destination due to the Common Carrier's late departure;
- Failure to obtain written verification from the operator of the Common Carrier on the period and reason for such delay; or
- Strike, riot or industrial action or any similar event which existed on the Issue Date

❖ **PERSONAL LIABILITY**

● **PERSONAL LIABILITY**

The Company guarantees the Insured, by payment by the latter of the relevant premium, to pay the compensation for which it may be civilly liable by law, for bodily or material damages caused involuntarily to third parties and products during the lifetime of the insurance contract, according to the definitions, terms and conditions set out in the policy and for incidents arising from the risk specified therein.

With the limit of the Sum Insured indicated in the Schedule and provided that the object of the claim is included under the policy cover, the following are also guaranteed:

- The furnishing of court bail, to guarantee the civil results of the procedure.
- the legal court costs.

In addition to the General Exclusions to all the guarantees of this policy described in Section III of these General Conditions, Claims under PERSONAL LIABILITY are not guaranteed when they are brought about by:

- employer's liability, contractual liability, or to a member of the insured Person's Family.
- Property belonging to the insured person or that is in the Insured Person's care, custody or control.
- Any willful, malicious or unlawful act.

- Any pursuit of trade, business or profession
- The ownership or occupation of land or buildings (other than occupation only of any temporary residence)
- The ownership, possession or use of vehicles, aircraft or watercraft or any other conveyance
- The legal costs resulting from or in connection with any criminal proceedings
- The influence of intoxicants, mountaineering, winter sports of any description, contact sports of any description, riding or driving in races or rallies or the use of firearms; or
- Judgements that are not in the first instance delivered by or obtained from a Court of competent jurisdiction within the Republic of the Lao People's Democratic Republic or Thailand.

SECTION II: GENERAL CONDITIONS AND PROVISIONS

1. DUTY OF DISCLOSURE

The accuracy of the information provided over any means of electronic communications or in the Insured's proposal form will form the basis of and be part of the contract. Before Insured enter into the Insurance contract and during the Period of Insurance, Insured must declare to The Company everything Insured know or could reasonably be expected to know which will affect The Company's decision on the coverage and the terms of the insurance. If Insured are uncertain about whether a fact is relevant or not, Insured must declare to The Company about it. The Company will acknowledge receipt of acceptance of material information by stating these on the Policy Schedule. If Insured do not provide this information to The Company, The Company may:

- i. reduce the amount payable for the claim under this Policy; or
- ii. refuse to pay the claim that may arise; or
- iii. cancel Insured's Insurance Policy from inception.

2. ELIGIBILITY

Persons eligible for cover under this Policy are:

- i. A Leisure Traveller aged under 75 years.

3. AMENDMENT OF THE INSURANCE POLICY

The Amendment of the Insurance Policy will be valid when The Company accepts such agreement and it is legally binding after a formal written statement being attached to the Policy or being issued as an endorsement by The Company's authorized representative.

4. CHANGE OF INSURANCE AGREEMENT

Insured shall give The Company immediate written notice of any changes in the Country of Residence, occupation, pursuits or health of any Insured, which is likely to result in a material increase in hazard to The Company and shall pay any additional premiums that may be required by The Company. Failure to do so shall entitle The Company, in the event of a claim, to repudiate such a claim or at The Company's discretion, adjust the benefits payable.

The Company reserves the rights to amend the terms and provisions of this Policy on any Policy Anniversary date by giving Insured thirty (30) days' written notice of such change. Notice can be delivered via electronic means or sent by ordinary mail to Insured's last known correspondence address in The Company's records. No alteration to this Policy shall be valid unless approved in writing by The Company's authorized representative and reflected in an endorsement. No broker or advisor has the authority to amend or waive any of the terms and conditions of this Policy.

5. MISSTATEMENT

- **Misstatement of Age**

If the date of birth of any Insured has been incorrectly stated on the proposal form, then the annual premium shall be adjusted based on the correct age. Any excess premium that may have been paid as a result of any misstatement of age shall be refunded without interest. If at the correct age Insured would not have been eligible for cover under this Policy, no benefit shall be payable, and The Company's liability shall be limited to the refund of the premium paid without interest. Proof of age of each Insured must be submitted to The Company before any claims can be made under the Policy.

- **Misstatement or fraud**

The Company shall have no liability to pay any benefit under this Policy if Insured or any Insured:

- fail to fully and truthfully disclose to The Company all material information known (or which could reasonably be expected to be known) before inception of this policy and upon each renewal;
- fail to properly fulfil the terms and conditions of this policy;
- make any untruth statement;
- omit, suppress or incorrectly state any material information affecting the risk;
- make any claim that is fraudulent or exaggerated or make any false declaration or statement in support of a claim.

6. GOVERNING LAW AND JURISDICTION

The Policy shall be governed by and interpreted in accordance with the Law of Lao People's Democratic Republic. The jurisdiction is the competent court in Lao People's Democratic Republic.

Lanexang Assurance Public Company

7. CANCELLATION OF THE INSURANCE

In the event the Insured cancel his/her application after the Company has issued the policy but prior to the effective date of the Policy, the Company shall refund the premium to the Insured after the deduction of cancellation administration fee. No refund shall be made after the effective date of the Policy or in the event the Insured returns home prior to the expiry of the Policy.

8. CURRENCY

The currency of the premium and any coverage amounts (benefits) will be in US Dollar. Benefits paid in a local currency will be converted using the spot rates prevailing at the time The Company accesses the claims. This Provision remain applicable unless there is a regulation to control the use of currency.

9. CONFIDENTIALITY

The Company shall keep all information to which Insured provided confidential either through filling the application form or via electronic communication.

10. DISAPPEARANCE

If during the period of cover and whilst on the insured Trip, an Insured disappears following the disappearance, sinking or wrecking of a conveyance in which they were traveling and their body has not been found within **twelve (12) months** after the date of disappearance, they will be deemed to have died as a result of an Accident at the time of disappearance, sinking or wrecking of the conveyance. If benefit under **PERSONAL ACCIDENT BENEFITS** is payable because of a disappearance, the Company will only pay provided the Insured's estate give the Company a signed undertaking that the amounts will be repaid to the Company if the Insured is subsequently found to be alive.

11. MEDICAL AUTHORIZATION

The Appointed Assistance Company would repatriate the Insured only when medical authorization from the attending doctor and the Appointed Assistance Company medical advisors certify that a repatriation is necessary.

SECTION III: GENERAL EXCLUSIONS

ADDICTION/ INTOXICATION

Those claims derived from illnesses or pathological states caused by the voluntary consumption of alcohol, drugs, toxic substances, narcotics or medicines acquired without medical prescription, as well as any kind of mental illness or mental imbalance.

AERIAL ACTIVITIES

This Policy does not pay claims arising from flying or other aerial activity except as a fare paying passenger in a fully licensed aircraft operated by a licensed commercial air carrier or recognized charter company.

BACTERIAL & VIRAL INFECTION

The Company will not pay for claims arising from bacterial or viral infections even if contacted by accident except bacterial infection that is the direct result of an accidental cut or wound.

CARELESSNESS

Those claims caused directly or indirectly by the bad faith of the Insured, by his/her participation in criminal acts, or as a result of his/her fraudulent, seriously negligent or reckless actions. The consequences of the actions of the Insured in a state of derangement or under psychiatric treatment are not covered either.

COSMETIC/ PLASTIC SURGERY

Any Plastic, Elective, Reconstructive Surgery including treatments for skin, blemishes, aging spots, freckles, dandruff, hair loss, weight control or elective surgery to improve physical appearance, except where such Surgery is necessary for the repair of damage caused solely by bodily injuries as a result of an Accident.

HAZARDOUS ACTIVITIES & SPORTS

Any treatment or accident arising from participating in:

- animal hunting (game hunting), car/ boat/ horse racing, Boxing
- all Skiing for recreation or competition including Jet Skiing, Skating, and Parachuting (unless to save Insured's life)
- while getting in, getting out or taxing in Balloons or Gliders
- Bungee Jumping, Mountain Climbing with or without Mountain Climbing Equipment and Diving using Oxygen Cylinders and others Breathing Apparatus

- Travelling in an aircraft not operated by a commercial airline which is taxiing, taking off or landing.
- This extends to driving a car or motorcycle without a driver's license.
- Participation in competitions or tournaments organized by sporting federations or similar organizations.

FELONY / MISDEMEANOR / BRAWLING

- The Company will not indemnify the Insured in respect of any Liability or Injury arising out of criminal offences alleged.
- The Company will not pay claims for any accident occurring when the Insured is encouraging or taking part or participating in a brawling fight.

FIT TO TRAVEL

Where the Insured or his/her travelling companion were not fit to undertake the Trip as confirmed by his/her medical practitioner when booking the Trip or purchasing this policy.

PSYCHIATRY

Any diagnosis, medical investigation, symptom, diseases or treatment relating to emotional, stress, psychiatric or psychological disorders, Insanity, Behavioral or Characteristic Disorders. This extends to Concentration Problems, Autism, Depression, Eating Disorders or Anxiety.

PRE-EXISTING CONDITION

Any Pre-existing condition which the Insured received medical treatment, diagnosis consultation or prescribed drugs for which medical advice or treatment as recommended by physician preceding the Effective Date of the contract.

PREGNANCY

Any treatment arising from Pregnancy, Child Delivery, Abortion, Miscarriage (except accidental miscarriage), Infertility (includes Infertility Investigation and Treatment), Vasectomy or Contraception.

RADIOACTIVITY

Nuclear Weapons, Radiation, Radioactivity from Nuclear-Fuel or Nuclear Waste or Nuclear Radiation caused by combustion of fuel and Nuclear Fission which self-ignites. Explosion by Radioactivity Nuclear material or dangerous objects used in a Nuclear Explosion.

SEXUALLY TRANSMITTED DISEASES (STDs)

Lanexang Assurance Public Company

Any investigation, test or treatment arising directly or indirectly from Sexually Transmitted Diseases, including Venereal Diseases, Immune Deficiency Syndrome (AIDs), any AIDs-related condition or infection by Human Immune Deficiency Virus (HIV).

SONIC BANGS

Loss, destruction or damage directly occasioned by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.

SUICIDE

This Insurance does not cover suicide or attempting to commit suicide, self-inflicted accidents, attempting to cause accidents to him/herself or arranging for any third party to undertake such an act.

TOUR OPERATOR & AIRLINE FAILURE

Any claim that results from the tour operator, airline or any other company, firm or person not being able or not being willing to carry out any part of their obligation to the Insured.

TRAVELLING AGAINST WHO ADVICE

The Insured travel to a country, specific area or event when the World Health Organization (WHO) or regulatory authority in a country to/from which you are travelling has advised against all, or all but essential travel.

WAR/ TERRORISM

Any accidents or treatment arising from war (whether it is announced or not), invasion or execution by foreign enemy, Civil War, Revolution, Rebellions, Demonstrations against the government, Riot, Strike, Calamity or any political unrest having to announce martial law to control the situation, including Terrorism.

NATURAL PHENOMENA

Extraordinary natural phenomena such as floods, earthquakes, landslides, volcanic eruptions, atypical cyclonic storms, falling objects from space and aerolites, and in general any extraordinary atmospheric, meteorological, seismic or geological phenomenon.

SECTION IV: CLAIM PROCEDURE

1. CLAIM

In the event of any occurrence which may give rise to a claim for indemnity under this Policy, the Insured (or the Insured's Relative in case of death) shall:

- a) give notice to the Company in writing with full details within **30 consecutive days** after the completion of the Trip or **24 consecutive hours** from the date of Accident in the case of death or disablement if practicable,
- b) give the Company at his/her own expense all medical evidence, certificates, reports, original receipts, proof of ownership, documentation and any other evidence, verified by authorized person, which the Company may require from the Insured to support his/her claim.

In the event of an Emergency, Serious Accident or Illness, please call the 24-hours Appointed Assistance Company helpline number shown on the Insured's card. The Insured shall provide his/her name, policy number and details of his/her Accident or Illness, contact details of his/her attending doctor, his/her present location and how he/she can be contacted.

2. LEGAL PROCEEDINGS

No action at law or in equity shall be brought under this Policy against the Company prior to the expiration of **60 days** after the proof of claim has been filed in accordance with the requirements of this Policy nor shall such action be brought at all unless it is brought within **5 years** from the expiration of the period within which proof of claim is required under this Policy. If the Company shall disclaim liability for any claim under this Policy and no action has within **five (5) calendar months** from the date of such disclaimer been commenced against The Company, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable.

3. DISPUTE RESOLUTION

- The Parties may agree to take part in the dispute resolution or mediation in good faith and undertake to honor the terms of any settlement reached.
- Or If any dispute is not reached any settlement through dispute resolution and mediation methods, the dispute may be submitted to Lanexang Assurance Public Company in Lao People's Democratic Republic and an arbitral award shall be final and in force to the Parties of the dispute.

SECTION V: BENEFITS

1. Schedule of Benefits

Benefit	Remark	Plan 1 (USD)	Plan 2 (USD)
Accident Death		10,000.00	25,000.00
Permanent Disablement	Follows Scale of Compensation	10,000.00	25,000.00
Medical Expenses	Covid-19 Included; including Medical Repatriation	100,000.00	100,000.00
Follow up Treatment in Laos		1,000.00	1,000.00
Baggage and Personal Effects	Limit of USD 125 per item	250.00	500.00
Personal Money and Documents		250.00	250.00
Baggage Delay	(per 6 hours, max 4 Cycles)	50.00	100.00
Travel Delay	(per 6 hours, max 4 Cycles)	50.00	100.00
Travel Reroute		250.00	500.00
Personal Liability		25,000.00	50,000.00