



# TERMS AND CONDITIONS

MAS SERVICIOS appreciates your preference, in this document you will find the General Conditions of the product you have contracted, having the detail of the definitions of Services and Exclusions, which will allow you to have a better use of it.

## INTRODUCTION

All services provided by this assistance plan are covered through MAS SERVICIOS, a company whose main purpose is to provide, among others, medical, legal and personal assistance services only in emergencies in the course of your national and international travel during the term of the contracted plan.

## ACCEPTANCE OF THE BENEFICIARY.

These General Conditions, together with the remaining documentation is made available to the Beneficiary at the time of purchase of the plan, form the contract of assistance to the traveler that provides MAS SERVICIOS. The Beneficiary declares to know and accept these General Conditions, such acceptance is ratified by any of the following acts:

1. Payment for contracted services
2. The use or attempt to use any of the contracted services

In both cases, the Beneficiary acknowledges that he has chosen, read and that he accepts all the terms and conditions of the services expressed in these General Conditions and that they govern the relationship between the parties at all times becoming an accession contract.

It is clearly understood and accepted by the Beneficiary that the plans of MAS SERVICIOS, do not constitute for any reason an insurance or related product, nor is it: a social security or prepaid medicine program, a medical service at home or unlimited medical service. Therefore, they do not have as their main object the complete health, nor the definitive treatment of the Beneficiary's ailments.

The medical assistance services to be provided by MAS SERVICIOS are expressly and only limited to acute emergency treatments and are only oriented to primary travel assistance for sudden and unpredictable events where a clear, verifiable and acute medical condition or disease has been diagnosed that prevents the normal continuation of a trip, provided that such illness or medical condition is not on the exclusions list. These plans are designed to ensure the Beneficiary's primary and normal and initial recovery and physical conditions that allow a normal continuation of your journey. They are not designed or contracted or provided for:

- Elective medical procedures
- Routine medical checkups or checkups that have not been previously authorized by the Assistance Center
- Advance benign or long-lasting treatments or procedures

Any assistance or treatment will cease and will not be the responsibility of MAS SERVICIOS once the Beneficiary returns to his/her place of residence or when the period of validity of the chosen plan expires. The acquisition by a Beneficiary of one or more certificates does not result in the accumulation of the benefits or the time contemplated, in these cases only the caps established in the certificate that was first issued may apply.

NOTE: It is clearly understood by the Beneficiary that this plan is a travel assistance product and that in the eventuality offered through an insurance company it is not done by national or international health insurance.

On the other hand, once the validity of the certificate has begun, the Beneficiary may not make changes or expand the contracted product, nor will the certificate be cancelled for any reason, nor under any circumstances. Without prejudice to the foregoing, when the Beneficiary extends its trip in an unforeseen manner, it may request the issuance of a new certificate, MAS SERVICIOS reserves the right to accept or deny this renewal without giving further explanations under the following conditions:

- a. The Beneficiary may not request the renewal of his/her certificate if he/she has made use of any of the MAS SERVICIOS services during the term of the first certificate.
- b. The Beneficiary may renew his/her certificate with a plan that has the same coverage as the first or greater, it will not be extended with less than the coverage originally contracted.
- c. The Beneficiary must request authorization for the issuance of a new certificate exclusively to the issuing agent with which it contracted the original assistance or having been purchased on the website, through the "Contact" form in it, indicating the number of days it wishes to contract, the issuing agent is obliged to inform MAS SERVICIOS that it is an extension and will request authorization for the new contracting period.
- d. The request for the issuance of a new certificate must be made before the end of the validity of the original certificate.
- e. The Beneficiary must make payment of the new certificate at the time of issuance.

The new plan of your travel assistance service and its corresponding certificate issued under the conditions referred to in this clause may not be used under any circumstances, to initiate or continue the treatment and /or assistance of problems that have already arisen during the term of the first original and/or previous certificate or before the term of the new plan and/or certificate, regardless of the ongoing procedures or treatments have been authorized by MAS SERVICIOS or by third parties.

Any medical assistance treated will be limited to the initial amount contracted. Excluding the benefit of the upgrade to deal with a hospital continuity or discomfort.

## DEFINITIONS

Below are the definitions of the terms used in these general terms, for a greater understanding by the Beneficiaries of a MAS SERVICIOS plan:

*Accident:* is the generative event of bodily damage suffered by the Beneficiary, caused by foreign agents, out of control and in motion, external agents, violent and visible and sudden. Whenever the term "accident" is mentioned, the resulting injury or ailment shall be deemed to have been caused directly by such agents and regardless of any other cause. Accidents caused by neglect, provocation or lack of prevention measures by the Beneficiary are excluded from any assistance. If bodily harm is caused as a result of causes other than those mentioned above, the Beneficiary will be covered up to the amount of Medical Assistance for Sickness of the purchased plan.

*Catastrophe:* An infamous event that severely alters the regular order of things, where many people are involved.

*Assistance Services Central:* This is the office that coordinates the provision of the services required by the Beneficiary in connection with their assistance. It is also the department of professionals that provides the supervision, control and coordination services involved and decides all those matters and / or benefits to be provided or provided under these general conditions that are related to medical matters.

*Certificate:* This is the document that you receive at the time of purchase of your PRODUCT MAS SERVICIOS and that takes your data to be informed to the plant if you request assistance.

*Medical Department:* Group of medical professionals of MAS SERVICIOS who intervene and make decisions in all matters and / or services provided or that will be provided in accordance with these General Conditions.

*Amateur Sports:* It is practiced by amateurs, leisure and / or recreational activities.

*Professional Sports:* It is the one practiced for profit, or not, performed in any type of competition such as intercollegiate, tournaments, championships, sports that pose a high risk, among others.

***Disease or Acute Medical Condition:*** A short and relatively severe process of alteration of the state of the body or any of its organs, which may interrupt or alter the balance of vital functions, which may cause pain, weakness or other manifestation foreign to the normal behavior of the body.

***Congenital disease:*** Pathology present or existing before the time of birth.

***Chronic Disease:*** Any continuous pathological process, repeating and persistent over time, greater than 30 days long.

***Pre-existing illness or Medical Condition:*** any pathological physical process that recognizes an origin or etiology prior to the start date of the plan or travel (or that is later) and that is feasible to be objectified through complementary diagnostic methods of common use, accessible and frequent in all countries of the world (including, but not limited to: Doppler, nuclear, magnetic, catheterization, radiology, etc.). Pre-existence means any disease, or state of the body, or process known or not by the Beneficiary, which has needed or required a period of formation, gestation, or incubation within the Beneficiary's body before the journey has begun. Clear and common examples of pre-existences to cite only some are: kidney or gallstones, blockages of arteries or veins by clots or others, respiratory diseases such as asthma, lung problems, emphysemas, HIV, usually problems related to blood pressure, glaucoma, cataracts, nephritis, ulcers or gastric diseases, diseases resulting from congenital deformations, genital mycosis, liver abscesses, cirrhosis, blood sugar, high cholesterol, triglycerides, and others. They require a short or long training period, but in all cases longer than a few hours of flight, recognizing that such a state or pathological process existed within the organism before getting on the plane or the means of transport on the date of entry into force of the assistance service, even if the symptomatology first occurs after the journey began.

***Illness or Recurring Medical Condition:*** return, recurrence or onset of the same disease or condition after being treated.

***Sudden or Unforeseen Medical Disease or Condition:*** Early, Unthinking, Unforeseen disease contracted after the beneficiary's effective date of travel care MAS SERVICIOS.

***Serious Illness:*** It is an alteration or deviation of the physiological state in one or more parts of the body, manifested by symptoms and characteristic signs, and whose evolution is more or less foreseeable is to say any ailment or injury with permanent or non-permanent sequelae that partially limit or completely impede the usual occupation or activity of the affected person, or incapacitate for any activity and requires or does not require the assistance of other people for the most essential activities of life.

***Force Majeure:*** Because it cannot be foreseen or resisted, it exempts from the fulfillment of any obligation and/ or that comes from the will of a third party.

***First Need Expenses:*** expenses incurred for the purchase of items of personal and non-transferable use. These are understood by these, only and exclusively: clothing (outer clothing, underwear), shoes, personal grooming elements (shampoo, conditioner, soap -liquid, bar, powder-, toothbrush, toothpaste, deodorant, shaving cream, shaving machine, feminine hygiene products) and makeup. Any other element not considered in the above list shall be deemed to be excluded from any type of coverage.

***Treating Physician:*** Medical professional provided or authorized by the CENTER of Assistance Services of MAS SERVICIOS who assists the Beneficiary in the place where he/she is located.

***Maximum Global Amount:*** The total amount of expenses that MAS will pay and/or reimburse the Beneficiary for all services provided under these General Conditions, and according to the contracted assistance product.

***Maximum Global Amount in case of multiple event:*** The sum of expenses that MAS will pay and/or reimburse all affected Beneficiaries in the event that the same event causes injury or the death of more than one Beneficiary, as detailed in each benefit and the general exclusions of these general conditions.

***Stable Patient:*** who has no variation in his health status and often refers to the symptoms and signs not changed recently.

*Assistance Plan or Product:* It is the detailed set of travel assistance services offered, indicating a taxation list of them and their monetary, quantitative, geographical and age limits of the Beneficiary.

*Term or Gap Period:* The time interval during which the coverages included in the Plan are not effective. This period is calculated by days from the date of commencement of the certificate, provided that the Beneficiary is already outside the usual place of residence at the time of contract.

*Maximum Tops:* Maximum coverage amounts by MAS SERVICIOS, indicated in the certificate for each service and according to the contracted support product.

## BENEFICIARY / LIMIT AGE

The Beneficiary is the natural person whose name is reflected in the assistance plan and is the sole beneficiary of all its coverages up to the anniversary day, inclusive, of its age limit according to the type of Plan purchased, the date from which the Beneficiary loses all entitlement to benefits and all assistance benefits defined in these general conditions, as well as the right to any refund or claim arising in events after that day.

The benefits of the respective Plan may be received exclusively by the Beneficiary and are non-transferable, so the same must verify and prove its identity, present the corresponding certificate or letter and travel documents to determine the validity and applicability of the services or benefits requested.

The Beneficiary may make use of the contracted services up to zero 00:00 hours of the day of the start of the reservation ( check-in) until the date of the check-out according to the contracted plan. From that date the Beneficiary loses all entitlement to benefits as to the Assistance benefits defined in these General Conditions, as well as the right to reimbursement or any claim arising from events after that day. As an example, a person is considered to be 84 years old until the day before they turn 85.

## VALIDITY

It is the time lapse in which the benefits indicated in the plans of a medical assistance service MAS SERVICIOS, including this one, is the one that elapses from the zero hours of the day of the beginning of validity of said plan, being the passenger in his place of origin or residence, until 24 (23.59) hours of the day of the end of that validity both dates reflected in the certificate acquired by the Beneficiary. The termination of the term, will imply the automatic cessation of all benefits, or services in progress or not, including those cases or treatments initiated at the time or before the end of the term.

Plans in the "Short Trips" category will have a maximum validity of 90 consecutive days of travel. After this period, the Beneficiary will lose all benefit from the assistance services contracted while on that trip.

The MAS SERVICIOS plans, operate in the modality of days, therefore, once the term of a plan has started, it is not possible to interrupt it, the periods of days not used in the certificates are non-refundable. After the term of a plan expires, it expires and cannot be reactivated later.

The purpose of the national or international trip may be tourist, for reasons of study or work, according to the contracted plan; at no time may it guarantee people to pursue a high-risk professional activity. If the reason for the Beneficiary's journey is the execution of work or tasks involving a professional risk, for performing high-specialization tasks where life is exposed, is exposed to hazardous substances, to the management of heavy machinery or operating with gases, air pressure or hydropneumatic fluids, which require special physical skills, or where exposed to danger and as a result suffers an accident or a consequential illness, MAS SERVICIOS will be exempt from all responsibility for providing its services or assuming costs arising from such circumstances, and in these cases it will be the employer's obligation to assume them through its plan of responsibility for professionals. This regulation also applies to persons who are not linked to work with a company and who act on their own as self-employed or in an illegal immigration or employment situation.

In cases where the Beneficiary is hospitalized for an illness and/or accident covered by MAS SERVICIOS on the date of termination of the coverage period, only hospitalization expenses will be covered within the coverage of medical expenses for illness and/or accident as appropriate as follows:

1. Until the contracted coverage has been exhausted, or
2. Until the doctor signs the Beneficiary's discharge over the course of the eight (8) days of coverage expansion

Any assistance or treatment will cease and will not be the responsibility of MAS SERVICIOS once the Beneficiary returns to his place of residence or the period of validity of the chosen plan expires except for the reasons mentioned above.

Note: In cases where the Beneficiary is already in the destination city/country and requests authorization to issue a travel assistance plan, provided that it is authorized by the Emergency Center, that plan will be 5 days short.

## GEOGRAPHIC VALIDITY

Geographical coverage will be national or international depending on the certificate purchased. Regardless of where the Beneficiary is located, you will be given coverage if you require assistance according to the respective plan purchased, as follows:

The coverage will be given from 80 kms. away from the city of habitual residence. In any event, the city of habitual residence of the Beneficiary is excluded.

## PROCEDURE TO REQUEST ASSISTANCE - ASSISTANCE CENTRES

If you need assistance, and regardless of your geographical location in strict accordance with the other clauses of this general condition, the Beneficiary will contact the MAS SERVICIOS Assistance Center. In order to contact the plant by telephone, the Beneficiary must request the call receivable or call directly to the Assistance Services Center at the numbers enabled by the cities/countries indicated.

In case of charge for calling the Assistance Service Center, MAS SERVICIOS will reimburse the Beneficiary for the cost of the call; for this we request to keep the receipt or invoice for the payment of said call, where the charge is reflected to one of the numbers indicated below.

**Mexican Republic:** +52 800 953 1674 | **Rest of the World:** +1 954 516 6976 | **USA(toll free):** +1 800 391 0540

**Whatsapp:** +57 316 763 6033 | **Email:** [atencionviajero@masservicios.com.mx](mailto:atencionviajero@masservicios.com.mx)

It is the Beneficiary's obligation to always call and report the emergency. In cases where the Beneficiary by force majeure, if the health problem is serious, the need for assistance is urgent and/or you are not able to call personally must and may be made by any companion, friend or family member but always the call or notice must be made no later than 24 hours after the emergency has occurred. Failure to comply with this rule leads to the automatic loss of any claim rights on the part of the Beneficiary.

Note: The Beneficiary must contact the numbers indicated on his/her attendance certificate.

## BENEFICIARY'S OBLIGATIONS

In all cases, in order to obtain the services the Beneficiary must:

1. Request and obtain authorization from the Assistance Services Center before taking any initiative or compromising any expenses in relation to the benefits granted by the Certificate of Assistance plan. In cases where authorization has not been requested from the plant or the authorization has been obtained, no refunds will be made, nor will they give rights to claims.
2. It is clearly understood that notification to the plant is essential, even if the problem raised is fully resolved, since MAS SERVICIOS will not be able to take charge of the cost of any assistance without the prior knowledge and authorization of the Assistance Services Center.

3. The Beneficiary accepts that MAS SERVICIOS reserves the right to record and audit the telephone conversations it deems necessary for the proper development of the provision of its services. The Beneficiary expressly accepts the modality indicated and declares its agreement by the possible use of the records as evidence in the event of disputes regarding the assistance provided.
4. If the Beneficiary or a third party is unable to communicate by an unintentional circumstance or reason of force majeure with the Assistance Services Center before being assisted, the Beneficiary or a third party, with the inescapable obligation, shall inform no later than 24 hours of the event. Failure to notify within 24 hours leads to the automatic loss of the Beneficiary's rights to claim or seek any compensation.
5. Accept and abide by the solutions indicated and recommended by the Assistance Service Center and, where appropriate, consent with the repatriation to your city/country of origin when, according to medical opinion, your health status allows and requires it.
6. Provide the documentation that confirms the provenance of the case, as well as all the original proofs of expenses to be evaluated for possible reimbursement by MAS SERVICIOS and all medical information (including the one before the beginning of the trip), which allows the central to evaluate the case.
7. In all cases where MAS SERVICIOS requires it, the Beneficiary must grant the authorizations to disclose his/her medical history by completing the Record Release Form that the medical center will request to sign and fax back to the Assistance Services Center. In addition, the Beneficiary absolutely and irrevocably authorizes MAS SERVICIOS to require on its behalf any medical information to professionals both abroad and in the country of their residence, in order to be able to evaluate and possibly decide on the applicability of restrictions in cases of pre-existing diseases or conditions or of the condition that has given rise to their assistance. We especially recommend that Beneficiaries always take the Form when registering with a hospital, this will be of great help in cases of reimbursements and/or in decision-making on certain cases that require the study of the patient's medical history.

Note: In some countries and primarily in the United States of America and Europe, due to computer standardization reasons most medical care facilities such as hospitals, offices, clinics, laboratories typically send bills and/or payment claims to patients served, even after bills or bills have been paid and paid. In the event of this, the Beneficiary must contact the Office of the Assistance Services Headquarters by dialing the numbers provided above or writing to [claims@wt-assist.com](mailto:claims@wt-assist.com) and notifying this situation. The Central will be responsible for clarifying this situation with the supplier.

### OBLIGATIONS ASSUMED BY MAS SERVICIOS

1. Comply with the benefits described in the General Conditions of events covered in the contracted plan during the term of the certificate.
2. MAS SERVICIOS is expressly released, exempt and excused from any of its obligations and responsibilities in the event that the Beneficiary suffers any damage or requests assistance as a result and/or arising from fortuitous or force majeure case, which are cited by way of example and not limited to: catastrophes, arms, floods, storms, international war or civil war declared or not, rebellions, internal upheation, civil insurrection, guerrilla or anti-guerrilla acts, hostilities, retaliation, conflicts, embargoes, arrests, strikes, popular movements, lockout, acts of sabotage or terrorism, labor unrest, acts of government authorities, etc.; as well as problems and/or delays resulting from the termination, interruption or suspension of communication services. When such elements intervene and after they have been exceeded, MAS SERVICIOS undertakes to implement its commitments and obligations within the shortest possible time.

MAS SERVICIOS undertakes to analyze each refund request to determine whether it is appropriate and accordingly to refund the amounts that correspond according to these general conditions and coverage amounts of the Contracted Plan. All compensation and/or withdrawals and/or other expenses to be borne by MAS SERVICIOS, under this contract, may be paid in local currency.

- a. The times set for the processing of a refund are:
- b. The Beneficiary has up to thirty (30) continuous days from the end of the certificate to submit the documentation and endorsements necessary to initiate the refund process. After this period, no documents will be accepted to process any refunds.
- c. Once the documents are received, MAS SERVICIOS has up to five (5) continuous days to request any missing documents that have not been delivered by the Beneficiary.
- d. After receiving all required documents, MAS SERVICIOS will proceed for the next fifteen (15) business days to analyze the case and issue the letter of approval or denial of such refund.
- e. When the refund is due, MAS SERVICIOS will proceed to make the payment in 15 days, after the date of receipt of the complete written data for the making of the transfer.

Note: Refunds paid directly by MAS SERVICIOS can be made via bank transfer, money order or check. MAS SERVICIOS will bear the expenses generated by the money order agency, the sending of the check, as well as the direct collections of your bank; additional charges made by the beneficiary's bank will be covered by it.

## CURRENCY OF SCOPES AND SERVICES

MAS SERVICIOS makes available the benefits and its maximum coverage limits on each contracted certificate expressed in US Dollars (USD) depending on the chosen plan and its geographic coverage.

## PROVIDING SERVICES

Some benefits are included only in some MAS SERVICIOS products. Check your certificate for contracted benefits and caps. If you do not have any items on your certificate, it is because the product you choose does not have this service. In addition, according to the plan, coverage may be shared for 4 Holders(passengers).

### 1.A MEDICAL ASSISTANCE BY ACCIDENT / 1.B MEDICAL ASSISTANCE FOR NON-PRE-EXISTING ILLNESS

- Medical consultations: They will be provided in case of accident and illness or acute and unforeseen medical condition.
- Specialist Care: It will be provided only when indicated and authorized by the Medical Department of the MAS SERVICIOS Assistance Center or by the treating physician at the plant.
- Complementary Medical Examinations: Only when indicated and previously authorized by the Medical Department of the Assistance Services Center.
- Internments: Depending on the nature of the injury or illness, and provided that the Medical Department of the MAS SERVICIOS Assistance Center prescribes it, the Beneficiary will be interned at the health center closest to where it is located. This item will apply only to the Beneficiary of the assistance plan, and for no reason will bed and/or feeding be covered in the hospital or clinic for an accompanying person.
- Surgical Interventions: When authorized by the Medical Department of the Assistance Services Central, in cases of emergency that immediately require treatment, and that cannot be deferred or delayed until the Beneficiary returns to his country of origin.
- Intensive Therapy and Coronary Unit: when the nature of the disease or injury so requires, and always with the prior authorization of the Medical Department of the Assistance Center this service will be authorized.



Note: The Assistance Services Center reserves the right to decide the most appropriate of the treatments proposed by the medical body and/or repatriation to the country of residence if their physical condition permits it. If, in the opinion of the treating physicians of the Assistance Service Center, it is possible to return to the place of origin to receive long-term treatment, programmable surgery or non-urgent surgeries, the Beneficiary will be repatriated, who is obliged to accept such a solution, losing in case of rejection all the benefits granted by his plan MAS SERVICIOS.

## 1.B MEDICAL ASSISTANCE BY COVID-19

The Beneficiary shall always and without exception contact the Emergency Centre, who in turn will coordinate a virtual appointment by Telemedicine and, in accordance with the opinion provided by the Medical Department, if the Beneficiary presents symptomatology related to COVID-19, the Assistance Center will coordinate the relevant medical consultation, in accordance with the safety and health protocols of each country, covering the expenses incurred up to the coverage limit indicated in the certificate.. The following expenses will be covered under the same cap:

1. Hospital expenses for COVID-19: In case of requiring hospital hospitalization to stabilize the condition of the Beneficiary..
2. Mechanical respirator expenses: If the Medical Department, in conjunction with the treating physician, deems it necessary to use a mechanical respirator, the Central will authorize and cover such expense.

Note: The age limit for this benefit is 70 years.

## 1.C FIRST MEDICAL CARE FOR PRE-EXISTING AILMENTS

In cases where the Beneficiary specifically contracts coverage for emergencies suffered by a pre-existing and/or chronic condition, it will be covered up to the amount clearly specified on his/her certificate. Coverage provided for chronic and/or pre-existing diseases includes the following eventualities:

Acute episode or non-predictable event, decompensation of known or previously asymptomatic chronic and/or pre-existing diseases. This coverage is provided exclusively for primary medical care in the acute episode, or in the case of non-predictable, the emergency must require assistance during the trip and cannot be deferred until return to the country of residence, the Assistance Center reserves the right to decide the most appropriate treatment among those proposed by medical personnel and/or repatriation to their country of residence. Repatriation will be a solution in cases where treatments require long-term evolution, scheduled surgeries or non-urgent surgeries, the Beneficiary is obliged to accept this solution, losing in case of rejection of the solution of all the benefits offered by the assistance plan.

The initiation or continuation of treatments, diagnostic procedures, research, or diagnostic and therapeutic behavior, which are not related to acute and unpredictable episode, is excluded from this benefit.

All diseases related to sexual transmission are excluded from this coverage, including, but not limited to, syphilis, gonorrhoea, genital herpes, chlamydia, human papilloma virus trichomonas vaginalis, trichomoniasis, human immunodeficiency virus (HIV), acquired immunodeficiency syndrome (AIDS), among others.

It's not about any of our plans, dialysis procedures, transplants, oncology treatment or psychiatric treatment, hearing aids, glasses, contact lenses, dental bridges, pacemakers, implantable defibrillators, external respirators, implantable devices, specific disposable equipment, etc. diseases caused by ingestion of drugs, narcotics, medicines that are taken unreliable without a prescription, alcoholism, etc.

Injuries sustained during an unlawful act are not under our cover.

## BENEFICIARY OBLIGATIONS:

1. The Beneficiary shall follow all medical instructions given by the treating physician assigned by THE PROVIDER and take all medicines as prescribed and as required.

2. If the Beneficiary interested in hiring a plan that includes emergency assistance coverage for pre-existing conditions, Suffer any of the following conditions: any type of cancer, heart disease, chronic lung disease and/or chronic liver disease, the Beneficiary should consult his/her personal physician in his/her home country before starting the trip and obtain written confirmation that he is able to travel for all planned days, the desired destination and can seamlessly do all scheduled activities.
3. The Beneficiary will not be able to start the journey after receiving a terminal diagnosis.
4. In order to access this coverage, the Beneficiary must have been stable for more than 12 months.

In the event that the reason for the trip is determined to be the treatment abroad for a chronic or pre-existing condition, the Assistance Center will deny coverage.

## 1.D OUTPATIENT MEDICATIONS.

In the coverage limits, THE PROVIDER will bear the costs of the drugs prescribed by the Treating Physician of the Assistance Services Center up to the amounts set out in the coverage caps of the contracted plan. Disbursements made by the Beneficiary for the purchase of medicines previously authorized by the Assistance Service Centre shall be refunded, within the limits of coverage and once returned to the country of origin, and against the prior presentation of the original proofs of purchase, of the original copy of the opinion or medical report clearly indicating the diagnosis received, as well as the formula or prescription. We recommend that Beneficiaries do not forget to request these documents from the treating physician, the failure to submit these documents may result in non-reimbursement of expenses.

It is recorded and reported that the costs of medicines for pre-existing diseases will not be borne by THE PROVIDER, so they have been diagnosed by the Medical Treater of the Central Assistance Services Center. Medications are also excluded for the treatment of mental or mental or emotional illnesses, even in cases where the medical consultation has been authorized by the Medical Department of THE PROVIDER.

Contraceptive pills, contraceptive injections, intrauterine devices or any other method of family planning will not be covered for any reason, so they have been diagnosed by the Treating Physician at the Central Assistance Services Center.

Note: Medical prescriptions for initial symptom recovery will only be authorized for the first 30 days of treatment.

## 1.E MEDICATIONS IN CASE OF HOSPITALIZATION.

In the event that the Beneficiary is hospitalized as a result of an accident or non-pre-existing illness MAS SERVICIOS will cover the medicines that are directly related to the reason of the hospitalization regarding the medical care provided and are in accordance with the diagnosis granted by the Medical Department of the Assistance Center, up to the limits indicated in its certificate.

This service will not be valid if the diagnosis is the result of a pre-existing condition.

## 1.F HOME DOCTOR.

In accordance with the recommendations of the Medical Department, and the availability of providers, a doctor to the Beneficiary's home will be coordinated.

## 1.G 24HRS TELEPHONE MEDICAL ORIENTATION.

MAS SERVICIOS Beneficiaries may receive recommendations through conference call and/or videoconference (subject to availability) with a health care professional who will provide guidance on what to do to alleviate their symptoms by staying at home, or it will be recommended to be assisted in emergency centers or emergency rooms, according to the severity of the symptoms described therein.

## 1.H PSYCHOLOGICAL ASSISTANCE.

24-hour psychological support phone for Beneficiaries who, due to health repatriation, death of a family member or natural disaster have been affected during their trip. This service is provided as psychological support at times that can generate strong emotional tension, in no case can substitute the direct attention of the Psychologist or Psychiatrist of the Beneficiaries, so it should not be used in any case by them to establish a diagnosis or self-medicate, having to consult with the aforementioned professionals in each particular case.

## 1.I TELEMEDICINE

The Beneficiary of MAS SERVICIOS will have the service available 24 hours a day 365 days a year, for the purpose of attending virtual general medicine appointments by a Telemedicine Specialist about its pathology through a medical consultation. The Beneficiary is valued, diagnosed and treated, with appropriate drug recommendations and prescriptions, according to the needs of your symptomatology.

From the comfort of your home the Beneficiary of MAS SERVICIOS can request virtual medical assistance with one of our health professionals; according to the availability of the user a meeting time with our doctor is agreed. A link is generated and sent to the user in order to start virtual medical assistance.

Note: The medical department of MAS SERVICIOS reserves the right to decide the most appropriate of the treatments proposed by the medical body.

## 1.J AMATEUR SPORTS

Provides coverage of equestrian sports, snow sports, team sports, strength sports, winter sports, martial arts, sports shooting championships practiced in regulated ranks; water sports, skiing, surfing, recreational kitesurfing, recreational diving (up to 15 meters), swimming, skating, snowboarding, when practiced as amateur activities.

Note: Any injury caused by professional and/or tournament practices, competitions, etc. is excluded from coverage.

## 2.A DENTAL ASSISTANCE.

In the limits of coverage, THE PROVIDER shall be responsible for dental care expenses arising from an emergency, due to or caused by trauma, accident or infection, limited only to the treatment of pain and/or removal of the tooth piece resulting from infection or trauma only. Dental duct treatments, fit changes, crowns, prosthetics, sealings, dental cleanings, smile designs or any other treatment not clearly specified in these conditions are excluded from coverage.

## 3.A EMERGENCY MEDICAL TRANSFER.

In case of emergency and if deemed necessary by the Assistance Center, the Transfer of the Beneficiary to the nearest health facility will be arranged, by the means of transportation that the Medical Department of the Assistance Center deems more appropriate and as appropriate to the nature of the injury or illness. It is also established that even for the cases of treatments and surgeries that occur in cases classified as emergency or emergency the health transfer must be previously requested and authorized by the MAS SERVICIOS Central. Failure to comply with this standard exempts MAS SERVICIOS from taking care of coverage for such transfer.

## 3.B HEALTH TRANSFER OR REPATRIATION.

Health repatriation means the transfer of the sick or injured Beneficiary from the place where it is located to the airport of entry of the city of habitual residence and where the certificate should have been issued. Only the Medical Department of MAS SERVICIOS may authorize to take all the provisions mentioned in this clause, being the Beneficiary or a family member prohibited from performing it on his own without the prior written authorization of MAS SERVICIOS. In addition, repatriation must be authorized and justified medically and scientifically by the Medical Treatment of MAS SERVICIOS, in the event that the Beneficiary and or his relatives or companions decide to make the repatriation leaving aside or without requesting the opinion of the Medical Department of MAS SERVICIOS, if it is carried out in this way, no liability will lie with MAS SERVICIOS being therefore repatriation as well as all other expenses and consequences, responsibility of the Beneficiary or his or her family or companions, without the right to claim against MAS SERVICIOS.

When the Medical Department of MAS SERVICIOS in common with the Treating Physician deems necessary and recommends the repatriation of health, it will be carried out in the first instance by the means of transport available most convenient for this purpose, and / or by commercial airline aircraft, in economy class and subject to availability of air quota, to the airport of entry of the city / country of residence or purchase of the certificate. MAS SERVICIOS will be responsible for the payment of the differences for change of date of the ticket or the purchase of a new one if the original is a ticket without possibility of change.

This assistance includes your transportation by ambulance or other means of transport that is compatible with your health status and approved by the Medical Department of MAS SERVICIOS from the place of internment to your place of residence, with the necessary support structure including stretcher, wheelchairs, walker, medical accompaniment, etc.

No repatriation expenses shall be recognized where the cause giving rise to it is as a result of a pre-existing illness or is due to an event that falls within the general exclusions, except in plans that contemplate pre-existences. This benefit will apply only and exclusively within the effective dates of the certificate.

### 3.C FUNERAL TRANSFER OR REPATRIATION.

In case of death of the Beneficiary during the term of the MAS SERVICIOS certificate due to an event not excluded in the general conditions. MAS SERVICIOS will organize and cover the funeral repatriation by taking charge of the costs of: simple mandatory for national or international transport, administrative formalities and the transport of the body by means that they consider most convenient to the place of entry to the city/country of habitual residence of the deceased, up to the limit specified in the benefits table.

If the rightholder wishes, within this same coverage, he can opt for the cremation of the body and will also include all administrative procedures to which there is room and transfer of ash to the city/country of habitual residence of the deceased.

The costs of final coffin, funeral formalities, land or air transfers in the city/country of residence and burial will not be borne by MAS SERVICIOS.

MAS SERVICIOS shall be exempt from providing the services and bear the costs related to this benefit in the event that the Death of the Beneficiary arises from a suicide or death as a result of alcohol intake or any type of drug, or by a pre-existing, chronic, or recurrent disease or medical condition.

### 4.A HOTEL EXPENSES FOR CONVALESCENCE.

When according to the treating physician and in common with the Medical Department of the Central Assistance Services, the Beneficiary would have been admitted to a hospital for at least five (5) days and that upon departure must be held for five rest, THE PROVIDER shall cover the hotel expenses up to the amount indicated in its assistance plan. This item will apply only to the Benefitee of the assistance plan, and for no reason will the expenses for an accompanying person be covered.

It is clarified that THE PROVIDER will not assume any hotel expenses per convalescence when the hospitalization has been aroused by a pre-existing illness or medical condition.

Note: Such rest shall be ordered by the central doctors exclusively and shall only contemplate covering the cost of the room without any food or other expenses such as laundry, telephone calls (except those made to the headquarters of THE PROVIDER.), mini bars, etc.. EL PROVEEDOR

### 4.B EARLY RETURN FOR DEATH OF A FAMILY MEMBER.

If the Beneficiary is required to return to his/her city/country of habitual residence due to the death of a direct family member (parent, spouse, child or sibling) there, MAS SERVICIOS will take care of the difference in the cost of the Beneficiary's return airfare to its city/country of origin, only when your ticket is of reduced fare by fixed or limited return date. This assistance must be accredited by a certificate of death of the family member and a document attesting to the kinship.

#### 4.C ADVANCE RETURN BY SINIESTRO IN DOMICILIO.

In the event of fire, explosion, flood or theft with damage and violence at the home of a Beneficiary, while the Beneficiary is traveling, if there is no person who can take charge of the situation and if his original return ticket does not allow him to change the date free, THE PROVIDER shall take charge of the difference that corresponds or the cost of a new tourist class ticket from the place where the Beneficiary is located to the airport closest to the beneficiary's home. This request for assistance must be credited by submitting to the Assistance Services Center the original of the corresponding police report, within twenty-four hours of the event. The Beneficiary must unfailingly contact the Assistance Service Center in order to be authorized. Refund orders will not be accepted without any justification.

#### 4.D ACCOMPANIMENT OF CHILDREN UNDER 15 YEARS OF AGE.

If a Beneficiary travels as the only underage company of fifteen (15) years also beneficiary of a MAS SERVICIOS assistance plan and due to illness or accident found by the Medical Department of the Assistance Services Center, is unable to take care of them, MAS SERVICIOS will organize the movement of such minors to the usual domicile in their city/country of origin, by the means it deems most appropriate.

#### 4.E ACCOMPANIMENT OF SENIORS OVER 75 YEARS OF AGE.

If a Beneficiary travels as the only company of seniors over seventy-five (75) years, also beneficiary of a MAS SERVICIOS assistance plan, and due to illness or accident found by the Medical Department of the Assistance Center, is unable to take care of them, THE PROVIDER will arrange for them to travel such elders to the usual domicile in their country of origin, by the means it deems most appropriate.

#### 4.F TRANSFER OF A FAMILY MEMBER BY EMERGENCY.

In the event that the hospitalization of a Beneficiary, traveling alone and unaccompanied, is more than ten (10) days, MAS SERVICIOS will take care of an airfare in economy class, subject to availability of space for a family member of company.

#### 4.G GUIDANCE IN DOCUMENT EXTRACTION.

MAS SERVICIOS will guide the Beneficiary for the reporting of the loss or theft of passport, visa and/or plane tickets, for which it will make available the services of the Nearest Assistance Center. Likewise, MAS SERVICIOS will advise the Beneficiary by giving the instructions to interpose the respective reports, and to the recovery of them.

#### 4.H LOCATION OF CHECKED BAGGAGE.

MAS SERVICIOS will advise the Beneficiary for the reporting of the loss or theft of his/her luggage and personal effects, for which he/she will make available the services of the Nearest Assistance Service Center, giving him instructions for the Beneficiary to interpose the respective reports, and process the recovery thereof.

#### 4.I CONCIERGE ASSISTANCE.

The MAS SERVICIOS concierge service is available 24 hours a day, 365 days a year to assist Beneficiaries in obtaining information on tickets for shows, travel arrangements, car rental, reservations for plays and any other information the Beneficiary may need, such as:

- a. A migration process,
- b. What road to take to reach a certain destination,
- c. Telephone number, address and schedule of the American or Canadian Embassy or Consulate in a given Mexican city,
- d. Hotels in a city in the Mexican Republic.

The Beneficiary shall be responsible for all costs and expenses related to the request for concierge assistance services; this service is clearly informative.

## 5.A LEGAL ASSISTANCE 24 HRS.

In the event of an unexpected legal problem, MAS SERVICIOS will coordinate as a connection the services of a lawyer; it is established that the Beneficiary is responsible for the contracting of the professional services of the lawyer, as well as the payment of all the fees and expenses that the case generates.

## 6. TRAVEL DISRUPTION

**INTERRUPTION:** Only services not initiated by the Beneficiary will be taken into charge in the event of interruption. The Beneficiary shall be recognized up to the contracted limit indicated on the voucher, the additional expenses incurred for reasons of fines and penalties generated by the rescheduling, cancellation or interruption of the trip abroad involving airfare, reservations in hotels, cruises, as well as values that are not recovered or re-booked for the final cancellation of the trip, which include the days not enjoyed of your trip, the loss of scheduled excursions, value of tickets for shows, sporting or public events, short courses (less than 6 months), as long as they have been reported and their schedule is within the effective dates without the contracted limit.

In order to be a creditor of this benefit, the Certificate Beneficiary must:

1. Hire the plan with a difference of up to 72 hours after the tour and/or cruise package is contracted. As long as you have not started the penalty period published by the travel agency or shipping company.
2. Give notice to the Assistance Services Center within 24 hours after the event that prompts the cancellation. At the same time, the Beneficiary must cancel with the tourism body Cruise, Travel Agency, Tour Operator, etc. his trip, so as not to increase the penalty that the same agency will apply to him.
3. Submit all documentation that MAS SERVICIOS considers to evaluate the coverage of this benefit, including, but not limited to: document that clearly and accurately demonstrates the reason for cancellation of travel (medical report, death item, among others), letters from the respective service providers, invoices, payment receipts. (See specific requirements in the cases of cruises listed below).
4. The Beneficiary has up to thirty (30) continuous days from the date of the event to submit the complete documentation and endorsements necessary to initiate the refund process. After this period, no documents will be accepted to process any refund.

Note: For Beneficiaries over 75 years of age the value of the certificate will have an increase of 100%.

Cruise trip before its start:

The Beneficiary shall in this case:

- Immediately notify the shipping company in writing and obtain from the shipping company a proof indicating unequivocally the date of such formal notification of the impossibility of starting the cruise on the ship and date originally contracted.
- You must also obtain from the shipping company the General Conditions of Contracting Cruises, where the procedure for applying penalties or criminal clauses for early cancellation of a fully paid and contracted cruiser is clearly indicated.
- You must obtain proof from the shipping company showing the amount of the penalty applicable to your particular cruise contract and the amount of the refund if applicable.

Once the above documentation has been obtained, you must demonstrate in writing to THE PROVIDER in a clear and reliable manner the causal or causal that caused the cancellation of the trip and send to the Assistance Service Center all such documentation for possible verification by THE PROVIDER and possible reimbursement of being appropriate.

Justified causes for the purposes of this benefit are:

1. The death, accident or serious illness not pre-existing of the Beneficiary or family member in the first degree of inbreeding (parents, children or siblings) or spouse, being understood as a serious illness, an alteration of health that, in the opinion of the Medical Department of the Central Assistance Services, makes it impossible for the Beneficiary to initiate the trip on the date originally contracted.
2. The summons as a party, witness or jury of a court.
3. Damage that, by fire, theft, theft or by the force of nature in their habitual residence or in their professional premises that make them uninhabitable and inescapably justify their presence.
4. Medical quarantine by accident or illness that forces the Beneficiary to maintain within its country of origin.
5. The Beneficiary's verified employment dismissal, dated after the hiring of the assistance plan.
6. Emergency call for military, medical or public service.
7. Epidemic, natural disasters or volcanic ash.
8. If the person accompanying the Beneficiary on the trip, the person(s) sharing the same hotel room or cruise cabin with the Beneficiary, i.e. first-degree family inbreeding (parents, children or siblings) or spouses, also the holder of an assistance plan under the same conditions as the Beneficiary and such accompanying companion(s) would be obliged to cancel the trip for any of the reasons listed above.

## 6.B COVID-19 TRAVEL INTERRUPTION

If covered by the assistance code, the Beneficiary may cancel his or her journey in advance for the following reasons:

1. In case of illness and positive diagnosis of COVID-19 of the Beneficiary, travel companion or family member in first degree of inbreeding.
2. If the airline does not allow you to board the aircraft on suspicion of COVID-19, only in case the airline does not offer you credit alternatives, rescheduling, among others. This restriction must be supported by an official letter from the airline informing the inability to start the journey.

In any case, the certificate must be issued at least 14 days before the date of departure, or start of validity, whichever comes first.

Note: Requests for Cancellation of Travel will not be covered if it is due to a border closure by the Government of origin or destination. In addition, if the hotel provider, airline or any other tour operator offers the Beneficiary the option to leave open the dates, reschedule, credit in favor, and among other solutions, even if the Beneficiary rejects such option, there will be no refund for expenses incurred.

Acquired the plan under the conditions indicated above, and if the benefit is applicable, the validity of the plan begins at the time the Beneficiary acquires his/her assistance plan and ends at the time of the beginning of the validity of the certificate. This benefit does not apply to Beneficiaries over 75 years of age.

Note: Any events that occurred prior to the issuance of the Assistance Plan are excluded from coverage. In the event of the same event involving more than one reservation and whatever the number of Beneficiaries involved in it, the maximum liability for compensation of MAS SERVICIOS for all affected Beneficiaries shall not exceed FORTY THOUSAND NORTH AMERICAN DOLLARS US\$40,000.00 at the maximum lump sum for the same claim. In the event that the sum of the compensation to be paid exceeds the amounts above, each individual compensation shall be made on a pro rata basis of the maximum liability defined in the certificate.

## EXCLUSION APPLICABLE TO ALL SERVICES AND BENEFITS

The following events are expressly excluded from the MAS SERVICIOS support system:

1. Any additional expenses benefit or service covering hotel expenses to a Beneficiary including the rest of the same, even if ordered by a treating physician, will be made by providing a simple accommodation, being completely excluded any expenses of food, restaurant, laundry, telephony or any other expense generated by drinks or food taken in the same room or the mini bar thereof.
2. Chronic or pre-existing, defined, or recurrent diseases, suffered prior to the beginning of the term of the plan and/or the trip, whether or not they are of knowledge or not by the Beneficiary, as well as their sharpenings, consequences and direct or indirect consequences (even when they appear for the first time during the trip).
3. Medical illnesses, injuries, conditions or complications resulting from treatments performed or carried out by persons or professionals not authorized by the Medical Department of the MAS SERVICIOS Assistance Center, or except as determined in the preceding point.
4. Homeopathic treatments, acupuncture treatments, quinesiotherapy, thermal cures, podiatry, manicure, pedicure, etc.
5. Conditions, illnesses or injuries arising from the attempt or criminal or criminal action of the Beneficiary, directly or indirectly such as fights, quarrels, floggings, etc.
6. Treatment of diseases or pathological states caused by the intentional intake or administration of illegal drugs, narcotics, alcohol, or by the use of drugs without the respective medical order
7. Expenses incurred in dentures, lenses, hearing aids, wheelchairs, crutches, glasses, etc.
8. Events that occurred as a result of simple training, simple practices or active or non-active participation in sports competitions (professional or amateur). In addition, occurrences of the practice of dangerous sports or risks or extremes are expressly excluded including but not limited to: Motorcycling, Motorsport, Boxing, Polo, Water Skiing, Diving (up to 30 meters maximum), Deltismo, Kartismo, Quad bikes, mountaineering, skiing, football, boxing, canoeing, paragliding, kayak, Badminton, basketball, ball, handball, karate do, Kung fu, Judo, archery, rifle shooting, , Rappel, Diving, Torrentism, Mountaineering, Climbing, Puenting, Athletics, Cycling, Luge Speleology, Skeleton, Animal Hunting, Bobsleigh, etc., and other sports practiced outside of regulatory courts and authorized by the respective sports federations.
9. Births, pregnancy states, gynecological checkups, screenings related to them. Abortions, or losses whatever their etiology or origin. Also, all the resulting complications during and after pregnancy.
10. All kinds of mental illness.
11. Conditions, illnesses or injuries arising from the consumption of alcoholic beverages of any kind.



12. Acquired Immune Deficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV) in all its forms, sequelae and consequences. Sexually transmitted diseases and/or infections and/or in general any type of provision, examination and/or treatment that has not received prior authorization from the Assistance Services Center.
13. Events and consequences of triggering natural forces, tsunamis, tremors, earthquakes, storms, hurricanes, cyclones, floods, nuclear radiation and radioactivity events, as well as any other natural phenomena or not, with extraordinary character or event that, due to its proportions or severity, is considered as a regional or local national disaster or catastrophe, earthquakes, hurricanes, floods etc.
14. Suicide, or attempted suicide or injury to himself by the Beneficiary and/or his/her family, as well as any act of manifest irresponsibility or serious recklessness on the part of the Beneficiary of travel assistance.
15. Events as a result of acts of war, invasion, acts committed by foreign or national enemies, terrorism, hostilities or war operations (whether declared war or not) civil war, rebellion, insurrection or military power, naval or usurped, the intervention of the Beneficiary in riots, demonstrations or tumult that are or not civil war, that is, whether the intervention is personal or as a member of a civil or military organization; terrorism or other serious alteration of public order;
16. Ill-intentioned and/or bad faith acts on the part of the Beneficiary or his or her agents.
17. Routine medical examinations, laboratory examinations for medical checkups, diagnostic and/or control exams, laboratory or radiological examinations or other means, the purpose of which is to establish whether the disease is a pre-existence, such as radiology tests, doppler, MRIs, CT scans, ultrasounds, images, scanners of all kinds, etc. Medical examinations performed to establish whether the ailment corresponds to a pre-existing condition or not.
18. Expenses for public or private transportation or travel paid by the Beneficiary from your hotel or place where you are to the hospital center, or medical center, or doctor's office. Unless such expenses have been expressly authorized in written or verbal form by the Assistance Services Center.
19. Diseases arising from or due to or consequent of congenital deformations known or not by the Beneficiary.
20. Injuries or accidents arising from air accidents on aircraft not intended or authorized as public transport, including private chartered flights
21. Conditions, illnesses or injuries arising directly or indirectly from quarrel or fighting (unless it is a case of proven self-defense with police report), strike, acts of vandalism or popular tumult in which the Beneficiary had participated as an active element. The attempt to either the commission of an illegal act and, in general, any wilful or criminal act of the Beneficiary, including the provision of false or different information from reality.
22. Endemic, pandemic diseases (except COVID-19), or epidemic, assistance for these diseases in cities/countries with or without health emergency in case the Beneficiary has not followed the suggestions and/or indications on travel restrictions and/or prophylactic treatment and/or vaccination emanating from health authorities.
23. Any medical expenses or assistance that has not been previously consulted and authorized by the MAS SERVICIOS Assistance Service Center.
24. Diseases, or indispositions resulting from menstrual period disorders in women, such as advances or delays, as well as bleeding, flow and others.
25. Liver diseases, such as Cirrosis, Abscesses and others.

26. Examinations and/or hospitalizations for stress tests and all types of preventive checkups.
27. Any kind of hernias and their consequences.
28. Kidnapping or his attempt.
29. High-risk tasks: if the reason for the Beneficiary's trip was the execution of work or tasks involving a high occupational risk, as well as injuries classified as injuries from repetitive efforts, occupational-related osteomuscular diseases, continuous or continuous trauma injury, etc., or similar, as well as its post-surgical consequences at any time.
30. Driver or passenger injuries from the use of any type of vehicle, including bicycles, motorcycles and speed motors without a driver's license, or without a helmet, or without contracted insurance.
31. Accidents and diseases in cities/countries in civil or foreign war are excluded. Example: Afghanistan, Iraq, Sudan, Somalia, North Korea, etc.
32. Assistance of any kind shall not be provided to the Beneficiary in an illegal migration or employment situation (including undeclared work in the city/country from which assistance is required, or to surprised students working in a foreign country without the respective authorization of the local authorities).
33. MAS SERVICIOS will not be responsible for costs for physiotherapies referred to for the treatment of ailments related to occupational accidents, repetitive tasks or chronic and/or degenerative diseases of the bones or muscles. The physiotherapies will be covered only in case the ailment has been caused by a non-working accident under the prior authorization of the Medical Department of the Assistance Services Central in case it is determined that with them the passenger may improve his current condition and for no reason, may exceed ten (10) sessions.
34. In the event that the reason for the trip was the treatment abroad of a basic illness, and that the current treatment has any direct or indirect connection with the ailment upon reason of the trip, MAS SERVICIOS will be relieved to provide its services. To this end MAS SERVICIOS reserves the right to investigate the connection of the current event with the previous ailment.
35. MAS SERVICIOS is expressly released, exempt and excused from any of its obligations and responsibilities in the event that the Beneficiary suffers any damage or requests assistance as a result and/or arising from fortuitous or force majeure case, which are cited by way of example and not limited to: catastrophes, arms, floods, storms, international war or civil war declared or not, rebellions, internal upheation, civil insurrection, guerrilla or anti-guerrilla acts, hostilities, retaliation, conflicts, embargoes, arrests, strikes, popular movements, lockout, acts of sabotage or terrorism, labor unrest, acts of government authorities, etc.; as well as problems and/or delays resulting from the termination, interruption or suspension of communication services. When such elements intervene and after they have been exceeded, MAS SERVICIOS undertakes to implement its commitments and obligations within the shortest possible time.

In the event that the reason for the trip was the treatment abroad of a basic illness, and that the current treatment has any direct or indirect connection with the ailment upon reason of the trip, MAS SERVICIOS will be relieved to provide its services. To this end MAS SERVICIOS reserves the right to investigate the connection of the current event with the previous ailment.

Competition Convention: It is expressly agreed between the parties, as regards the contractual relationship between the Certificate Beneficiary and the supplier that any problem of interpretation of the scope of the same and/or judicial claim, which cannot be resolved amicably between the parties, shall be submitted to the jurisdiction of the courts of Doral, Florida, to the exclusion of any other forum and jurisdiction that may correspond.

Non-cumulative services and/or Intervention of other companies: In no case MAS SERVICIOS will provide the assistance services to the Beneficiary established in the MEDICAL ASSISTANCE PLAN of the TRAVEL CERTIFICATE, nor will it refund expenses of any kind, as long as the Beneficiary requests or has requested benefits for the same problem and /or condition to any other company, before, during or after having requested them from the provider.

## SUBROGATION

Until the amounts disbursed in compliance with the obligations arising from these general conditions, MAS SERVICIOS and/or insurance companies that assume the risk as a result of the commission of MAS SERVICIOS will be automatically subrogated to the rights and actions that may correspond to the Beneficiary or his heirs against third or legal persons under the event that motivates the assistance provided and / or benefit paid.

The Beneficiary undertakes to reimburse MAS SERVICIOS on the spot any amount it has received from the subject causing and/or responsible for the accident and/or its insurance company(s) as an advance(s) in the event of a settlement of the final compensation to which the Beneficiary may be entitled. This is at the expense of the amounts charged by MAS SERVICIOS in the event that occurred.

Without the following statement being understood as limiting, the rights and actions likely to be exercised against the following persons are expressly covered by the subrogation:

1. Third parties responsible for an accident (transit or otherwise) and/or their insurance companies.
2. Transport companies, in the area of the restitution - in whole or in part - of the price of unused tickets, when MAS SERVICIOS has taken over the transfer of the Beneficiary or its remains.
3. Other companies that cover the same risk.

Important: The Beneficiary irrevocably assigns in favor of MAS SERVICIOS the rights and actions covered by this Clause, obliging to carry out all the legal acts that are necessary for this purpose and to provide all the collaboration that is required of it in connection with the event that occurred. In this sense, it undertakes and undertakes to formalize the subrogation or assignment in favor of MAS SERVICIOS within the following three (3) calendar days of the intimation the Beneficiary/ies for this purpose. If you refuse to subscribe and/or provide collaboration to assign such rights to MAS SERVICIOS, MAS SERVICIOS will automatically be exempt from paying the costs of assistance arising.

In addition, MAS SERVICIOS will be surrogated, understood that any insurance, travel assistance and/or health insurance will have the obligation in first instance of the payment either of all or part of the expenses that may be triggered by the event suffered by the Beneficiary.

MAS SERVICIOS will be surrogate in the rights and actions that correspond to the Beneficiary, by acts that have motivated the intervention of the beneficiary and until the total cost of the services provided.

Likewise, MAS SERVICIOS reserves the right to be able to assign in whole or in part both the rights that assist it arising from the contractual relationship with the Beneficiary, as well as the execution, provision of services and other obligations at its expense to third professional legal persons in the field of assistance to companies in the field.

In this sense the Beneficiary is aware of this right and therefore expressly waives to be notified or communicated in advance of such assignments.

## EXCEPTIONAL CIRCUMSTANCES OF UNIMPUTABLE INEACHRATION

Neither MAS SERVICIOS, nor its network of service providers, shall be liable, enforceable or enforceable for incidental cases, resulting in unimputable delays or non-compliance due to natural disasters, strikes, wars, invasions, acts of sabotage, hostilities, rebellion, insurrection, terrorism or pronouncements, popular manifestations, radioactivity, or any other cause of force majeure.

Where such elements intervene, MAS SERVICIOS undertakes to implement its commitments within the shortest possible time and provided that once such provision of services is feasible, the contingency justifying it is maintained.

## RESOURCE MAS SERVICIOS

Reserves the right to require the Beneficiary to reimburse any expenses made by the Beneficiary improperly, in case of having been provided with services not covered by this contract or outside the term of the contracted assistance plan, as well as any payments made on behalf of the Beneficiary.

## RESPONSIBILITY

The service provided by MAS SERVICIOS in accordance with the terms of these general conditions and the travel assistance contract, is limited solely and exclusively to providing the Beneficiary with access to professionals for the provision by the latter, under their sole and exclusive responsibility, medical, dental, pharmaceutical, legal and/or assistance services in general. In this way, MAS SERVICIOS will not be responsible in any way, either directly or indirectly, for any claim that the Beneficiary may make for the provision of the services carried out by any of the aforementioned professionals.

MAS SERVICIOS, shall not be liable and shall not indemnify the Beneficiary for any damage, damage, injury or illness caused by having provided the Beneficiary to your request, persons or professionals to assist you medically, dentistry, pharmaceutically or legally. In these cases, the person or persons designated by MAS SERVICIOS will be held as agents of the Beneficiary, without possible remedy of any nature or circumstance against MAS SERVICIOS, due to such designation. MAS SERVICIOS strives to make available to passengers the best health professionals and the best means, however, MAS SERVICIOS, may never be fully or partially responsible for the availability, quality, results, lack of care, medical services and /or malpractice of such professionals or entities, since they are conditions that are totally beyond the control of MAS SERVICIOS.

## EXPIRATION - RESOLUTION - MODIFICATION

Any claim to make effective the obligations that MAS SERVICIOS, assumes through these general conditions, must be made in due form and in writing within the maximum unrepinted period of thirty (30) continuous calendar days, counted from the date of completion of the validity of the certificate. After the indicated period, all rights not exercised in a timely manner will be automatically expired.

## MAS SERVICIOS

Appreciates your Preference and wishes you a Happy Trip