

2009

**Employee
Benefits Program**

**Business Travel
Accident Insurance**

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Important Information

This is Only a Summary

This booklet is a summary of the Business Travel Accident Plan (“plan”), which is a component benefit program under the Travelers Non-Trusteed Employee Benefit Plan. The plan operates under a detailed legal document and a group insurance contract. A summary cannot deal with every set of circumstances. If this summary is incomplete in some respect, or can be read to be inconsistent with the legal document or the insurance contract, the legal document or insurance contract will control (see the section titled “Role of Insurer” later in this booklet for more information).

A copy of the legal document and the insurance contract are available for review from the Travelers Employee Services Unit.

It Describes Current Plan Terms

This booklet describes the terms of the plan in effect as of January 1, 2009.

Not an Employment Contract

The plan is not a contract of employment or a guarantee of continued employment for any definite period of time.

Right to Interpret

Travelers, its Administrative Committee, and others have broad discretionary authority to make factual determinations and to interpret the plan.

Administrative Committee

The “Administrative Committee” is a person or committee appointed to this position in accordance with the terms of the plan. Currently, the Administrative Committee consists of a single person – the Executive Vice President – Human Resources of Travelers.

Oral or Other Unofficial Modifications Are Not Permitted

The legal document governing the plan cannot be modified by oral statements made by anyone, or by unofficial communications (such as e-mail or mailings) or by other contracts (such as employment agreements or stock or asset purchase agreements). The plan can only be amended by official amendments. Amendments can only be adopted by authorized persons, such as the Board of Directors, the Chief Executive Officer, or others to whom the Board or the Chief Executive Officer has delegated amendment authority.

Overview

Introduction

Travelers' Business Travel Accident Insurance Plan provides each eligible employee with 24 hour coverage while traveling on business away from the premises of Travelers. The coverage will pay benefits if a covered employee dies or is injured from an accident which occurs anywhere in the world while on a business trip, traveling or making a short stay:

- away from Travelers' premises in the employee's city of permanent assignment, and
- on business for Travelers, and
- in the course of business or engaged in "Personal Deviations."

All such trips must be authorized by Travelers.

Insurance Carrier

The insurance carrier for your Business Travel Accident Insurance is Life Insurance Company of North America. A certificate for this coverage is available at www.travelers.com/benefits.

Business Travel Accident Insurance

Eligibility

You are eligible to participate in the Business Travel Accident Insurance Plan (the “plan”) if you are:

- A regular status, salaried employee of Travelers or a participating affiliate.

The “participating affiliates” currently are:

- Travelers Indemnity Company
- The Premier Insurance Company of Massachusetts (also known as Travelers of Massachusetts)
- First Floridian Auto and Home Insurance Company (also known as Travelers of Florida)
- TCI Global Services, Inc.

The following groups of people are not eligible to participate in the plan:

- TRAVTemps
- Any employee classified as an “intern”
- Any employee who is:
 - Paid from a payroll system other than the U.S. payroll system of Travelers
 - A local national employee – that is, citizen of another country who is not working in the United States (including any such individual who has dual citizenship and thus is also a citizen of the United States, unless he or she is an expatriate on assignment from the United States); or
 - A citizen of a country other than the United States who is working on temporary assignment in the United States, as determined under the employment policies of Travelers.
- Individuals employed with, performing services through, or paid by a third-party (such as an employee leasing or staffing agency)
- Individuals performing services pursuant to a contract or agreement (whether verbal or written) which provides that he or she is an independent contractor or a consultant

Business Travel Accident Insurance

Coverage for Family Members

Your family members who are traveling with you are also eligible for coverage under the plan if you meet the eligibility criteria above. Eligible family members include:

- Your spouse
 - Your spouse means a person of the opposite sex to whom you are legally married (including a common-law spouse in a state that recognizes common law marriage, so long as you provide acceptable proof and certification of common-law married status to Travelers) and from whom you are not legally separated
- Your domestic partner. For this purpose, a person is your “domestic partner” if:
 - You and this person have a long-term, intimate, committed relationship with each other, which is demonstrated to be one of mutual caring, affection, and responsibility for each other’s common welfare;
 - You and this person hold yourselves out as in a relationship similar to marriage;
 - You and this person intend to continue your relationship with each other indefinitely;
 - You and this person meet the following marital status requirements:
 - If you and this person are of the opposite sex, both you and this person are unmarried to each other or anyone else; or
 - If you and this person are of the same sex, both you and this person are unmarried to anyone else;
 - You and this person are each other’s sole domestic partner;
 - Both you and this person are at least 18 years of age;
 - Both you and this person are capable to enter into a contract;
 - You and this person are not related by blood closer than permitted by marriage law in your state of residence.
 - You and this person share a principal residence and have lived together for at least six (6) consecutive months (and this six-month period immediately precedes the date you complete the domestic partnership affidavit);
 - You and this person are jointly responsible to each other for basic living expenses; and
 - The following timing requirements are met (as applicable):
 - At least six (6) months has elapsed since (i) the later of your divorce or this person’s divorce from a previous spouse or (ii) the later of the death of your previous spouse or this person’s previous spouse; and
 - At least six (6) months has elapsed since the date you notified Travelers that your previous domestic partnership ended (or the date your previous domestic partner was removed from your active coverage under this plan, if later).
- Your, your spouse’s, or your qualified domestic partner’s unmarried “child” who depends on you for maintenance and support. A “child” for this purpose includes your natural child, adopted child, stepchild, or child for whom you are the legal guardian (sponsored dependent), who is under age 19, or under age 25 if registered as a full-time student at an accredited or licensed educational institution. If your child is over age 19 but is incapable of self-sustaining employment by reason of mental or physical handicap, he or she will remain a “child” for this purpose, as long as you supply the required proof of your child’s status.

Business Travel Accident Insurance

When Coverage Begins

Your plan coverage begins on your first day of employment. If you are not working on the day your coverage is scheduled to begin, it will be effective when you return to work. You do not need to complete an enrollment form to secure coverage.

Cost

Travelers pays the entire cost of the plan.

What the Plan Covers

The plan will pay benefits if you die or are injured as the result of an accident while traveling on company-approved business.

Benefits will be paid for any accident which occurs anywhere in the world while a covered employee is traveling or making a short stay:

- away from Travelers' premises in the employee's city of permanent assignment, and
- on business for Travelers, and
- in the course of that business or engaged in "Personal Deviations."

"Personal Deviations" means an activity that:

- is not reasonably related to Travelers' business,
- is not incidental to Travelers' business, and
- occurs prior to the scheduled end of the business travel.

All such trips must be authorized by Travelers.

If your spouse or domestic partner or your children die or are injured as a result of an accident while traveling with you on company-approved business, the plan will pay benefits.

Special rules apply to pilots and crew members who operate aircraft for Travelers.

Business Travel Accident Insurance

What the Plan Does Not Cover

The plan does not pay benefits for loss or death resulting from the following:

- Commuting between the covered employee's home and place of work (except for certain extraordinary circumstances)
- Suicide or attempted suicide, or whenever a covered person injures himself or herself intentionally, while sane or insane (This does not apply in Missouri if the covered person is insane);
- War or acts of war, whether or not declared;
- Injury while a covered person is on full-time active duty in any armed forces;
- Injury resulting from taking part in a felony;
- Travel or flight in any spacecraft, or flight in any aircraft while serving as a pilot or crew member, unless the aircraft is company-owned and the flight is authorized;
- Any bacterial infection that was not caused by an accidental cut, a wound, or food poisoning; or
- Loss caused by or resulting from illness, disease, or physical debilitation.

Coverage Amounts

For Employees

Regular full-time employees have coverage of three times annual salary. The minimum benefit is \$10,000; the maximum is \$2,000,000. Annual salary is your regular base pay and does not include bonuses, overtime, and other incentive pay. For members of the CAT team, annual salary includes amounts characterized as "catastrophe" pay paid as an annual differential.

Part-time employees who are scheduled to work less than 20 hours per week, or less than 50% of a full-time equivalent schedule if the office's workweek is less than 40 hours per week, have a flat \$25,000 of coverage. Coverage for part-time employees may differ in other respects from coverage for full-time employees; see the Life Insurance Company of North America certificate for details.

For Dependents

Regular full-time employees have spouse or domestic partner coverage of \$150,000 and child coverage of \$50,000 per child.

Part-time employees who are scheduled to work less than 20 hours per week, or less than 50% of a full-time equivalent schedule if the office's workweek is less than 40 hours per week, have spouse or domestic partner coverage of \$25,000 and child coverage of \$25,000 per child. Coverage for part-time employees may differ in other respects from coverage for full-time employees; see the Life Insurance Company of North America certificate for details.

Business Travel Accident Insurance

Beneficiary Designations

Your beneficiary under the plan is the same beneficiary you named under the Life/AD&D Plan. If you name more than one beneficiary, your beneficiaries will share equally unless you choose otherwise.

If you do not name a beneficiary or if there is no named beneficiary living at the time of your death, the Life Insurance Company of North America will determine the beneficiary according to the following order:

- Your spouse, if alive (for this purpose, your domestic partner will be considered your spouse only if you have filed and not revoked a Domestic Partner Affidavit with Travelers, in a form acceptable to Travelers);
- In equal shares to your living child(ren), if there is no surviving spouse;
- In equal shares to your living parent(s), if there is no surviving child(ren);
- In equal shares to your living siblings, if there is no surviving parent; or
- Your estate, if there is no surviving sibling.

If your beneficiary is a minor, his or her guardian will receive the amount due when the Life Insurance Company of North America receives copies of the guardianship papers.

You are the beneficiary for your dependents' coverage. If you are not living at the time of the injury or death of your dependent(s), the Life Insurance Company of North America will pay the proceeds to your estate.

Benefit Payments

The amount of benefits paid is determined by the extent of the injury as shown on the Benefits Schedule below. If the accident results in your dismemberment, the benefit is paid directly to you. If the accident results in the dismemberment of your spouse, domestic partner, or child(ren), the benefit is paid to you, if you are alive; otherwise, it is paid to your estate.

If the accident results in your death, the benefit is paid to your beneficiary (See the Beneficiary Designations section for more information). If the accident results in the death of your spouse, domestic partner, or child(ren), the benefit is paid to you if you are alive; otherwise, it is paid to your estate. If you suffer more than one loss from the same accident, you will receive payment for the loss with the larger benefit; however, in no case will the amount exceed the maximum listed in the "Coverage Amounts" section of this publication.

If you are traveling on a plane, ship, or other vehicle which disappears, you are presumed dead after one year.

If more than one plan participant is involved in the same accident, the maximum benefit the plan will pay is \$20,000,000. If the total of all claims exceeds \$20,000,000, payments will be prorated based on each individual's salary, divided by the total salary of all individuals involved in the accident. You or your beneficiary may choose to receive payment in either a lump sum or installments.

Business Travel Accident Insurance

Benefit Schedule

Type of Loss	Percentage of “coverage amount” payable
Life	100%
Both speech and hearing (both ears)	100%
Quadriplegia (total paralysis of both upper and lower limbs)	100%
Two or more Members*	100%
One Member*	50%
Speech	50%
Hearing (both ears)	50%
Paraplegia (total paralysis of both lower limbs)	50%
Hemiplegia (total paralysis of upper and lower limbs on one side of the body)	50%
Thumb and index finger of the same hand	25%

* “Member” means hand, foot, or eye.

How to File a Claim

To receive a benefit from the plan, you (or your beneficiary) must:

1. Complete a Proof of Loss claim form, available from the Employee Services Unit (ESU), within 90 days after the covered loss occurs or ends, or as soon after that as reasonably possible.
2. Obtain a statement from your doctor certifying the loss for accidental dismemberment claims OR obtain a certified copy of the death certificate for accidental death claims.
3. Return the form and appropriate certification to the ESU.

For more information about the claims and appeal procedure under the plan, refer to the insurance certificate issued by Life Insurance Company of North America.

Business Travel Accident Insurance

When Coverage Ends

Your coverage under the plan ends on the earliest of the following:

- The day the plan terminates (or is amended so that you are no longer covered);
- The day you no longer meet the eligibility requirements;
- The day you take a leave of absence;
- The day you meet the definition of disability under the Long-Term Disability component of the Disability Plan; or
- The day you terminate employment or retire.

Your Rights Under ERISA

As a participant in the plan, you are entitled to certain rights and protections under ERISA - the Employee Retirement Income Security Act of 1974.

ERISA provides that all plan participants shall be entitled to:

Receive information about your plan and benefits

- Examine, without charge, at the plan administrator's office and at other specified locations, such as worksites, all documents governing the plan, including insurance contracts, and a copy of the latest annual report (Form 5500 Series) filed by the plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- Obtain, upon written request to the plan administrator, copies of documents governing the operation of the plan and copies of the latest annual report (Form 5500 Series) and updated summary plan description. The administrator may make a reasonable charge for the copies.
- Receive a summary of the plan's annual financial report. The plan administrator is required by law to furnish each participant with a copy of this summary annual report.

Prudent actions by plan fiduciaries

In addition to creating rights for plan participants, ERISA imposes duties upon the people who are responsible for the operation of the employee benefit plan. The people who operate your plan, called "fiduciaries" of the plan, have a duty to do so prudently and in the interest of you and other plan participants and beneficiaries. No one, including your employer, or any other person, may fire you or otherwise discriminate against you in any way to prevent you from obtaining a benefit or exercising your rights under ERISA.

Enforce your rights

If your claim for a benefit is denied or ignored, in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules.

Under ERISA there are steps you can take to enforce the above rights. For instance, if you request a copy of plan documents or the latest annual report from the plan and do not receive them within 30 days, you may file suit in a Federal court. In such a case, the court may require the plan administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the administrator. If you have a claim for benefits which is denied or ignored, in whole or in part, and you have exhausted the claims procedures outlined in this publication, you may file suit in a state or Federal court. In addition, if you disagree with the plan's decision or lack thereof concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in Federal court. If it should happen that plan fiduciaries misuse the plan's money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor, or you may file suit in a Federal court. The court will decide who should pay court costs and legal fees. If you are successful the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees, for example, if it finds your claim is frivolous.

Your Rights Under ERISA

Assistance with your questions

If you have any questions about your plan, you should contact the Employee Services Unit at 800.441.4378. If you have any questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the plan administrator, you should contact the nearest office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, D.C. 20210. You may also obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

General Information

Plan Name

The name of the plan is the Travelers Business Travel Accident Plan, which is a component program under the Travelers Non-Trusteed Employee Benefit Plan.

Type of Plan

The plan is a welfare benefit plan.

Plan Sponsor and Administrator

Travelers is the “sponsor” and the “administrator” of the plan for purposes of ERISA. Benefits under the plan are insured by Life Insurance Company of North America. Travelers acts as administrator through its Administrative Committee. Travelers is responsible for determining who is eligible for coverage, choosing the insurance carrier, deciding the terms of coverage, and paying premiums. The insurance carrier – currently Life Insurance Company of North America – is responsible for deciding whether benefits are due and the amount of benefits, and for paying these benefits.

As administrator, Travelers and its Administrative Committee have the discretionary authority to make various determinations under the plan. The decisions made by Travelers and its Administrative Committee are final and binding, subject to your rights to file a lawsuit under ERISA. The decision-making authority is very broad and is limited only by the duties under ERISA, and the decisions of the Administrative Committee are intended to be given deference by courts to the maximum extent allowed under ERISA.

Insurer

Benefits under the plan are insured by Life Insurance Company of North America. Its address is
1601 Chestnut St.
Philadelphia, PA 19192

Medium for Providing Benefits

Benefits under the plan are provided through a group insurance policy.

Source of Contributions

Premiums for the group insurance policy are paid entirely by Travelers.

Plan Year

The plan year is the calendar year.

General Information

Plan Number

The Travelers Non-Trusteed Employee Benefit Plan has been assigned the following identification number: 509.

Employer Identification Number

Travelers' federal employer identification number is 41-0518860.

Agent for Service of Legal Process

Legal process may be served on Travelers at the following address:

Travelers Companies, Inc.
c/o Corporate Secretary
385 Washington Street, 9275-NB16A
St. Paul, MN 55102

Role of Insurer

Benefits under the plan are provided through an insurance contract with Life Insurance Company of North America. Life Insurance Company of North America guarantees payment of benefits for all eligible expenses incurred while the contract is in force.

If you have questions about eligibility, cost, or when coverage begins or ends, you should refer to this summary. If you have a question about covered or excluded benefits or about the claims procedure followed by Life Insurance Company of North America, you should refer to the Life Insurance Company of North America certificate.

If information in this summary regarding benefit coverages and exclusions conflicts with the information in the Life Insurance Company of North America certificate, the certificate will govern. Similarly, if eligibility, cost, or coverage begin or end dates in the certificate conflicts with information in this summary, the information in this summary will govern.



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