



CSU Foreign Travel Insurance Program (FTIP)

COVERAGE SUMMARY

INSURER:

ACE USA - U.S
International Advantage
Program

POLICY TERM:

July 1, 2015 to
July 1, 2016

POLICY NO:

GLMN04950872

**NAMED COVER ENTITY:**

1. California State University Risk Management Authority (CSURMA)
2. California State University (CSU)
3. CSU Auxiliary Organizations

COVERAGE TERRITORY:

ANYWHERE IN THE WORLD excluding:

1. The United States of America, Puerto Rico, (including its territories and possessions); and
2. Any country or jurisdiction which is the subject of trade or economic sanctions imposed by the laws regulations of the United States of America

LIMITS / SUB-LIMITS:**Primary General Liability**

\$5,000,000	Coverage A – Bodily Injury/Property Damage Each Occurrence
\$5,000,000	Aggregate Limit/Products/Completed Ops
\$1,000,000	Premises Damage Limit
\$5,000,000	Coverage B – Personal Injury & Advertising Injury – Aggregate Limit
\$10,000	Coverage C – Medical Expense Limit (any one person)
\$1,000,000	Employee Benefits Liability Endorsement- Each Claim (Subject to \$1,000 Deductible) (Claims Made Coverage) and Annual Aggregate

Contingent Auto Liability (Excess)

\$1,000,000	Bodily Injury/Property Damage Liability Each "accident"
\$100,000	Hired Auto Physical Damage/any one policy period
\$25,000	Auto Medical Payments/each person/ each accident

Employers Responsibility Coverage Voluntary Compensation

State of Hire	North Americans – State of Hire
Country Origin	Third Country Nationals – Country of Origin
Country Origin	Local Nationals – Country of Origin

Employers Liability

\$1,000,000	Bodily Injury by Accident/each Accident
\$1,000,000	Bodily Injury by Disease/each Employee (including Endemic Disease)
\$1,000,000	Bodily Injury by Disease/Policy Limit (including Endemic Disease)

Primary Accident or Sickness Expense Benefit

\$250,000	Employee/Student (Primary Accident or Sickness Expense Benefit)
\$250,000	Spouse/Dependent/Volunteer (Primary Accident or Sickness Expense Benefit)
Treated as any other medical condition	Maximum Preexisting Conditions
\$1,000	Maximum for Dental Treatment – Injury Only
\$500	Alleviation of Pain – Maximum
\$2,000	Maximum for Therapeutic Termination of Pregnancy
\$0 Deductible per Covered Accident or Sickness	
364 Maximum Period of Coverage	
Incurral Period: 60 days after the date of Covered Accident or Sickness	

Emergency Medical Benefits

Up to \$10,000	Emergency Medical Benefit Maximum
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QUESTIONS:**Stacey Weeks**

(415) 403-1448
sweeks@alliant.com

Van Rin

(415) 403-1408
vrin@alliant.com

Rob Leong

(415) 403-1448
rleong@alliant.com

While we believe this Summary of Insurance fairly represents the terms, conditions and exclusions found in your insurance policies, in the event of any differences between the policies themselves and this summary, the policy provision will direct any resolution. This summary is not intended to replace or supersede any of your insurance contracts.



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LIMITS / SUB-LIMITS:

Emergency Medical Evacuation

100% of Emergency Medical Evacuation Benefit Maximum
Covered
Expense

Repatriation of Remains Benefit

100% of Repatriation of Remains Benefit Maximum
Covered
Expense

Emergency Reunion

\$5,000 Benefit Maximum
\$300 Daily Benefit Maximum
10 days Maximum Number of Days
Round Trip Ticket to fly to injured participant included in maximum benefit

Aggregate Limit Benefit

\$3,000,000 Aggregate Limit/Benefit Maximum

Accidental Death & Dismemberment Benefit

\$100,000 Employee / Student - AD&D Benefit
\$50,000 Other- AD& D Benefit

Trip Cancellation

\$2,500 Benefit Reimbursement of non-refundable covered expenses paid for trip up to Benefit
Maximum Maximum if prevented from taking trip as a result of injury, sickness, or death

Trip Interruption Benefit

\$2,500 Benefit Reimbursement of cost for one-way economy air/or ground transportation
Maximum ticket, up to benefit maximum, if participant's trip is interrupted as a result of
a death of a family member or unforeseen injury or sickness of participant's
family member.

Trip Cancellation (Self-Funded)

\$2,500 Benefit Limited self-insured coverage for trip cancellation, addressing the cost of
Maximum cancelling or early return from travel triggered by critical events that may not
be covered under the insurance program.

COMMENTS / CONDITIONS:

1. Trips need to be reported
2. For any high hazardous / war risk country both the Campus President and Chancellor's Office approvals are required

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TRAVEL ASSISTANCE:

ACE Travel Assistance Program

1-855-327-1414 (Toll-Free)

1-630-9764 (Direct Dial)

Email: medassist-usa@axa-assistance.us

Policyholder: California State University RMA

Policy Number: ADDN04950872

Assistance Provider: AXA Assistance USA, Inc.

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