



**2022-23 Coverage Summary
CSURMA Foreign Travel Insurance Program (FTIP)**

Policy Term: July 1, 2022 – July 1, 2023

Coverage Territory:

- Worldwide excluding the United States of America (including its territories and possessions), Puerto Rico, and except as otherwise limited or extended by this insurance;
- Any country or jurisdiction which is the subject of trade or economic sanctions imposed by the laws or regulations of the United States of America;
- The Covered Person’s country of permanent assignment / residence
- The Covered Person’s home country
- *Russia, Ukraine, Belarus*

Coverages:

Primary General Liability

\$5,000,000 Bodily Injury / Property Damage Each Occurrence
 \$2,000,000 General Aggregate
 \$5,000,000 Aggregate Limit / Products / Completed Ops
 \$1,000,000 Premises Damage Limit
 \$1,000,000 Personal Injury & Advertising Injury
 \$25,000 Medical Expense Limit (any one person)

Employee Benefits Liability – Claims Made

\$1,000,000 Each claim
 \$1,000,000 Annual Aggregate
 \$1,000 Deductible per Claim

Contingent Auto Liability (Excess)

\$1,000,000 Bodily Injury / Property Damage Liability each accident
 \$50,000 Hired Auto Physical Damage / any one policy period
 \$50,000 Hired Auto Physical Damage / any one accident
 \$50,000 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

Contingent 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)



Coverages (continued):

Executive Assistance Services (include Repatriation)

\$1,000,000 Policy Limit for Medical Assistance Services

Primary Accident or Sickness Expense Benefit

- \$250,000 Primary travel accident / sickness expense benefit
- \$1,000 Maximum dental treatment (injury only)
- \$500 Dental alleviation of pain only
- Preexisting conditions – treated as any other medical condition
- Emergency medical treatment of pregnancy – treated as any other medical condition
- Maximum for room & board charges – average semi-private room rate
- \$2,000 Maximum for *therapeutic termination* of pregnancy
- \$0 Deductible
- 365 days Maximum period of coverage
- 60 days Incurral period after the date of the covered accident or sickness
- Maximum benefit period – the earlier of the date other covered person’s trip end, or 52 weeks from the date of a covered accident or sickness

Emergency Medical Benefits

Up to \$10,000 Emergency Medical Benefit maximum

Emergency Medical Evacuation

- 100% of Covered Expense Covered expenses for guarantee of payment to a medical provider hospital or treatment facility – **limited to \$250,000 from Antarctica and Greenland**
- Benefits covered expenses will not be payable unless the doctor ordering the evacuation certifies the severity of medical emergency – covered expenses:
 - medical emergency
 - require emergency medical evacuation
 - medical transport for medically necessary treatment
 - dispatch of a doctor or specialist – doctor’s assessment/evaluation made by travel assistant provider
 - transportation after stabilization – home country or host country or join the group if moved on to different location



Coverages (continued):

Repatriation of Remains

100% of Covered Expense Covered expenses for preparation and return of remains to home country if death is a result of a medical emergency while traveling. Benefits will not be payable unless authorized in writing by the travel assistance provider – covered expenses include

- expenses for embalming or cremation
- the least costly coffin or receptacle adequate for transporting the remains
- transporting the remains
- escort services

Emergency Reunion Benefit

\$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
\$2,000	Benefit maximum of repatriation of remains

Emergency Hotel Convalescence Benefit

Up to \$100 per day up to seven (7) days	For hotel room convalescence should the treating doctor determine this to be necessary immediately following a Hospital confinement during travel and prior to returning home
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Home Country Extension Benefit

Benefits for covered expenses if treatment for a covered injury or sickness while in home country provided treatment is rendered within incurral period. Benefits limited to benefits that would be otherwise payable under the medical expense benefit if outside home country. Benefits are payable only to the extent that covered expenses are **not** payable under any other domestic health care plan

Security Evacuation Expense Benefit

Up to \$50,000 and no more than \$500,000 as the result of one Security Evacuation Occurrence that takes place during the Covered Activity and while traveling outside Home Country

Trip Cancellation Benefit

Up to \$2,500 Reimbursement for a non-refundable covered expenses paid if you are prevented from taking the trip as the result of injury, sickness, or you or your family member's death prior to the scheduled trip departure date. The injury or sickness must be so disabling as to reasonably cause a trip to be canceled, or the condition is life-threatening, or because the family member requires the care of the participant. Family Member means spouse, child, brother, sister, parent, grandparent or immediate in-law



Coverages (continued):

Trip Interruption Benefit

Up to \$2,500 Reimbursement of cost for one-way economy air and/or ground transportation ticket, if the trip is interrupted as the result of 1) death of a family member; or 2) unforeseen injury or sickness of the participant or a family member. The injury or sickness must be so disabling as to reasonably cause a trip to be interrupted; or; 3) Medically necessary covered emergency medical evacuation to return to home country or to the area from which the initial evacuation for continued treatment, recuperation and recovery of an injury or sickness; or 4) substantial destruction of your principal residence by fire or weather related activity. Family member means spouse, child, brother, sister, parent, grandparent or immediate in-law

Trip Cancellation/Interruption Benefit (Self-Funded)

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

Trip Delay Benefit

Up to \$200 per person per day up to 5 days \$1,000 Benefit Maximum Subject to \$1,000 Benefit Maximum - Reimbursement for covered expenses incurred if your trip is delayed for more than 12 hours. Covered expenses include charges incurred for reasonable additional accommodations and traveling expenses until travel becomes possible. Benefit is payable for only one delay of your trip

Accidental Death & Dismemberment Benefit

\$100,000 For Employee/Student – Injury/sickness that results in an **Accidental** death
\$50,000 For Others – Injury/sickness that results in an **accidental** death
\$3,000,000 Aggregate Limit/Benefit maximum for all accidental death & dismemberment losses per covered accident

EXCLUSIONS (including but not limited to):

- injury resulting from off-road motorcycling; injury resulting from travel in or on any off-road motorized vehicle not requiring licensing as a motor vehicle, or a motor vehicle not designed primarily for use on public streets or highways; scuba diving; jet, snow or water skiing; mountain climbing (where ropes or guides are used); sky diving; amateur automobile racing; automobile racing or automobile speed contests; bungee jumping; spelunking; white water rafting; surfing; or parasailing
- injury sustained while participating in club, intramural, intercollegiate, interscholastic, professional or semi-professional sports
- services, supplies, or treatment including any period of hospital confinement which is not recommended, approved, and certified as medically necessary and reasonable by a Doctor, or expenses which are non-medical in nature
- routine physicals and care of any kind
- routine dental care and treatment
- routine nursery care



Coverages (continued):

- services or expenses incurred in the covered person's home country
- benefits for any loss or injury that is caused by or results from intentionally self-inflicted injury; suicide or attempted suicide (applicable to accidental death and dismemberment Benefit only)
- you being legally intoxicated as determined according to the laws of the jurisdiction in which the Injury occurred
- war or any act of war, whether declared or not
- commission of or active participation in a riot or insurrection
- commission of, or attempt to commit, a felony
- sickness, disease, bodily or mental infirmity, bacterial or viral infection, or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food (applicable to accident benefits only)
- quarantine expenses due to country/USA requirements prior to entry/departure to foreign territory/to USA
- COVID testing



Premiums Rates

Rates are subject to change depending on the dates of travel and the international / foreign destination. Travel to high-hazard/war-risk country destinations are subject to higher premiums and underwriter approval.

Employee/Faculty/Staff/Student/Other

- Trips 1-15 days: \$60.00 per participant / per trip
- Trips 16-31 days: \$75.00 per participant / per trip
- Trips 32-90 days: \$140.00 per participant / per trip

Contact Information

Chubb Travel Assistance Program

24-Hour Access

1-855-327-1414 (Toll Free)

1-630-694-9764 (Direct Dial)

Email: medassist-usa@axa-assistance.us

In the event of a medical assistance, medical emergency, travel assistance, and/or security assistance, the CSU participant (SF State traveler) should contact the Travel Assist provider to initiate assistance.

SF State University
Enterprise Risk Management
Main Office: (415) 405-3522
Email: riskmgmt@sfsu.edu