2026-27 Coverage Summary
CSURMA Foreign Travel Insurance Program (FTIP)

Policy Term: July 1, 2026 – July 1, 2027

Coverage Territory - Anywhere in the world excluding:

1. The United States of America (including its territories and possessions), Puerto Rico, and except as otherwise limited or extended by this insurance;
2. 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;
3. The Covered Person's Country of Permanent Assignment / Residence
4. The Covered Person's Home Country
5. ***PRIOR NOTIFICATION REQUIRED – Afghanistan, Belarus, Russia, Ukraine, Israel, Gaza, West Bank, Lebanon, Haiti, Yemen, Iran, Iraq, Libya, Pakistan, Syria, additional countries please refer to the war risk/high hazardous country list provided at renewal***

Covered Activities:
Educational Travel – university/auxiliary business, academic credit while traveling outside the United States, **personal deviation limited to maximum of 14 days.**

Limits / Sub-Limits / Deductible:

Primary General Liability

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

Employee Benefits Liability - Claims Made

1. Each Claim	$1,000,000
2. Annual Aggregate	$1,000,000
3. Deductible per Claim	$1,000

Contingent Auto Liability (Excess)

1. Bodily Injury/Property Damage Liability for each accident	$1,000,000
2. Hired Auto Physical Damage/any one policy period	$50,000
3. Hired Auto Physical Damage/any one accident	$50,000
4. Auto Medical Payments/each person/each accident	$50,000

Enterprise Risk Management
1600 Holloway Avenue ADM 258, San Francisco, CA 94132-4258
tel. 415.405.3522 | riskmgmt@sfsu.edu | erm.sfsu.edu

Employers Responsibility Coverage Voluntary Compensation

1. North Americans – State of Hire	State of Hire
2. Third Country Nationals – Country of Origin	Country Origin
3. Local Nationals – Country of Origin	Country Origin

Contingent Employers Liability

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

Executive Assistance Services (including Repatriation)

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

Primary Accident or Sickness Expense Benefit

1. Primary travel accident/sickness expense benefit	$250,000
2. Maximum dental treatment (injury only)	$1,000
3. Dental alleviation of pain only	$500
4. Emergency medical treatment of pregnancy	Treated as any other medical condition
5. Maximum for room & board charges	Average semi-private room rate
6. ICU room & board Charges	Two (2) times the average semi-private room rate
7. Maximum for therapeutic termination of pregnancy	$2,000
8. Deductible	$0
9. **Maximum period of coverage**	365 days
10. Incurred period after the date of the covered accident or sickness	60 days
11. Maximum benefit period - the earlier of the date the covered person's trip ends, or 52 weeks from the date of a Covered Accident or Sickness	

Emergency Medical Benefits

Emergency Medical Benefit maximum (up to)	$10,000

Emergency Medical Evacuation

Covered expenses for guarantee of payment to a medical provider hospital or treatment facility – ***limited to $250,000 from Antarctica and Greenland***	100% of Covered Expense

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Benefits covered expenses will not be payable unless the doctor ordering the evacuation certifies the severity of medical emergency – covered expenses:

1. Medical emergency
2. Require emergency medical evacuation
3. Medical transport for medically necessary treatment
4. Dispatch of a doctor or specialist – doctor's assessment/evaluation made by travel assistant provider
5. Transportation after stabilization – home country or host country or join the group if moved on to different location

Repatriation of Remains

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

Covered expenses include:
1. Expenses for embalming or cremation
2. The least costly coffin or receptacle adequate for transporting the remains
3. Transporting the remains
4. Escort services

Emergency Reunion Benefit

1. Benefit maximum	$5,000
2. Daily benefit maximum	$300
3. Maximum number of days round trip ticket to fly to injured participant included in maximum benefit	10 days
4. Benefit maximum for repatriation of remains	$2,000

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

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 incurred 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 for Reimbursement for non-refundable Covered Expenses you pay, 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

Trip Interruption Benefit
Up to $2,500 for reimbursement of cost of a round-trip 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)
Limited self-insured coverage up to $2,500 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
We will reimburse Covered Expenses incurred if your trip is delayed for more than 12 hours. The maximum we will pay is $200 per person per day up to 5 days, subject to a benefit maximum of $1,000. 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. Incurred expenses must be accompanied by receipts. Travel Delay must be caused by one of the following reasons: a) Injury, Sickness or death to either you, your Family Member or traveling companion that occurs during the Trip; b) carrier delay; c) lost or stolen passport, travel documents or money; e) Natural Disaster; f) you being delayed by a traffic accident while en route to a departure; g) hijacking; h) unpublished or unannounced strike; i) civil disorder or commotion; j) riot; k) inclement weather which prohibits Common Carrier departure; l) a Common Carrier strike or other job action; m) equipment failure of a Common Carrier; or n) the loss of your and/or your traveling companion's travel documents, tickets or money due to theft

Accidental Death & Dismemberment Benefit

1. For employee/student – injury/sickness that results in an accidental death	$100,000
2. For others – injury/sickness that results in an accidental death	$50,000
3. Aggregate limit/benefit maximum for all accidental death & dismemberment losses per covered accident	$3,000,000

Exclusions: *(including but not limited to)*

1. 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
2. Injury sustained while participating in club, intramural, intercollegiate, interscholastic, professional or semi-professional sports
3. 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
4. routine physicals
5. routine dental care and treatment
6. routine nursery care
7. services or expenses incurred in the covered person's home country
8. 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)
9. you are legally intoxicated as determined according to the laws of the jurisdiction in which the Injury occurred
10. war or any act of war, whether declared or not
11. commission of or active participation in a riot or insurrection
12. 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)
13. treatment or service provided by a private duty nurse
14. quarantine expenses due to country/USA requirements prior to entry/departure to foreign territory/to USA
15. COVID testing

Premiums Rates

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

Student/Faculty/Staff/Other

- Trips 1-15 days: $60.00 per participant / per trip
- Trips 16-31 days: $80.00 per participant / per trip
- Trips 32-90 days: $145.00 per participant / per trip
- Trips 91-180 days: $275.00 per participant / per trip
- Trips 181-270 days: $335.00 per participant / per trip
- Trips 271-364 days: $520.00 per participant / per trip

Contact Information

Chubb Travel Assistance Program

24-Hour Access

1-855-327-1414 (Inside U.S.)
1-630-694-9764 (Outside U.S.)
Email: medassist-usa@axa-assistance.us

Travel Assistance Portal
Visit website: travelassistance.chubb.com

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.

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