



# description of coverage



## Schedule of Benefits

\$ 25,000	Medical Expense
\$ 165	Per Day Sickness/ Hospital Benefit (up to 61 days)
\$ 100 100	Baggage Delay Travel Delay (Domestic Only)
\$ 300,000	Emergency Medical Transportation
\$ 25,000	Repatriation of Remains
\$ 500	Travel Document Replacement (covers administrative fees)
\$ 5,000	Accidental Death & Dismemberment - Air
\$ 1,000	Accidental Death & Dismemberment - Other

## **Blanket Travel Accident Insurance**

This document describes the benefits and basic provisions of the policy. You should read it with care so you will understand the coverage. The policy is the only contract under which benefits are paid.

### **PLEASE READ THIS DOCUMENT CAREFULLY!**

#### Insurance Coverage

Underwritten by the National Union Fire Insurance Company of Pittsburgh, PA, a subsidiary of the AIG Companies®, with its principal place of business at 70 Pine Street, New York, New York 10270. It is currently authorized to transact business in all states and the District of Columbia. NAIC No. 19445.

This is only a brief description of the insurance coverage(s) available under policy series T30253NUFIC. The Policy contains reductions, limitations, exclusions, and termination provisions. Full details of the coverage are contained in the Policy. If there are any conflicts between this document and the Policy, the Policy shall govern.

**PRODUCT NUMBER: 007439-CT P1 1/06**

**In the event of a claim, please refer to the above Product Number.**

## **SCHEDULE OF BENEFITS**

*The benefits are described in detail under "Description of Coverages." All coverages are per person.*

## **DEFINITIONS**

**"Baggage"** means luggage and personal possessions, whether owned, borrowed, or rented, taken by the Insured on the Trip.

**"Business Partner"** means an individual who a) is involved with the Insured or the Insured's Traveling

Companion in a legal partnership; and b) is actively involved in the daily management of the business.

**"Common Carrier"** means any conveyance operated under a license for the transportation of passengers for hire.

**"Complication of Pregnancy"** means a condition in which the diagnosis is distinct from pregnancy but adversely affected or caused by pregnancy. It does not include any condition associated with the management of a difficult pregnancy not consisting of a classifiably distinct Complication of Pregnancy.

**"Default"** means any failure of a provider of travel related services (including any tour operator) to provide the bargained-for travel services or to refund money due the Insured.

**"Contracted Departure Date"** means the date on which the Insured is originally scheduled to leave on his/her Trip.

**"Contracted Return Date"** means the date on which the Insured is originally scheduled to return from the Trip to the Return Destination.

**"Destination"** means the place where the Insured expects to travel on his/her Trip as shown on the Enrollment Form.

**"Experimental or Investigative"** means treatment, a device or prescription medication which is recommended by a Physician, but is not considered by the medical community as a whole to be safe and effective for the condition for which the treatment, device or prescription medication is being used, including any treatment, procedure, facility, equipment, drugs, drug usage, devices, or supplies not recognized as accepted medical practice, and any of those items requiring federal or other governmental agency approval not received at the time services are rendered.

**"Hospital"** means a place that: (a) holds a valid license; (b) is run mainly for the care and treatment of sick or injured persons as inpatients; (c) has a staff of one or more Physicians available at all times; (d) provides 24-hour nursing service and has at least one registered nurse on duty at all times; (e) has organized diagnostic and surgical facilities, either on the premises or on a contract basis with another Hospital; and (f) is not mainly a clinic, or facility for nursing, rest or convalescence, a place for the aged, or military or veterans hospital.

**"Immediate Family Member"** means the Insured's spouse, child, spouse's child, daughter-in-law, son-in-law, brother, sister, mother, father, grandparents, grandchild, step-brother, step-sister, step-parents, parents-in-law, brother-in-law, sister-in-law, aunt, uncle, niece, nephew, legal guardian, or legal ward.

**"Inclement Weather"** means any severe weather condition which delays the scheduled arrival or departure of a Common Carrier.

**"Injury"** means a bodily injury caused by an accident occurring while this Policy is in force as to the Insured whose Injury is the basis of a claim, and resulting directly and independently of all other causes of loss covered by this Policy. The injury must be verified by a Physician.

**"Insured"** means the person named on the individual Enrollment Form.

**"Insurer"** means National Union Fire Insurance Company of Pittsburgh, PA.

**"Medically Necessary"** means that a treatment, service or supply: (1) is essential for diagnosis, treatment or care of the Injury or Sickness for which it is prescribed or performed; (2) meets generally accepted standards of medical practice; (3) is ordered by a Physician and performed under his or her care, supervision or order; and (4) is not primarily for the convenience of the Insured, Physician, other providers or any other person.

**"Natural Disaster"** means a flood, hurricane, tornado, earthquake, or blizzard that is due to natural causes.

**"Physician"** means a licensed practitioner of the healing arts, including accredited Christian Science Practitioners, acting within the scope of his/her license. The treating Physician may not be the Insured, Immediate Family Member or Traveling Companion.

**"Reasonable Additional Expenses"** means any expenses for meals and lodging which were necessarily incurred as the result of a Trip Delay and which are not provided by the Common Carrier or any other party free of charge.

**"Reasonable and Customary Charges"** means an expense which: (a) is charged for treatment, supplies or medical services Medically Necessary to treat the Insured's condition; (b) does not exceed the usual level of charges for similar treatment, supplies or medical services in the locality where the expense is incurred; and (c) does not include charges that would not have been made if no insurance existed. In no event will the Reasonable and Customary Charges exceed the actual amount charged.

**"Return Destination"** means the place to which the Insured expects to return from his/her Trip.

**"Sickness"** means an illness or disease which is diagnosed or treated by a Physician.

**"Strike"** means a stoppage of work (a) announced, organized, and sanctioned by a labor union and (b) which interferes with the normal departure and arrival of a Common Carrier. Included in the definition of Strike is work slowdowns and sickouts.

**"Travel Agent"** means the Travel Agent, tour operator, or other entity from which the Insured purchases his/her coverage or travel arrangements, and includes all officers, employees, and affiliates of the Travel Agent or tour operator.

**"Traveling Companion"** means a person or persons with whom the Insured has coordinated travel arrangements and intend to travel with during the Trip. A group or tour leader is not considered a Traveling Companion, unless the Insured is sharing room accommodations with the group or tour leader.

**"Trip"** means a period of round-Trip travel away from home to a Destination outside the Insured's city of residence; the purpose of the Trip is business or pleasure and is not to obtain health care or treatment of any kind; the Trip has defined departure and return dates specified when the Insured applies; and the Insured's Destination is not to another home; travel is primarily by Common Carrier and only incidentally by private conveyance.

## INDIVIDUAL ELIGIBILITY, EFFECTIVE & TERMINATION DATES

Persons eligible for insurance under the policy are any holders of a valid and current International Student, International Teacher, International Youth Travel Card (IYTC), or ISTC Staff Identity Card which was purchased in the United States through STA Travel or one of its appointed institutional or organizational offices. The insurance coverage is valid outside of the 50 United States and the District of Columbia.

**Effective Date:** All coverages will begin on the date the premium is paid.

**Termination Date:** All coverage ends on the expiration of the International Student, International Teacher, or IYTC cards.

## GENERAL EXCLUSIONS

These exclusions apply to all benefits. In addition to any exclusions which apply to a particular benefit (called "Additional Exclusions"), the policy does not cover loss caused by:

a) suicide, or attempted suicide, or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury by the Insured, Immediate Family Member, Traveling Companion or Business Partner (while sane, in Colorado and Missouri); (b) pregnancy or childbirth, or elective abortion, other than Complications of Pregnancy; (c) professional athletic events, motor sport, or motor racing, including training or practice for the same; (d) mountain climbing; (e) war or act of war, whether declared or not, civil commotion, insurrection or riot; (f) full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured is not covered due to his or her active duty status will be refunded.) (Loss caused while on short-term National Guard or reserve duty for regularly scheduled training purposes is not excluded); (g) operating or learning to operate any aircraft, as student, pilot or crew; (h) air travel on any air-supported device, other than a regularly scheduled airline or air charter company; (i) loss or damage caused by detention, confiscation, or destruction by customs; (j) any unlawful acts, committed by the Insured, a Traveling Companion, or an Immediate Family Member, whether insured or not (not applicable to Florida residents); (k) mental, psychological, or nervous disorders including, but not limited to, anxiety, depression, neurosis, or psychosis; (l) if the Insured's tickets do not contain specific travel dates (open tickets); (m) alcohol or substance abuse or treatment for same; (n) medical treatment during or arising from a Trip undertaken for the purpose or intent of securing medical treatment or traveling expressly for the purpose of obtaining medical treatment; (o) elective or non-emergency treatment or surgery, except for any necessary treatment or surgery due to covered Injury; (p) Experimental or Investigative treatment or procedures; or (q) an Injury or Sickness which occurs at a time when this coverage is not in effect.

**PRE-EXISTING MEDICAL CONDITION  
EXCLUSION APPLICABLE TO ALL COVERAGES**

The Insurer will not pay for loss or expense incurred as the result of an Injury, Sickness or other condition of the Insured, a Traveling Companion, or an Immediate Family Member of the Insured or Traveling Companion which, within the 60 day period before the Insured's coverage began: (a) first manifested itself, worsened, became acute, or had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; (b) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or (c) required treatment by a Physician or treatment had been recommended by a Physician.

**MAXIMUM LIMIT OF LIABILITY:** All limits are applied per Trip. The Insurer's maximum limit of liability resulting from the same occurrence will be \$10,000,000 under the AIG Travel Guard Program Policies (ATGP Policies). If loss for all Insureds from such an occurrence exceeds \$10,000,000, the Insurer will pay each Insured that proportion of the Benefits stated which \$10,000,000 bears to the total loss of all persons the Insurer insures under all travel and flight insurance in force, under the ATGP Policies. The Insurer will pay no more than \$300,000 per occurrence, under the ATGP Policies, to or on account of any person insured under the ATGP Policies.

---

### **\$100 Baggage Delay**

The Insurer will reimburse incurred expenses up to the Maximum Limit shown on the Schedule of Benefits for Baggage which is delayed or misdirected more than 24 hours for the cost of necessary personal effects. Incurred expenses must be accompanied by receipts. This does not apply if Baggage is delayed after the Insured reaches his/her Return Destination.

---

### **\$100 Travel Delay**

The Insurer will reimburse up to \$100 a day to the Maximum Limit shown on the Schedule of Benefits if the Insured's Trip is delayed for more than 12 hours for Reasonable Additional Expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable for only one delay per Insured, per Trip. Travel Delay must be caused by: (a) carrier delay; or (b) lost or stolen passport, travel documents, or money; or (c) quarantine; or (d) Natural Disaster; or (e) Injury or Sickness of the Insured or Traveling Companion.

---

### **\$25,000 Medical Expense Benefit**

The Insurer will pay this benefit, up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will pay for medical expenses incurred by the Insured within one year from the date of Injury or Sickness provided initial treatment was received during the Trip. The Injury must occur or Sickness must begin while the Insured is covered by the policy. Covered Expenses: The Insurer will pay the Insured's Reasonable and Customary Charges for medical and surgical expenses. The Insurer will pay emergency dental treatment only during a Trip. Dental coverage does not apply if treatment or expenses are incurred after the Insured has reached his or her Destination, in the case of a one-way ticket, or Return Destination regardless of the reason. The treatment must be given by a Physician or dentist. The Insurer will pay for professional nursing, Hospital charges, X-ray, ambulance services, and prosthetic devices. The Insurer will also reimburse \$165 per day up to 61 days for Hospital costs due to Sickness. If the Insured is covered by any other group, blanket health, accident insurance, or assistance plan, and would, as a result, receive total benefits in excess of the expenses actually incurred, the benefits will be reduced by such excess.

---

### **\$300,000 Emergency Medical Transportation**

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits. The Insurer will arrange for emergency medical transportation services required by the Insured as the result of an Injury or emergency Sickness during a Trip. Covered Expenses: The Insurer will arrange and pay: (a) Reasonable and Customary Charges for medical services required for evacuation to the nearest adequate medical facility or home if medically required. This service will be arranged only if the Insured's Physician determines that adequate medical treatment is not locally available; (b) Reasonable and Customary Charges for escort expenses required by Insured, if the Insured is disabled during a Trip, and an escort is recommended, in writing, by the attending Physician; (c) Reasonable and Customary Charges for services for transportation of the Insured's remains to his/her place of residence if he/she dies during a Trip. Services must be provided by a provider designated by the Insurer. Additional Benefit: In addition to the above Covered Expenses, if the Insurer has previously evacuated an Insured to a medical facility, the Insurer will pay his/her airfare costs from that facility to the Insured's Return Destination, within one year from the Insured's original Trip Completion Date, less refunds from the Insured's unused transportation tickets. Airfare costs will be economy, or first class if the Insured's original tickets are first class. This benefit is available only if it is not provided under another coverage in the policy. Additional Exclusions: In addition to the General Exclusions, the Insurer also will not pay for services arranged without the Insurer's prior consent or approval. Timely notification by the Insured to the Insurer's designated provider is required, with regard to Emergency Evacuation.

---

### **\$25,000 Repatriation of Remains**

In the event of death while traveling, reimburses the reasonable covered expenses incurred to return the Insured's body to the United States. This will not exceed the maximum amount shown on the Schedule of Benefits. Covered expenses included expenses for transportation. Expenses must be accompanied by receipts.

---

### **\$500 Travel Document Replacement**

The Insurer will reimburse for fees associated with the replacement of the Insureds travel documents during the Insured's Trip. Receipts are required for reimbursement.

## **\$5,000 Air/\$1,000 Excluding Air Accidental Death and Dismemberment**

---

The Insurer will pay this benefit up to the Maximum Limit shown on the Schedule of Benefits if: (a) the Insured is Injured in an accident which happens while he or she is on a Trip and covered under the Policy; and (b) he or she suffers one of the losses listed below, within 180 days of the accident. The Maximum Limit is shown on the Schedule of Benefits.

<b>Loss:</b>	<b>Percentage of Maximum Limit Payable:</b>
Life	100%
Both hands or feet, or sight of both eyes	100%
One hand and one foot	100%
One hand or one foot and sight of one eye	100%
One hand	50%
One foot	50%
Sight of One Eye	50%

If the Insured suffers more than one loss from an accident, the Insurer will pay only for the loss with the larger benefit.

The Insurer will not pay more than 100% of the maximum limit for all losses due to the same accident. Loss of a hand or foot means complete severance at or above the wrist or ankle joint. Loss of sight of an eye means complete and irrecoverable loss of sight.

Disappearance: If the Insured's body is not found within one year of the disappearance, forced landing, stranding, wrecking, or sinking of a conveyance in which he/she was an occupant, he/she will be presumed dead.

Additional Exclusion: In addition to the General Exclusions, the Insurer will not pay for loss caused by or resulting from Sickness or disease of any kind.

### **PAYMENT OF CLAIMS**

**Claim Procedures: Notice of Claim:** The Insured must call AIG Travel Guard as soon as reasonably possible, and be prepared with what coverage the loss was under (i.e. Medical Expense), the name of the company that arranged the Trip (i.e. tour operator, cruise line, or charter operator), the Trip dates and the amount that the Insured paid. AIG Travel Guard will complete the claim form and send it to the Insured for his/her review/signature. The completed form should be returned to AIG Travel Guard, PO Box 47, Stevens Point, Wisconsin 54481 (Telephone: 1.877.370.4742). All claims of California residents will be administered by Mercury Claims Administrator Services, LLC. All accident, health, and life claims will be administered by Mercury Claims & Assistance of WI, LLC in those states where it is licensed.

**Claim Procedures: Proof of Loss:** The claim forms must be sent back to AIG Travel Guard no more than 90 days after a covered loss occurs or ends, or as soon after that as is reasonably possible. All claims under the coverage must be submitted to AIG Travel Guard no later than one year after the date of loss or insured occurrence or as soon as reasonably possible. If AIG Travel Guard has not provided claim forms within 15 days after the Notice of Claim, other proofs of loss should be sent to the Insurer by the date claims forms would be due. The proof of loss should include written proof of the occurrence, type and amount of loss, the Insured's name, the participating organization name and the policy number.

**Payment of Claims: When Paid:** Claims will be paid as soon as AIG Travel Guard receives complete proof of loss and verification of age.

Benefits for Medical Expense/Emergency Medical Transportation Services may be payable directly to the provider of the services. However, the provider: a) must comply with the statutory provision for direct payment, and b) must not have been paid from any other sources.

**Problems with your insurance?** If so, do not hesitate to contact AIG Travel Guard to resolve your problem at 1145 Clark Street; Stevens Point, WI 54481 or call 1.877.370.4742.

### **GENERAL PROVISIONS**

**Acts of Agents** - No agent or any person or entity has authority to accept service of the required proof of loss or demand arbitration on the Insurer's behalf nor to alter, modify or waive any of the provisions of the policy.

**Autopsy** - The Insurer at its own expense, may require an autopsy where permitted by law.

**Concealment or Fraud** - The Insurer does not provide coverage for the Insured if the Insured has intentionally concealed or misrepresented any material fact or circumstance relating to the policy or claim.

**Insurer's Recovery Rights** - In the event of a payment under the policy, the Insurer is entitled to all rights of recovery that the Insured, or the person to whom payment was made, has against another. The Insured must sign and deliver to the Insurer any legal papers relating to that recovery, do whatever is necessary to help the Insurer exercise those rights, and do nothing after the loss to harm the Insurer's rights. When an Insured has been paid benefits under the policy but also recovers from another policy, the amount recovered from the other policy shall be held in trust for the Insurer by the Insured and reimbursed to the Insurer the extent of the Insurer's payment. This provision does not apply in North Carolina.

**Legal Actions** - No one may sue for benefits less than 60 days after due proof of loss is submitted, nor more than 3 years (or the minimum period of time permitted by state law, if greater) after the date claim forms are due.

**Payment of Premium** - Coverage is not effective unless all premium due has been paid to AIG Travel Guard prior to a date of loss or insured occurrence.

**Termination of the Policy** - Termination of the policy will not affect a claim for loss which occurs while the policy is in force.

**Transfer of Coverage** - Coverage under the policy cannot be transferred by the Insured to anyone.

**Notice to California residents:** The plan contains disability insurance benefits or health insurance benefits, or both, that only apply during your covered Trip. You may have coverage from other sources that already provides you with these benefits. You should review your existing policies. If you have any questions about your current coverage, call your insurer or health plan.

**Notice to Florida residents:** The benefits of the Policy providing your coverage are governed primarily by the law of a state other than Florida.

The definition of "**Hospital**" applicable to residents of Florida is as follows:

Hospital means a facility that: (1) is operated according to law for the care and treatment of injured people; (2) has organized facilities for diag-



nosis and surgery on its premises or in facilities available to it on a prearranged basis or is accredited by the Joint Commission on the Accreditation of Hospitals, the American Osteopathic Association, or the Commission on the Accreditation of Rehabilitative Facilities; (3) has 24 hour nursing service by registered nurses (R.N.'s); and (4) is supervised by one or more Physicians. A Hospital does not include: (1) a nursing, convalescent or geriatric unit of a hospital when a patient is confined mainly to receive nursing care; (2) a facility that is, other than incidentally, a rest home, nursing home, convalescent home or home for the aged; nor does it include any ward, room, wing, or other section of the hospital that is used for such purposes; or (3) any military or veterans hospital or soldiers home or any hospital contracted for or operated by any national government or government agency for the treatment of members or ex-members of the armed forces.

The Legal Actions provision applicable to residents of Florida is as follows: No action at law or in equity may be brought to recover on this Policy prior to the expiration of 60 days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action may be brought after the expiration of 5 years after the time written proof of loss is required to be furnished.

Exclusion (j) does not apply to residents of Florida.

For inquiries, information about coverage or for assistance in resolving complaints call: 1.877.370.4742.

**Notice to North Carolina residents:** This Description of Insurance provides all of the applicable benefits mandated by the North Carolina Insurance code, but is issued under a master policy located in another state and may be governed by that state's laws.

**Notice to Texas residents:** The policy may provide a duplication of coverage already provided by your personal auto insurance, homeowner's, personal liability policy, or other source of coverage.

### AIG Travel Assist

- All benefits provided are service benefits, not financial benefits. Any costs associated with benefits not purchased will be paid by the named Insured.
- 24-HOUR MEDICAL ASSISTANCE
- 24-Hour Medical Monitoring:** Physicians monitor the Insured's condition by maintaining close contact with the attending Physicians, his/her family Physician, and Immediate Family Members.
- Medical Evacuation:** Arrangements for any and all means necessary to transport the Insured back home when Medically Necessary.
- Emergency Medical Payments:** If a Hospital demands a cash deposit or settlement prior to leaving, AIG Travel Assist will assist in arranging the advancement of funds to cover onsite medical expenses.
- Prescription Assistance:** Replacement of lost or stolen medication, through a local pharmacy or special courier.
- Transportation of Dependents:** In the event of hospitalization, arrangements will be made for unattended minors traveling with the Insured to be flown home.
- Family Visit:** If the Insured is hospitalized for ten or more days, AIG Travel Assist will arrange transportation for an Immediate Family Member or close friend to visit him/her.
- Transportation of Mortal Remains:** In the event of death while traveling, arrangements for the return of remains to the place of burial.
- 24-HOUR LEGAL ASSISTANCE
- In a legal emergency, referral to a local legal advisor, and advance of funds for bail and legal fees.
- 24-HOUR TRAVEL ASSISTANCE
- Travel Documents Assistance:** AIG Travel Assist will help retrieve, report, and reissue lost or stolen travel documents.
- Emergency Cash Transfer:** AIG Travel Assist will, whenever possible, coordinate with the Insured and a wire agency, in obtaining funds in local currency for medical or travel emergencies.
- Emergency Message Center:** Transmission of emergency messages to family and business associates.
- Interpretation Services:** AIG Travel Assist provides emergency language support or referral to the appropriate local services.

Non-insurance services are provided by AIG Travel Assist.

Make sure you call AIG Travel Guard (1.877.370.4742 or, 1.715.295.5452) before you seek medical care while traveling. Where available, we can arrange direct payment to a member of our Preferred medical network, saving you the time and paperwork associated with reimbursement of medical expenses. Our assistance coordinators also can help you locate the nearest and most appropriate medical provider, monitor your care, and provide updates to your family and/or employer.

Any payments under this policy will only be made in full compliance with all United States of America economic or trade sanction laws or regulations, including, but not limited to, sanctions, laws and regulations administered and enforced by the U.S. Treasury Department's Office of Foreign Assets Control ("OFAC"). Therefore, any expenses incurred or claims made involving travel that is in violation of such sanctions, laws and regulations will not be covered under the policy. For more information, you may consult the OFAC internet website at [www.treas.gov/offices/enforcement/ofac/](http://www.treas.gov/offices/enforcement/ofac/) or an AIG Travel Guard representative.

**24-Hour Emergency Assistance Telephone Numbers**

Continental USA.....**1.877.370.4742**

International.....**1.715.345.0505**

*Be sure to use the appropriate country and city codes when calling.*

**- KEEP THESE NUMBERS WITH YOU WHEN YOU TRAVEL -**



AIG Travel Guard — a wholly owned subsidiary of AIG Travel, Inc.,  
a member company of American International Group, Inc.