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## Accident and Sickness Benefits for Towson University

You are a Covered Person and eligible for coverage under the plan, if you are in the eligible class defined below. For benefits to be payable the Policy must be in force, the required premium must be paid and you must be engaging in one of the Covered Activities described below. If you are not in Active Service on the date your insurance would otherwise be effective, it will go into effect on the date you return to Active Service.

**Class Description:** All full-time students of the Participating Organization engaged in the Covered Activity outside of the United States.

Your Dependents (lawful spouse and unmarried children, subject to Dependent age limits in the state where the Policy is issued) are also covered, if they are traveling with you.

**Period of Coverage:** You will be insured on the later of the Policy Effective Date or the date that you become eligible. Your coverage will end on the earliest of the date: 1) the Policy terminates; 2) you are no longer eligible; or 3) the period ends for which the required premium is paid. Dependents coverage will end on the earliest of the date: 1) he or she is no longer a Dependent; 2) your coverage ends; or 3) the period ends for which the required premium is paid.

**Term of Coverage:** This coverage will start on the actual start of the Trip. It does not matter whether the Trip starts at your home, place of work, or other place. It will end on the first of the following dates to occur: 1) The date you return to your Home Country; 2) the scheduled Trip return date; or 3) the date you make a Personal Deviation (unless otherwise provided by the Policy).  
activity; and 2) Not incidental to the purpose of the Trip.

### Covered Activities:

**Educational Travel** - We will pay the benefits described only if you suffer a loss or incurs a Covered Expense as the direct result of a Covered Accident or Sickness while traveling: 1) outside of your Home Country; 2) up to 365 days; and 3) engaging in an educational Trip authorized by the Policyholder.

**Exposure & Disappearance** - Coverage includes exposure to the elements after the forced landing, stranding, sinking, or wrecking of a vehicle in which you were traveling. You are presumed dead if you are in a vehicle that disappears, sinks, or is stranded or wrecked on a trip covered by the Policy; and the body is not found within one year of the Covered Accident.

**Personal Deviation** – The Covered Accident or Sickness must take place during a Personal Deviation while on a Trip covered by the Policy.

1) An activity that is not reasonably related to the Covered Activity; and 2) Not incidental to the purpose of the Trip.

### Description of Benefits

**Medical Expense Benefits** - We will pay for Covered Expenses that result directly from a Covered Accident or Sickness. These benefits are payable the earlier of the date your Trip ends, or 52 weeks from the date of a Covered Accident or Sickness provided the first Covered Expense was incurred

for your spouse is \$500,000; and for your children is \$500,000 subject to a Deductible of \$0 per Covered Accidentt the Max



you to a medical facility due to an Emergency Medical Evacuation, We will pay transportation costs to; a) your Home Country, or b) your host country, or c) join the group if they have moved onward to a different location.

Benefits for these Covered Expenses will not be payable unless: 1) the Doctor ordering the Emergency Medical Evacuation certifies the severity of your Medical Emergency requires an Emergency Medical Evacuation; 2) all transportation arrangements made for the Emergency Medical Evacuation are by the most direct and economical conveyance and route possible; 3) the charges incurred are Medically Necessary and do not exceed the Usual and Customary Charges for similar transportation, treatment, services or supplies in the locality where the expense is incurred; and 4) do not include charges that would not have been made if there were no insurance.

Benefits will not be payable unless We authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider. In the event you refuse to be medically evacuated, we will not be liable for any medical expenses incurred after the date medical evacuation is recommended.

**Repatriation of Remains Benefit** - We will pay 100% of Covered Expenses for preparation and return of your body to your home if you die as a result of a Medical Emergency while traveling on a covered Trip. 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; and 4) Escort Services which include expenses for an Immediate Family Member, or companion who is traveling with you, to join your body during the repatriation to your place of residence.

All transportation arrangements must be made by the most direct and economical route and conveyance possible and may not exceed the Usual and Customary Charges for similar transportation in the locality where the expense is incurred. Benefits will not be payable unless We authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider.

**Chaperone Replacement Benefit** - In the event that the official chaperone of the policyholder is prevented from continuing his to her Trip due to Injury, Sickness or death to him or her or an Immediate Family Member that occurs after the Trip begins and before the Trip scheduled termination date, We will pay the cost of replacement of the chaperone up to the amount of the chaperone fee. The replacement chaperone must be of the same gender as the original chaperone and must be a resident of the United States.





ns your spouse, child, brother, sister, parent, grandparent or immediate in-law.

a terrorist act. The terrorist act must occur within any country of destination and after your enrollment form and premium are received for the Trip Cancellation coverage and within 45 days of the date you are ticketed to travel; or 2) An act of violence directed at or occurring in an aircraft traveling or scheduled to travel where you are ticketed to travel, that is determined by United States officials to be a terrorist act. The terrorist act must occur after the enrollment form and premium are received for your Trip Cancellation coverage and within 45 days of the date you are ticketed to travel; or 3) The issuance of a Level 4 Travel Advisory (T) by the United States Department of State to avoid a country of destination to which you are ticketed to travel. Terrorism: terrorist attacks have occurred and/or specified threats against civilians, groups, or other targets may exist. The Level 4 Travel Advisory (T) must be issued after the enrollment form and premium are received for your Trip Cancellation coverage and within 45 days of the date you are ticketed to travel.

**Trip Delay Benefit** - We will reimburse Covered Expenses you incur if your trip is delayed for more than 12 hours. The maximum we will pay is \$100 per person per day up to 5 days, subject to a benefit maximum of \$500.

Covered Expenses include charges incurred for reasonable, additional accommodations and traveling expenses until travel becomes possible. Incurred expenses must be accompanied by receipts. This benefit is payable only for one delay of your Trip.

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; d) Quarantine; 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.

Coverage is also provided for up to 1 Chaperone or 1 Family Member, who is traveling with you when you are subject to Quarantine/Sickness as defined above.

during the Trip. accompany Covered Persons

-law.

authority, their authorized deputies, or medical examiners due to you either having, or being suspected of having, a contagious disease, infection or contamination while you are traveling outside of your Home Country.

Your Duties in the Event of Loss: you must provide Us with proof of the Travel Delay such as a letter from the airline, cruise line, or Tour operator/ newspaper clipping/ weather report/ police report or the like and proof of the expenses claimed as a result of Trip Delay.

**Trip Interruption Benefit** - We will reimburse the cost of a round trip economy air and/or ground transportation ticket for your Trip, up to \$5,000 if your Trip is interrupted as the result of: 1) the death of a Family Member; or 2) the unforeseen Injury or Sickness of you or a Family Member. The Injury or Sickness must be so disabling as to reasonably cause a Trip to be interrupted; or 3) a Medically Necessary covered Emergency Medical Evacuation to return you to your Home Country or to the area from which you were initially evacuated 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. your parent, sister, brother, spouse, child, grandparent, or in-law.

**Accidental Death and Dismemberment Benefits** - If your Injury results, within 365 days from the date of a Covered Accident, in any one of the losses shown below, We will pay the Benefit Amount shown below for that loss. Your Principal Sum is \$15,000 \$15,000. \$15,000. If multiple losses occur, only one Benefit Amount, the largest, will be paid for all losses due to the same Covered Accident.

**Schedule of Covered Losses**

**Covered Loss**

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Quadriplegia.....	100% of the Principal Sum
One Member.....	50% of the Principal Sum
Hemiplegia.....	50% of the Principal Sum
Paraplegia.....	50% of the Principal Sum
Thumb and Index Finger of the Same Hand.....	25% of the Principal Sum
Uniplegia.....	25% of the Principal Sum

the loss of use to be complete and not reversible at the time the claim is submitted.

elective treatment, exams or surgery; elective termination of pregnancy.  
expenses for services, treatment or surgery deemed to be experimental and which are not recognized and generally accepted medical practices in the United States.  
expenses payable by any automobile insurance policy without regard to fault.  
organ or tissue transplants and related services.  
Injury or Sickness for which benefits are paid or payable under any Workers' Compensation or Occupational Disease Law or Act, or similar legislation, whether United States federal or foreign law.  
Injury sustained while participating in intercollegiate, interscholastic, professional or semi-professional sports.  
Injury resulting from off-road motorcycling; 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.

If We determine the benefits paid under the Policy are eligible benefits under any other benefit plan, We may seek to recover any expenses covered by another plan to the extent that you are eligible for reimbursement.

This insurance does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit us from providing insurance, including, but not limited to, the payment of claims.

**Definitions: "Country of Permanent Assignment"** means a country, other than your Home Country, in which the Policyholder requires you to work for a period of time that exceeds 365 continuous days. **"Country of Permanent Residence"** means a country or location in which you maintain a primary permanent residence.



## IMPORTANT NOTICE

This plan provides travel insurance benefits for individuals traveling outside of their home country. It does not constitute comprehensive

Affordable Care Act (ACA).

For more information about the ACA, please refer to [www.HealthCare.gov](http://www.HealthCare.gov).

**For medical evacuation, repatriation, or other assistance services call: AXA Assistance at 855-327-1414 (Toll-Free) or 1-630-694-9764 (Direct Dial); or UK/FOS +44 2039 015895; or e-mail [medassist-usa@axa-assistance.us](mailto:medassist-usa@axa-assistance.us).**

**To access Chubb's Travel Assistance Website go to [travelassistance.chubb.com](http://travelassistance.chubb.com).**

**Travel Assistance Services:** In addition to the insurance protection provided by your insurance plan, Chubb NA has arranged with our Assistance Provider to provide you with access to its travel assistance services around the world. These services include:

Medical Assistance including referral to a doctor or medical specialist, medical monitoring when you are hospitalized, emergency medical evacuation to an adequate facility, medically necessary repatriation and return of mortal remains.

Personal Assistance including pre-trip medical referral information and while you are on a trip: emergency medication, embassy and consular information, lost document assistance, emergency message transmission, emergency cash advance, emergency referral to a lawyer, translator or interpreter access, verifies medical benefits and assists with medical claims process.

Travel Assistance including emergency travel arrangements, arrangements for the return of your traveling companion or dependents and vehicle return.

Access to a secure, web-based system for tracking global threats and health or location based risk intelligence.

Crisis hotline and on the ground security assistance to help address safety concerns or to secure immediate assistance while traveling.

When you call, please be prepared with the following information: 1) name of caller, phone number, fax number, and insurance plan; 2) address of the hospital or other service provider; 3) address of the caller, and telephone number of the hospital or other service provider; and

involved in an accident.

This information provides you with a brief outline of the services available to you. These services are not insured benefits. Reimbursement for any service expenses is limited to the terms and conditions of the policy under which you are insured. You may be required to pay for services not covered. A third party vendor may provide services to you. Our Assistance Provider makes every effort to refer you to appropriate medical and other service providers. It is not responsible for the quality or results of service provided by independent providers. In all cases, the medical provider, facility, legal counsel or other professional service provider suggested by Chubb

Assistance Provider and the choice of provider is yours alone. Chubb Assistance Provider assumes no liability for the services provided to you under this arrangement, nor is it liable for any negligence or other wrongful acts or omissions of any of the legal or health care professionals providing services to you. Travel assistance services are not available if your coverage under the policy is not in effect.