# CHUBB

## Personal Travel Insurance

Designed for: **University of California** 





Whether traveling for business, pleasure, or educational purposes, individuals want the peace of mind that comes with purchasing travel insurance to help provide the security they need. This Travel Accident Protection Program responds to medical emergencies for travelers outside of their home country or country of permanent residence by providing accident and sickness benefits and valuable travel assistance services. There are three plans available, each featuring varying levels of coverage and benefits.

# You can enhance your insurance coverage for ANY of the plans listed on page 3 by selecting Quarantine Benefit

Pays up to \$2,000 for expenses incurred if the individual is subject to a Quarantine for H1N1 Influenza or any contagious disease that prevents traveling. Benefits will end on the earlier of 14 days after Quarantine is issued or the date it ends.

Covered Expenses include reasonable expenses incurred for lodging and meals; the cost of a one-way economy airfare ticket to their home country or to re-join the trip; and non-refundable travel arrangements.

UC Haver Hair Rates per week			
Coverage Level	Blue Plan	Gold Plan	Gold Plan Plus
\$25,000 Medical Expense Maximum \$50,000 AD&D Principal Sum	\$22.63	\$29.56	\$49.52
With \$2,000 Quarantine Benefit	\$24.33	\$31.26	\$51.22
\$50,000 Medical Expense Maximum \$100,000 AD&D Principal Sum	\$25.51	\$37.57	\$57.63
With \$2,000 Quarantine Benefit	\$27.21	\$39.27	\$59.33

### UC Travel Plan Rates per Week

## UC Travel Gold Plan Plus

## **UC Travel Gold Plan**

### **UC Travel Blue Plan**

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Out-of-Country Medical Expense Benefit Pays up to \$25,000 or \$50,000 (individual election) for medically necessary covered expenses, provided the first charge is incurred within 60 days after a covered accident or sickness. Coverage ends on the earlier of the date the individual returns to their home country or country of residence or 26 weeks from the date of the covered accident or sickness, subject to the duration of the scheduled trip shown on the enrollment form.	<b>Cosmetic Disfigurement from Burns</b> <b>Benefit</b> Pays 20% of the principal sum elected by the individual if the individual suffers third- or fourth-degree burns in one or more areas of the body as the result of a covered accident. The principal sum for this benefit is the same as the amount elected for Accidental Death & Dismemberment benefits.	<b>Trip Cancellation Benefit</b> Pays up to \$2,000 for reimbursement of non-refundable covered expenses if the trip is cancelled as the result of injury, sickness, or death of the traveler or a family member prior to the scheduled trip departure date.
<b>Emergency</b> <b>Medical Evacuation Expense</b> Provides 100% of covered expenses for emergency medical evacuation when an individual is traveling outside of their home country or country of residence and suffers a medical emergency.	Home Alteration and Vehicle Modification Benefit Provides up to 20% of the principal sum elected if an individual suffers a covered loss and requires adaptive devices or adaptation of his or her residence or vehicle to maintain an independent lifestyle.	
Accidental Death & Dismemberment Benefit Pays up to the principal sum elected by the individual if the individual dies; loses a limb, sight, speech, or hearing; or becomes paralyzed as the direct result of a covered accident. Principal sum options are \$50,000 or \$100,000.	<b>Lost Baggage Benefit</b> Pays up to \$250 with a \$50 maximum benefit per bag for reimbursement of costs incurred to replace clothes and personal hygiene items, if an individual's luggage is checked onto a common carrier and is then lost, stolen, or damaged beyond use.	
Security Evacuation Benefits Pays up to \$10,000 if an individual must be evacuated to the nearest place of safety in the event of an expulsion; being declared persons non-grata; political or military events; natural disaster; physical harm; or kidnapping.	<b>Trip Delay Benefit</b> Pays up to \$200 per day for up to 5 days if a covered trip is delayed for more than 6 hours as the result of injury or sickness or death of the traveler, a family member, or a traveling companion that occurs during the trip.	
<b>Repatriation of Remains Benefit</b> Provides 100% of covered expenses for preparation and return of an individual's body in the event of a death occurring outside of their home country or country of residence.	<b>Trip Interruption Benefit</b> Pays the cost of a round-trip economy air and/or ground transportation ticket up to \$2,000 if a covered trip is interrupted as the result of injury or sickness of the traveler or a family member or death of a family member.	
	War Risk Coverage Pays up to 100% of the principal sum elected by the individual if the individual suffers a covered loss caused by war or acts of war on a worldwide basis, with the exception of the following countries: Afghanistan, Belarus, Iran, Iraq, Russia, Ukraine, the U.S., the insured's home country, and the insured's country of residence.	2



#### **Emergency Assistance Services** (medical referrals, prescriptions, evacuation, repatriation):

Call AXA Assistance if in the United States or Canada at **1-855-327-1420**; outside of the United States or Canada, call **1-630-694-9804**; or email <u>medassist-usa@axa-assistance.us</u>. Identify yourself as an insured under the UC Blue/Gold Program and provide the policy number GLM N04952029.

#### **Claims Instructions:**

For coverage inquiries, claim forms, or claim status, please contact:

Administrative Concepts, Inc. (ACI) P.O. Box 4000, Collegeville, PA 19426

Phone Numbers: **1-888-293-9229** (from inside the USA) **1-610-293-9229** (from outside the USA)

#### Fax: 1-610-293-9299

Email: intlassist@acitpa.com

#### Arranged By:

Mercer Health & Benefits LLC New York, NY

#### **Claims Administered By:**

Administrative Concepts, Inc. Wayne, PA

#### **Underwritten By:**

ACE American Insurance Company Philadelphia, PA

#### **Enroll Here:**

https://secure.visit-aci.com/insurance/ uoctravel/



#### UC Travel Blue, Gold, and Gold Plus Plans

#### (Accident & Sickness Benefits for Individuals Traveling Outside of Their Home Country)

You are a Covered Person and eligible for coverage under the plan, if you are a member of the University of California's Educational Community with an established relationship with the University. For benefits to be payable under the Policy you must enroll for coverage and pay the required premium.

#### Term of Coverage:

Your coverage will start on the actual start of your trip (the Scheduled Departure Date shown on your enrollment confirmation statement). Your coverage will end on the earlier of 1) the date that you return to your Home Country; 2) the Scheduled Return Date shown on your enrollment confirmation statement, or 3) the date your Trip extends more than 180 days.

#### Covered Activity — Specified Trip Coverage:

We will pay the benefits only if you suffer a loss or incur a Covered Expense as the direct result of a Covered Accident or Sickness while traveling outside of your Home Country for up to 180 days on a Trip for which you have purchased this insurance.

#### **Description of Benefits**

#### **Out-of-Country 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 26 weeks from the date of a Covered Accident or Sickness provided the first Covered Expense was incurred within 60 days after the date of Covered Accident or Sickness. The Maximum Benefit for all Accident and Sickness benefits is the amount shown on your confirmation statement. Medical Expense Benefits are only payable: 1) for Usual and Customary Charges incurred after the Deductible has been met;

2) for those Medically Necessary Covered Expenses that you incur; 3) for charges incurred for services rendered to you while on a covered Trip; and 4) provided the first charge is incurred 60 days after the date of the Covered Accident or Sickness.

## Accidental Death and Dismemberment Benefits

If your Injury results, within 365 days 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 the amount shown on your confirmation statement. 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	Benefit Amount		
Life			
Two or More Members	100% of the Principal Sum		
Quadriplegia			
One Member			
Hemiplegia	50% of the Principal Sum		
Paraplegia			
Thumb and Index Finger of the Same Hand	25% of the Drincipal Sum		
Uniplegia	25% of the Principal Sum		

**"Quadriplegia"** means total Paralysis of both upper and lower limbs.

**"Hemiplegia"** means total Paralysis of the upper and lower limbs on one side of the body.

**"Uniplegia"** means total Paralysis of one lower limb or one upper limb.

"Paraplegia" means total Paralysis of both lower limbs or both upper limbs.

**"Paralysis"** means total loss of use. A Doctor must determine the loss of use to be complete and not reversible at the time the claim is submitted.

**"Member"** means Loss of Hand or Foot, Loss of Sight, Loss of Speech and Loss of Hearing.

**"Loss of Hand or Foot"** means complete Severance through or above the wrist or ankle joint.

**"Loss of Sight"** means the total, permanent Loss of Sight of one eye.

**"Loss of Speech"** means total and permanent loss of audible communication that is irrecoverable by natural, surgical or artificial means.

**"Loss of Hearing"** means total and permanent Loss of Hearing in both ears that is irrecoverable and cannot be corrected by any means.

#### "Loss of a Thumb and Index Finger of the Same Hand" means complete

Severance through or above the metacarpophalangeal joints of the same hand (the joints between the fingers and the hand).

**"Severance"** means the complete separation and dismemberment of the part from the body.

#### **Emergency Medical Evacuation Benefit**

We will pay 100% of Covered Expenses incurred for your medical evacuation if you: 1) suffer a Medical Emergency during the course of the Trip; 2) require Emergency Medical Evacuation; and 3) are traveling on a covered Trip. Covered Expenses; 1) Medical Transport: expenses for transportation under medical supervision to a different hospital, treatment facility or to your place of residence for Medically Necessary treatment in the event of your Medical Emergency and upon the request of the Doctor designated by Our assistance provider in consultation with the local attending Doctor. 2) Dispatch of a Doctor or Specialist: the Doctor's or specialist's travel expenses and the medical services provided on location, if, based on the information

available, your condition cannot be adequately assessed to evaluate the need for transport or evacuation and a doctor or specialist is dispatched by Our service provider to your location to make the assessment. 3) Return of Dependent Child (ren): expenses to return each Dependent child who is under age 18 to his or her principal residence if a) you are age 18 or older; and b) you are the only person traveling with the minor Dependent child(ren); and c) you suffer a Medical Emergency and must be confined in a Hospital. 4) Escort Services: expenses for an Immediate Family Member or companion who is traveling with you to join you during your emergency medical evacuation to a different hospital, treatment facility or your place of residence. 5) Transportation After Stabilization: if We have evacuated you to a medical facility due to an emergency Medical Evacuation, We will pay your transportation costs to: a) your Home Country or Permanent Residence, or b) your host country, or c) to 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 or Our assistance provider 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.

#### **Quarantine Benefit**

Pays up to \$2,000 for expenses incurred if the individual is subject to a Quarantine for H1N1 Influenza or any contagious disease that prevents traveling. Benefits will end on the earlier of 14 days after Quarantine is issued or the date it ends. Covered Expenses include reasonable expenses incurred for lodging and meals; the cost of a one-way economy airfare ticket to their home country or to re-join the trip; and non-refundable travel arrangements.

"Quarantine" means the Insured Person is forced into medical isolation by a recognized government authority, their authorized deputies, or medical examiners due to the Insured Person either having, or being suspected of having, a contagious disease, infection, or contamination while the Insured Person is traveling outside of their Home Country.

#### **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 or Our assistance provider authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider.

#### **Security Evacuation Expense Benefit**

We will pay a maximum of \$10,000 of Covered Expenses if: 1) an Occurrence takes place while you are participating in a Covered Activity during your Term of Coverage; and 2) while you are traveling outside of your Home Country.

Aggregate Limit per event — We will not pay more than \$500,000 for all expenses incurred as the result of one Security Evacuation event. If, in the absence of this provision, We would pay more than this amount for all expenses incurred for a single event, then the benefits payable to each person with a valid claim will be reduced proportionately.

Benefits will be paid for: 1) your Transportation and Related Costs to the Nearest Place of Safety necessary to ensure your safety and well-being as determined by the Designated Security Consultant. 2) your Transportation within 5 days of the Security Evacuation to one of the following locations chosen by you: a) back to the country in which you are traveling during the Covered Activity while covered by the Policy but only if 1) coverage remains in force under the Policy; and 2) there is no U.S. State Department Travel Warning in place on the date you are scheduled to return; b) your Home Country; or c) where the Policyholder that sponsored the trip is located.. 3) consulting services by a Designated Security Consultant for seeking information on a Missing Person or kidnapping case, if you are considered kidnapped or a Missing Person by local or international authorities.

Security Evacuation Benefits are payable only once for any one Occurrence.

Benefits will not be payable unless We (or Our authorized assistance provider) authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider. Our assistance provider is not responsible for the availability of Transport services. Where a Security Evacuation becomes impractical due to hostile or dangerous conditions, a Designated Security Consultant will endeavor to maintain contact with you until a Security Evacuation occurs.

Right of Recovery — If, after a Security Evacuation is completed, it becomes evident that you were an active participant in the events that led to the Occurrence, We have the right to recover all Transportation and Related Costs from you.

"Appropriate Authority(ies)" means the U.S. State Department, the government authority(ies) in your Home Country or Country of Residence or the government authority(ies) of the Host Country.

#### "Designated Security Consultant"

means an employee of a security firm under contract with Us or Our assistance provider who is experienced in security and measures necessary to ensure your safety in his or her care.

**"Evacuation Advisory"** means a formal recommendation issued by the Appropriate Authority(ies) that you or citizens of your Home Country or Country of Residence or citizens of the Host Country leave the Host Country.

**"Host Country"** means any country, other than an OFAC excluded country, in which you are traveling while covered under the Policy.

**"Missing Person"** means your disappearance for an unknown reason and whose disappearance was reported to the Appropriate Authority(ies).

"Natural Disaster" means storm (wind, rain, snow, sleet, hail, lightning, dust or sand), earthquake, flood, volcanic eruption, wildfire or other similar event that: 1) is due to natural causes; and 2) results in such severe and widespread damage that the area of damage is officially declared a disaster area by the government in which your Trip occurs and the area is deemed to be uninhabitable or dangerous. Natural disaster does not mean nuclear reactions, uninhabitable property, transportation strikes, lost or stolen passport or travel documents, radiation or radioactive contamination, civil disorder and other similar events.

**"Nearest Place of Safety"** means a location determined by the Designated Security Consultant where: 1) you can be assumed safe from the Occurrence that precipitated your Security Evacuation; and 2) you have access to Transportation; and 3) you have the availability of temporary lodging,

if needed.

"Occurrence" means any of the following situations in which you are involved that trigger the need for a Security Evacuation: 1) expulsion from a Host Country or being declared persona non-grata on the written authority of the recognized government of a Host Country; 2) political or military events involving a Host Country, if the Appropriate Authority(ies) issue an Advisory stating that citizens of your Home Country or Country of Residence or citizens of the Host Country should leave the Host Country; 3) Natural Disaster within seven (7) days of an event; 4) your deliberate physical harm confirmed by documentation or physical evidence or a threat against your health and safety as confirmed by documentation and/or physical evidence; 5) you have been deemed kidnapped or a Missing Person by local or international authorities and, when found, your safety and/or well-being are in question within 7 days.

"Related Costs" means lodging and, if necessary, physical protection for you during or while waiting for Transport to the Nearest Place of Safety. Related Costs will include temporary lodging, if necessary, while you are waiting to be transported back to the Host Country, Home Country or other country where the Policyholder that sponsored your Trip is located. Benefits will not be payable for Related Costs unless We (or Our authorized assistance provider) authorize in writing, or by an authorized electronic or telephonic means, all expenses in advance, and services are rendered by Our assistance provider.

**"Security Evacuation"** means your extrication from the Host Country due to an Occurrence which could result in grave physical harm or your death.



**"Transport"** or **"Transportation"** means the most efficient and available method of conveyance, where practical, economy fare will be utilized. If possible, your common carrier tickets will be used.

#### Additional Exclusions

We will not pay Security Evacuation Expense Benefits for expenses and fees: 1) payable under any other provision of the Policy; 2) that are recoverable through your employer or other entity sponsoring your Trip; 3) arising from or attributable to an actual fraudulent, dishonest or criminal act committed or attempted by you, acting alone or in collusion with other persons; 4) arising from or attributable to an alleged: a) violation of the laws of the country in which you are traveling while covered under the Policy; or b) violation of the laws of your Home County or Country of Residence; 5) due to your failure to maintain and possess duly authorized and issued required travel documents and visas; 6) for repatriation of remains expenses; 7) for common or endemic or epidemic diseases or global pandemic disease as defined by the World Health Organization; 8) for medical services; 9) for monies payable in the form of a ransom, if a Missing Person case evolves into a kidnapping; 10) arising from or attributable, in whole or in part, to: a) a debt, insolvency, commercial failure, the repossession of any property by any title holder or lien holder or any other financial cause; b) your non-compliance with regard to any obligation specified in a contract or license; 11) due to military or political issues if your Security Evacuation request is made more than 10 days after the Appropriate Authority(ies) Advisory was issued; 12) your failure to cooperate with Us or Our assistance provider with regard to a Security Evacuation. Such cooperation includes, but is not limited to, failure to provide any documents needed to extricate you or failure to follow the directions given by Our designated security consultants during a Security Evacuation. If you refuse to participate in a Security Evacuation, or any part of a Security Evacuation, no further benefits will be payable under the Security Evacuation Expense Benefit for that Occurrence.

#### Cosmetic Disfigurement from Burns Benefit

We will pay 20% of the Principal Sum if you suffer third or fourth degree burns on at least 20% of your body in one or more areas of the body.

#### Home Alteration and Vehicle Modification Benefit

We will pay 20% of the Principal Sum if you suffer a Covered Loss, other than a Loss of Life, as a direct result of the Covered Accident and the following conditions are met: 1) prior to the date of the Covered Accident causing such Covered Loss, the Covered Person did not require the use of any adaptive devices or adaptation of residence and/or vehicle: 2) as a direct result of such Covered Loss, the Covered Person now requires such adaptive devices or adaptation of residence and/or vehicle to maintain an independent lifestyle; 3) the Covered Person requires home alteration or vehicle modification within one year of the date of the Covered Accident.

#### Lost Baggage Benefit

We will reimburse your replacement costs of clothes and personal hygiene items, up to \$50 per bag not to exceed \$250 per Trip, if your luggage is checked onto a common carrier, and is then lost, stolen, or damaged beyond your use. Replacement costs are calculated on the basis of the depreciated standard for the specific personal item claimed and its average usable period. You must file a formal claim with the transportation provider and provide Us with copies of all claim forms and proof that the transportation provider has paid you its normal reimbursement for the lost, stolen, or damaged luggage.

#### **Trip Cancellation Benefit**

We will reimburse you for the amount of non-refundable Covered Expenses the you paid for your Trip, up to \$2,000 per Policy Term, if you are prevented from taking your Trip as the result of Injury, Sickness, or death to the you or your Family Member prior to the scheduled Trip departure date. The Injury or Sickness must be so disabling as to reasonably cause a Trip to be canceled. If you must cancel the Trip due to Injury or Sickness of a Family Member, it must be because his or her condition is life-threatening, or because the Family Member requires your care. Cancellation due to the death of a Family Member is covered only if the death occurs within 30 days of your scheduled Trip departure date.

Covered Expenses include: 1) any cancellation charges imposed by a travel agency, tour operator, or other recognized travel supplier for the Covered Trip; 2) any prepaid, unused, non-refundable airfare and sea or land accommodations; 3) any other reasonable, additional Trip expenses for travel, lodging, or scheduled events that are prepaid, unused, and non-refundable.

**"Family Member"** means your spouse, child, brother, sister, parent, grandparent, or immediate in-law.

#### **Trip Delay Benefit**

We will reimburse Covered Expenses you incur if your trip is delayed for more than 6 hours. The maximum we will pay is \$200 per person per day up to 5 days, subject to a maximum of \$1,000. 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.

#### **Trip Interruption Benefit**

We will reimburse the cost of a round-trip economy air and/or ground transportation ticket for your Trip, up to \$2,000, 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. "Family Member" means your parent, sister, brother, spouse, child, grandparent, or in-law.

#### War Risk Coverage:

The war exclusion is deleted to the extent coverage is provided by the terms and conditions of War Risk Coverage. We will pay benefits for Covered Losses due to Covered Accidents resulting from war or acts of war anywhere in the world, except the following countries:

- The United States
- Your Home Country or your Country of Permanent Assignment
- Specific Countries: Afghanistan, Belarus, Iran, Iraq, Russia, Ukraine

We will not pay more than 100% of your Principal Sum specified in the Accidental Death and Dismemberment Benefit, per occurrence for the War Risk Benefit.

# Exclusions and Limitations

We will not pay benefits for any loss or Injury that is caused by or results from:

- Intentionally self-inflicted injury; suicide or attempted suicide
- War or any act of war, whether declared or not, in Afghanistan, Belarus, Iran, Iraq, Russia, Ukraine, the United States, your Home Country, and your Country of Permanent Residence
- Injury sustained while participating in amateur, sponsored scholastic, professional or semi-professional sports
- Injury resulting from scuba diving; mountain climbing (where ropes or guides are used); sky diving; professional or amateur racing; or piloting an aircraft
- Piloting or serving as a crewmember or riding in any aircraft, except as a fare-paying passenger on a regularly scheduled or charter airline
- 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)

In addition, We will not pay Medical Expense Benefits for any loss, treatment, or services resulting from:

- Routine physicals and care of any kind
- Routine dental care and treatment
- Routine nursery care
- Cosmetic surgery, except for reconstructive surgery needed as the result of an Injury
- Eye refractions or eye examinations for the purpose of prescribing corrective lenses or for the fitting thereof; eyeglasses, contact lenses, and hearing aids

- 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
- Treatment or service provided by a private duty nurse
- Treatment by any Immediate Family Member or member of the Insured's household. "Immediate Family Member" means your spouse, child, brother, sister, parent, grandparent, or in-laws
- Expenses incurred during travel for purposes of seeking medical care or treatment
- Medical expenses for which you would not be responsible to pay for in the absence of the Policy. Expenses incurred for services provided by any government Hospital or agency, or government sponsored-plan for which, and to the extent that, the you are eligible for reimbursement
- Any treatment provided under any mandatory government program or facility set up for treatment without cost to any individual
- Custodial care
- Services or expenses incurred in your Home Country or Country of Residence
- 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
- If you are legally intoxicated as determined according to the laws of the jurisdiction in which the Injury occurred

- Pregnancy or childbirth. This does not apply if treatment is required as a result of a medical Emergency
- Mental or nervous disorders or rest cures

In addition to the Policy Exclusions, We will not pay Lost Baggage, Benefit(s) for:

- Loss or damage due to:
- Moth, vermin, insects, or other animals; wear and tear; atmospheric or climatic conditions; or gradual deterioration or defective materials or craftsmanship;
- 2. Mechanical or electrical failure;
- 3. Any process of cleaning, restoring, repairing, or alteration
- More than a reasonable proportion of the total value of the set where the loss or damaged article is part of a set or pair
- Devaluation of currency or shortages due to errors or omissions during monetary transactions
- Any loss not reported to either the police or transport carrier within 24 hours of discovery
- Any loss due to confiscation or detention by customs or any other authority
- Electronic equipment or devices including, but not limited to: cellular telephones; citizen band radios; tape players; radar detectors; radios and other sound reproducing or receiving equipment; PDAs; BlackBerrys; laptop computers; and handheld computers

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 Residence"** means a country or location in which you maintain a primary permanent residence.

"Covered Accident" means an accident that occurs while coverage is in force for a Covered Person and results directly and independently of all other causes in a loss or Injury covered by the Policy for which benefits are payable.

**"Covered Person"** means any eligible person for whom the required premium is paid.

**"Home Country"** means a country where a Covered Person has his or her true, fixed and permanent home and principal establishment or the United States.

**"Injury"** means accidental bodily harm sustained by you that results directly and independently from all other causes from a Covered Accident. The Injury must be caused solely through external, violent, and accidental means. All injuries sustained by one person in any one Covered Accident, including all related conditions and recurrent symptoms of these injuries, are considered a single Injury.

"Medical Emergency" means a condition caused by an Injury or Sickness that manifests itself by symptoms of sufficient severity that a prudent lay person possessing an average knowledge of health and medicine would reasonably expect that failure to receive immediate medical attention would place the health of the person in serious jeopardy. "Sickness" means an illness, disease or condition that causes a loss for which you incur medical expenses while covered under the Policy. All related conditions and recurrent symptoms of the same or similar condition will be considered one Sickness.

**"Trip"** means travel by air, land, or sea from your Home Country to another destination. It includes the period of time from the start of the trip (Scheduled Departure Date) until its end (Scheduled Return Date) as reported in your confirmation statement for this insurance.

**"We, Our, Us"** means the insurance company underwriting this insurance or its authorized agent.

#### **Notice of Claim**

#### Emergency Assistance Services (medical referrals, prescriptions, evacuation, repatriation):

Call AXA Assistance if in the United States or Canada at **1-855-327-1420**; outside of the United States or Canada, call **1-630-694-9804**; or email: <u>medassist-usa@axa-assistance.us</u>. Identify yourself as an insured under the UC Blue/Gold Program and provide the policy number GLM N04952029.

#### **Claims Instructions:**

For coverage inquiries, claim forms or claim status, please contact: Administrative Concepts, Inc. (ACI) P.O. Box 4000, Collegeville, PA 19426 Phone Numbers: **1-888-293-9229** (from inside the USA); **1-610-293-9229** (from outside the USA) Fax: **1-610-293-9299** Email: intlassist@acitpa.com.

This Description of Coverage is a brief description of the important features of the insurance plan. It is not a contract of insurance. The terms and conditions of coverage are set forth in the Policy issued to the Policyholder. The Policy is subject to the laws of the state in which it was issued. Coverage may not be available in all states or certain terms or conditions may be different if required by state law. Please keep this information as a reference.

#### **Important Note**

This plan provides travel insurance benefits for individuals traveling outside of their home country. It does not constitute comprehensive health insurance coverage (often referred to as "major medical coverage") and does not satisfy a person's individual obligation to secure the requirement of minimum essential coverage under the Affordable Care Act (ACA).

For more information about the ACA, please refer to www.HealthCare.gov.

# Chubb. Insured.<sup>™</sup>

This information is a brief description of the important features of the insurance plan underwritten by ACE American Insurance Company. It is not a contract of insurance and may be subject to change based on the underwriting requirements of the company. Coverage may not be available in all states or certain terms may be different where required by state law.

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