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The Ohio State University

Student Travel Insurance • GPT 4153084

The following is a brief description of the Student Travel Insurance Plan. The benefits described are subject to certain limitations and exclusions as described in the certificate of insurance. For specific definitions of terms used below as well as further details and information about this Plan, please see the certificate of insurance.

Eligibility

All full-time students, faculty, staff and dependent on a recognized study abroad program or other student, faculty, staff or dependent travel approved by the Policyholder outside the Insured's country of Primary Residence and outside the United States. Coverage applies while participating in a study abroad program or other student or staff travel approved by the Policyholder outside the Insured's country of Primary Residence and outside the United States including travel directly to the program location, and side trips taken in relation to the program. Such side trips will only be covered up to fourteen days in duration and must occur directly before, after or during the program. Coverage for an Insured shall not exceed 365 days.

Benefits	Maximum Benefit Amount
Post-Departure Trip Interruption Benefit	Up to 100% of Trip Cost to a maximum of \$1,000
Travel Delay Benefit Waiting period of six (6) hours or more	\$2,000 (Subject to \$200 per day)
Baggage and Personal Effects Benefit Per Item Limit Deductible	\$500 maximum \$250 per item \$0 per occurrence
Emergency Evacuation and Repatriation Benefit	\$500,000
Transportation Expenses to the place of hospitalization for one person chosen by the Insured	\$5,000 one round-trip ticket maximum
Visiting Person's Lodging and meals	\$500 per day for a maximum of 10 days
Return of Remains Benefit	The Maximum Covered Amount shown in the Emergency Evacuation and Repatriation Benefit
Return of Child Benefit (per Child)	The Maximum Covered Amount shown in the Medical Expense Benefit
Security Evacuation Benefit	\$100,000 The Aggregate Limit of Liability per Event is \$500,000
Out of Country Travel Medical Expense Benefit	\$500,000 Maximum Covered Amount per Insured
Daily Hospital Room and Board	The Average Semi-Private Room Rate per Day

Outpatient Surgical Room	Maximum Covered Amount shown in the Medical Expense Benefit
Physician's Surgical Procedures	Maximum Covered Amount shown in the Medical Expense Benefit
Physiotherapy Limit of sixty (60) visits	Maximum Covered Amount shown in the Medical Expense Benefit
Ambulance Expenses	Maximum Covered Amount shown in the Medical Expense Benefit
Prescription Drugs	Maximum Covered Amount shown in the Medical Expense Benefit
Emergency Dental	\$5,000
Emergency Dental (Sudden Relief of Pain)	\$500
Mental or Nervous Disorders – Inpatient	Maximum Covered Amount shown in the Medical Expense Benefit
Mental or Nervous Disorders - Outpatient	Maximum Covered Amount shown in the Medical Expense Benefit
Newborn Nursery Care	\$1,000
Home Country Extension Benefit	\$25,000 (This Benefit is Excess)
Hospital Admission/Medical Expense Guarantee	\$10,000
Pre-Existing Conditions	The Maximum Covered Amount shown in the Medical Expense Benefit
Emergency Medical and Dental Expense Benefit Deductible Co-Insurance Note: This is to provide Accident Medical and Dental Benefit while you are traveling domestically.	\$100,000 \$0 per Covered Trip 100%
Travel Assistance Contact: Please refer to Crisis 24.	ACI Claim Reporting Information: Claim forms can be obtained by going online at www.acitpa.com or calling 888.585.9033 Refer to Plan Number GPT 4153084

General Exclusions

We will not pay for any loss under the Policy, arising directly or indirectly out of, or as a result of, or from, or that occur to, or are as a result of the actions of, the Insured or the Insured's Family Member, or Traveling Companion for the following:

- a. suicide, attempted suicide, or intentionally self-inflicted injury, while sane or insane (while sane in CO and MO). This exclusion does not apply to the Out of Country Travel Medical Expense Benefit and Emergency Evacuation and Repatriation Plan Benefit;
- b. Normal Pregnancy, resulting childbirth, and elective abortion;
- c. participation as a professional in athletics while on a Covered Trip;
- d. participation in organized amateur or interscholastic athletic or sports competition or related practice events;

- e. riding or driving in any motor competition;
- f. off-road driving, whether as a driver or as a passenger;
- g. declared or undeclared war, or any act of war provided that the war or act of war causing the Covered Loss occurs within any of the states of the United States of America (including the District of Columbia), Afghanistan, Belarus, Ethiopia, Iraq, Israel and Occupied Territories, Libya, Myanmar, North Korea, Russia, Somalia, Syria, South Sudan, Sudan, Ukraine, Yemen or the Insured's country of Primary Residence;
- h. service in the armed forces of any country;
- i. nuclear reaction, radiation or radioactive contamination;
- j. operating or learning to operate any aircraft, as pilot or crew;
- k. bungee jumping, snow skiing, skydiving, Parachuting, free falling, cliff diving, B.A.S.E. or base jumping, hang gliding, parasailing, travel on any air supported device, other than on a regularly scheduled airline or air charter company;
- l. mountaineering where ropes or guides are commonly used including ascending and descending a mountain requiring specialized equipment, including but not limited to anchors, bolts, carabineers, crampons, lead/top-rope anchoring equipment and pick-axes;
- m. scuba diving if the depth of the water exceeds 75 feet or more;
- n. the Insured's commission of or attempt to commit a felony;
- o. elective medical or holistic treatment or procedures;
- p. failure of any tour operator, Common Carrier, other travel supplier, person or agency to provide the bargained-for travel arrangements/services; or
- q. a loss that results from a sickness, disease, or other condition, event or circumstance, that occurs at a time when the Policy is not in effect for the Insured.

The following additional exclusions apply to the Baggage and Personal Effects Benefit:

We will not pay for damage to or loss of the following items:

- (1) animals;
- (2) property used in trade, business or for the production of income; household furniture; musical instruments; brittle or fragile articles;
- (3) boats, motors, motorcycles, motor vehicles, aircraft, and other conveyances (except wheelchairs) or equipment, or parts for such conveyances;
- (4) artificial limbs or other prosthetic devices, artificial teeth, dental bridges, dentures, dental braces, retainers or other orthodontic devices, hearing aids, any type of eyeglasses, sunglasses or contact lenses;
- (5) documents or tickets, except for administrative fees required to reissue tickets up to \$250 per ticket;
- (6) money, checks of any kind, stamps, stocks and bonds, postal or money orders, securities, accounts, bills, deeds, food stamps, or credit cards, except as otherwise specifically included elsewhere in the Policy;
- (7) property shipped as freight or shipped prior to the Scheduled Date of Departure; or
- (8) contraband.

The following additional exclusions apply to the Security Evacuation Benefit:

We will not pay for loss or expense caused by or incurred resulting from:

- (1) the Insured has violated the laws or regulations of the location of his/her Primary Residence unless the Designated Security Consultant determines that such allegations were intentionally false, fraudulent and malicious and made solely to achieve a political, propaganda or coercive effect upon or at the expense of the Insured or the location in which he or she is traveling while on a Covered Trip;
- (2) the Insured fails to produce or maintain immigration, work, residence or similar visas, permits or other relevant documentation for the location in which he or she is traveling while on a Covered Trip;
- (3) the expenses incurred are solely due to the repossession of the Policyholder's or Insured's property by a titleholder or other interested party, to satisfy any debt, insolvency, financial failure or other financial obligation of the Policyholder or Insured;
- (4) the expenses incurred are solely due to the Policyholder or Insured failing to honor any contractual obligation, bond or specific performance condition in a license;
- (5) the conditions leading to the Insured's departure were in existence prior to the Insured entering the location in which he or she was traveling while on a Covered Trip;
- (6) the expenses incurred are solely due to a common or endemic disease, Epidemic, or Pandemic;
- (7) the expenses incurred are for monies payable in the form of a ransom if a Missing Person case evolves into a kidnapping; or for consulting services seeking information on Missing Person or kidnapping cases; or
- (8) the expenses incurred are due to military or political issues and the Insured's Security Evacuation request is made more than 30 days after the Appropriate Authority(ies) Advisory was issued.

The terms and conditions of the Plan described in this brief summary are governed by the individual Plan document that contains the complete terms. In the event of any discrepancy between the information in this brief summary and the Plan document, the Plan document shall govern.
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