International Medical and Security Assistance and Medical Coverage

WPI is proud to offer comprehensive Emergency Travel Medical Insurance for everyone traveling on a university-related international trip.

This insurance program is **primary travel medical insurance coverage**, and because of the relationship between International SOS (ISOS) and the insurance provider (Chubb/ACE), responding to a health-related incident abroad is as easy as it gets.

**If you need medical assistance abroad, simply call ISOS.** ISOS will assess your medical need, make an appointment with a carefully vetted health care provider at your location, and render* necessary payments to the provider, if feasible. This makes the International SOS your “one-stop shop” for travelling abroad: from pre-trip security advice, to assistance with lost passports, to arranging and paying for emergency medical care abroad.

**Note*** you may be asked to self-pay up to $500

All WPI-Travelers on university-related international travel are eligible. In order to confirm coverage, your trip must be registered with the WPI MyTrips International Travel Registry. This will ensure that International SOS and WPI can verify that you are a WPI traveler and entitled to this benefit.

*If you are an international student, staff, or faculty member, traveling to your home country, even on university-related business, please be advised that the medical coverage cannot be applied.

Frequently Asked Program Questions:

**Who do I contact if I need help when I’m overseas?**

If you have an emergency call International SOS: 1-215-942-8478

**Who do I contact if I have pre-trip medical or security questions?**

Travelers should visit their school’s online portal (www.wpi.edu/+internationaltravel) with International SOS to familiarize themselves with the services that International SOS offers travelers while they are abroad. Alternatively, to access the portal please go to www.internationalsos.com and at the prompt for the Members’ website log in enter your school’s International SOS membership number, 11BCAS785861. If you have a pre-trip medical or security related question or emergency while overseas, please call collect to the 24-hour International SOS assistance center in Philadelphia: 1-215-942-8478 The assistance center is staffed by doctors, logistics coordinators and security experts. International SOS assistance centers can provide medical advice, assistance in your location, or arrange for an evacuation.
What are some of International SOS services?

International SOS provide medical advice and support. International SOS can help WPI travelers navigate foreign medical situations and facilitate overseas medical bills payment (when applicable). International SOS will advocate on behalf of you as a traveler, ensure that you are referred to a medically appropriate provider and follow up to ensure you are feeling better and do not require further assistance.

International SOS can also facilitate medical evacuation and repatriation coordination; political and natural disaster evacuation coordination. In addition, transportation to join a hospitalized member, return of minor children, and return of traveling companion.

Who do I contact if I have questions about how the international travel medical insurance plan works or about a claims payment?

Policy Number: GLM N06523626

For customer service, eligibility verification, plan information, or to file a claim, contact: Chubb NA at 800-336-0627 (from inside the U.S.) or 302-476-6194 (from outside the U.S.); fax 302-476-6154 for claims or inquiries or e-mail diane.basa@chubb.com or aceaandhclaims@chubb.com.

Enrollment/Eligibility

How do I enroll?

You need to register your university-related travel with the WPI MyTrips International Travel Registry. If you are an international student, staff, or faculty member, traveling to your home country, coverage will not apply unless on university-related temporary business.

Do I get an ID card?

You will receive an International SOS membership card, which will include the 24-hour International SOS Assistance Center phone number. You will not receive a separate insurance ID card. The International SOS membership card can be download through the WPI International SOS Members Portal.

When Does Coverage Begin & End?

The insurance covers you for only the duration of the international activity or program. If you decide to depart from the U.S. earlier and/or return later in order to have personal travel time abroad, it is your responsibility to provide coverage for that personal time. WPI strongly recommends maintaining medical, security and evacuation coverage for any travel not covered under the auspices of WPI. The Covered Accident or Sickness must take place during a Personal Deviation not to exceed 7 days while on a Trip covered by the Policy. Under NO circumstances will benefits for expenses be payable once you return to the US, or after the coverage period ends.
Travel Insurance Plan Benefits

What is covered under the International Travel Insurance Plan?

Coverage is provided for the usual and customary charges for medical services provided in the care & treatment of sickness or accidental bodily injury incurred due to accident/injury while participating in WPI affiliated international travel.

The plan covers medical expenses, including hospital room and board, inpatient and outpatient surgical procedures, emergency outpatient care, labs and x-rays, inpatient and outpatient mental health, physician office visits and prescription drugs for accidents, emergencies and illnesses which occur during your travels which are emergent, medically necessary or emergency in in nature. The plan is not intended to cover routine or preventative care of any kind. If you have specific questions related to the travel medical insurance, please use the following contact information;

Policy Number: GLM N06523626 - For customer service, eligibility verification, plan information, or to file a claim, contact: Chubb NA at 800-336-0627 (from inside the U.S.) or 302-476-6194 (from outside the U.S.); fax 302-476-6154 for claims or inquiries or e-mail diane.basa@chubb.com or aceaandhclaims@chubb.com.

See policy summary attached for a full list of benefits.

How are prescription drugs covered?

Prescription drugs are covered at 100% of the actual charge

What if I have a pre-existing condition, am I covered?

Yes. Pre-existing conditions are covered. However, please refer to the policy summary attached for Medical Services NOT included

Continuity of care plans for pre-existing medical conditions can be arranged before you travel by contacting International SOS.

“Preexisting Condition,” means an illness, disease, or other condition of the Covered Person that in the 6-month period before the Covered Person’s coverage became effective under the Policy:

1. first manifested itself, worsened, became acute, or exhibited symptoms that would have caused a person to seek diagnosis, care, or treatment; or
2. required taking prescribed drugs or medicines, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription; or
3. was treated by a Doctor or treatment had been recommended by a Doctor.
Does this plan have a deductible?

No. Deductible means the dollar amount of Covered Expenses that must be incurred as an out-of-pocket expense by each insured before payment is made by the insurance company.

Trip Interruption/Delay/Cancellation: Are these covered?

This plan does not provide trip interruption, trip cancellation, or trip delay benefits of any kind.

Claims Processing

If International SOS pays for my medical bills how is International SOS reimbursed?

If International SOS fronts money for medical treatment, the claim will be automatically sent to Chubb/Ace and International SOS will be reimbursed directly from Chubb. You may be financially responsible for the bill should your treatment not be covered by the insurance policy.

What should I do if I pay out of pocket for medical services?

When outside of the US you may be asked to pay for medical care first and submit a claim. The claim form can be provided by International SOS, upon request, and is also located on the WPI International SOS Members Portal. Follow-up questions on claims should be directed to Chubb at;

Please mail your completed Claim Form with itemized bills and receipts to:

(please fax it with readable receipts)

Chubb Accident and Health USA (800) 336 0627 Inside USA
PO Box 5124 (302) 476 6194 Outside USA
Scranton, PA 18505-0556 (302) 476 7857 Fax
ACEAandHClaims@chubb.com

Please include the following with your completed claim form: documentation/receipts from the treating physician or hospital including the date of treatment, the diagnosis, and charges for the treatment.
Plan Summary (Schedule of Benefits)

WPI International Travel Insurance
Summary of Benefits 2019-2020

Policy Number: GLM N06523626
Policy Dates: June 01, 2019 to May 31, 2020
Coverage provided by the WPI International Accident and Sickness plan is primary coverage. Other health care coverage would apply excess & should be maintained due to coverage limitations and exclusions included under the WPI International Accident and Sickness plan.

The International Travel Insurance plan is intended for accidents, injuries and emergencies, which arise during your travel abroad i.e. emergency, emergent or medically necessary. It is not intended to cover routine or preventative care of any kind.

Eligibility:

Class 1: All students and program participants who are United States citizens, permanent residents of the United States, or international students, who are engaged in educational activities sponsored by WPI while outside of the United States.

Class 2: All faculty, staff, and guests* of WPI and their dependents are eligible for coverage under the policy.

*Guests means individuals invited and authorized to participate in a Covered Activity that is under the control of WPI.

WPI sponsored international travel is defined as participating in an educational or research activity or participating in a class trip which takes place outside the U.S, is supervised, sponsored or approved by WPI and is for a period less than 365 days.
Plan Design:
All Coverages and Benefits are in U.S. Dollar Amounts:
Accident and Sickness Medical Maximum

<table>
<thead>
<tr>
<th>Benefit Description</th>
<th>Benefit Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Max Benefit Limit per Occurrence</td>
<td></td>
</tr>
<tr>
<td>Deductible</td>
<td>$0</td>
</tr>
<tr>
<td>Pre-Existing Conditions</td>
<td>Treated as any other medical condition</td>
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<tr>
<td>Coinsurance</td>
<td>100% to Policy Max</td>
</tr>
<tr>
<td>Maximum Benefit Period</td>
<td>52 weeks</td>
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<tr>
<td>Incurral Period</td>
<td>90 days</td>
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<tr>
<td>Primary/Secondary</td>
<td>Primary</td>
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<tr>
<td>Emergency Room Deductible</td>
<td>Same as Normal Deductible</td>
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<tr>
<td>Mental Nervous: Inpatient</td>
<td>$20,000 (30 day maximum)</td>
</tr>
<tr>
<td>Mental Nervous: Outpatient</td>
<td>$1,000 (10 visit maximum)</td>
</tr>
<tr>
<td>Chiropractic Services and Therapeutic Services</td>
<td>$50 per visit (10 visit maximum)</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>Treated as any other Illness</td>
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<tr>
<td>Newborn Nursery Care</td>
<td>$500 Max</td>
</tr>
<tr>
<td>Therapeutic Termination of Pregnancy</td>
<td>$500 Max</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>Inpatient: 100% of Covered Expenses</td>
</tr>
<tr>
<td></td>
<td>Outpatient: 100% of Covered Expenses</td>
</tr>
<tr>
<td>Home Country - Emergency</td>
<td>$10,000</td>
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<tr>
<td>Emergency Medical Evacuation</td>
<td>100% of Covered Expenses</td>
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<tr>
<td>Repatriation of Remains</td>
<td>100% of Covered Expenses</td>
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<tr>
<td>Security Evacuation Expense Benefit:</td>
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<tr>
<td>$1,000,000 aggregate</td>
<td>$100,000</td>
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<tr>
<td>Accidental Death &amp; Dismemberment Benefit:</td>
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<tr>
<td>$1,000,000 aggregate</td>
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</tr>
<tr>
<td>Insured: $50,000</td>
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<tr>
<td>Spouse: $10,000</td>
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<tr>
<td>Children: $5,000</td>
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<tr>
<td>Emergency Reunion (Daily Max: $300 for 10 days max)</td>
<td>$12,500</td>
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<tr>
<td>Dental Injury Only</td>
<td>$1,000</td>
</tr>
<tr>
<td>Dental Palliative</td>
<td>$500</td>
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</table>
Plan does not cover:

EXCLUSIONS AND LIMITATIONS

The plan will not pay 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)
- War or any act of war, whether declared or not.
- A Covered Accident that occurs while a Covered Person is on active duty service in the military, naval or air force of any country or international organization. Upon receipt of proof of service, we will refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days.
- Piloting or serving as a crewmember in any aircraft (unless otherwise provided in the Policy).
- 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).
- Riding in any aircraft except as a fare-paying passenger on a regularly scheduled or charter airline.
- Commission of or active participation in a riot or insurrection.

In addition, the plan 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 a Covered Person’s spouse, child, brother, sister, parent, grandparent, or in-laws.
- Expenses incurred during travel for purposes of seeking medical care or treatment, or for any other travel that is not in the course of the Policyholder’s activity (unless Personal Deviations are specifically covered).
Medical expenses for which the Covered Person 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 Covered Person is 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 the Covered Person’s Home Country. 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. Expenses incurred for services related to the diagnostic treatment of infertility or other problems related to the inability to conceive a child, including but not limited to, fertility testing and in-vitro fertilization.

**Medical Expense Benefits**

The plan will pay Medical Expense Benefits for Covered Expenses that result directly, and from no other cause, from a Covered Accident or Sickness. These benefits are subject to the Deductible, Co-insurance Rate, Maximum Benefit Period, Benefit Maximum, and other terms or limits shown in the Schedule of Benefits.

Medical Expense Benefits are only payable:

1. for Usual and Customary Charges incurred after the Deductible, if any, has been met;
2. for those Medically Necessary Covered Expenses that the Covered Person incurs;
3. for charges incurred for services rendered to the Covered Person while on a covered Trip; and
4. provided the first charge is incurred within the Incurral Period shown in the Schedule of Benefits.

**Covered Medical Expenses**

- Hospital semi-private room and board (or room and board in an intensive care unit); Hospital ancillary services (including, but not limited to, use of the operating room or emergency room)
- Services of a Doctor or a registered nurse (R.N.)
- Ambulance service to or from a Hospital
- Laboratory tests
- Radiological procedures
- Anesthetics and their administration
- Blood, blood products, artificial blood products, and the transfusion thereof
- Physiotherapy
- Chiropractic expenses on an inpatient or outpatient basis
- Medicines or drugs administered by a Doctor or that can be obtained only with a Doctor’s written prescription
- Dental charges for Injury to sound, natural teeth
- Emergency medical treatment of pregnancy
- Therapeutic termination of pregnancy
- Artificial limbs or eyes (not including replacement of these items)
- Casts, splints, trusses, crutches, and braces (not including replacement of these items or dental braces)
- Oxygen or rental equipment for administration of oxygen
- Rental of a wheelchair or hospital-type bed
- Rental of mechanical equipment for treatment of respiratory paralysis
- Mental and Nervous Disorders: limited to one treatment per day. "Mental and Nervous Disorders" means neurosis, psychoneurosis, psychopathy, psychosis, or mental or emotional disease or disorder of any kind
- Dental Injury
- Dental Palliative