



Gateway *Global Reach*

Opening the way to international insurance solutions



Medical Evacuation and Repatriation
Insurance for Study Abroad Programs







An Easy Insurance Solution

for institutions sponsoring Study Abroad programs

It is broadly acknowledged that sponsors and students should be prepared for medical emergency during an international stay—particularly if an emergency requires special evacuation transportation or services.

When such emergencies occur, concerns among all parties immediately surface—how and with whom to make arrangements—personal monetary outlay—contacting family members and home physician, to name a few.

There are also circumstances when an additional layer of insurance for medical expense is necessary, especially if current health insurance is limited abroad.

Gateway Global Reach provides a comprehensive solution and some distinct advantages.

Advantages

For Sponsors

- automatically provides important coverage
- minimizes staff follow up
- adds security to the study abroad experience
- one less thing to worry about

For Participants and Family

- easy access to insurance at low cost
- expert, worldwide medical and travel assistance
- medical insurance option for coverage abroad
- one less thing to worry about



Plan Features and Limits

Emergency Medical Evacuation	Unlimited
Repatriation of Remains	\$20,000
Worldwide Travel & Medical Assistance Services	Included

Optional Medical Coverage

Medical Expense Maximum	\$25,000 or \$100,000
Deductible	\$100

How It Works

Many organizations require study abroad participants to have insurance before embarking on their international journey.

Gateway Global Reach satisfies this requirement with an easy to implement, simplified process.

A sponsor Application Form is completed, listing name(s) of the study abroad program with start and end date(s).

A list of participant names is sent or emailed to the Administrator, once participation is finalized.

Payment for total cost can accompany the Application Form, or an invoice is sent to the sponsor for the amount due.

Coverage is immediately available for the study abroad term.

Who Is Eligible

Any person participating in a study abroad program outside the United States: student, faculty, other accompanying staff.

Term of Insurance

Insurance and services are effective for the duration of each study abroad program plus 14 days of personal time extension occurring immediately prior to and/or immediately following the study abroad program dates.





Frequently Asked Questions

Q: We offer many programs with different start dates—some very short, others up to a semester. Can we use Gateway Global Reach to cover all programs?

A: Yes. Use one Application Form for all programs, or submit a separate form for each.

Q: How do we enroll participants?

A: Send us list of names in each study abroad program as soon as possible, closest to the start date of the respective program.

Q: What is the cost?

A: Cost is based on length of program and number of participants—see Application Form rate chart. Cost can also be affected by the total number of people insured in all programs—see rate chart. For example, ABC College sponsors 20 programs per year, approximate participants will total 275. ABC College can use Band 2 rates for all programs throughout the year.

Q: Who pays for this insurance?

A: Usually, the participant. By including this low cost insurance in the program fees, coverage is guaranteed for all participants. Or, it can be included as an option. An invoice is sent to the university/college/sponsor.

Q: Can you provide individual billing per student for this coverage?

A: No. Eliminating individual underwriting, processing and billing keeps the rates low.



Q: We want all participants to have coverage, but we don't want to mandate a specific insurance plan. Can we still use Gateway Global Reach?

A: Yes. The process for administering remains the same. Remember, Gateway Global Reach is only offered for group coverage.

Q: Is medical coverage offered?

A: Yes. Gateway Global Reach includes optional Medical Expense coverage which can be selected by anyone who needs it, or included for all.

Q: Is coverage for sports injuries included?

A: Yes. For Medical Evacuation and Repatriation of Remains, coverage is included except for professional sports.

Under the Medical Expense coverage (optional), limitations for sports-related injury/illness apply. Contact the Administrator if broader coverage is required.

Q: Once the groups are insured, what do we need to do?

A: Distribute a Plan Description and ID card to each participant. We furnish all the materials you need.



Description of Coverage

Emergency Medical Evacuation

If Injury or Illness commencing during the course of a trip requires emergency evacuation, the Plan will pay for Covered Expenses incurred. An emergency medical evacuation must be ordered by a legally licensed physician who certifies that the severity of the Injury or Illness necessitates such emergency evacuation.

Emergency Evacuation means: (a) the Insured Person's medical condition warrants immediate transportation from the place where the Insured Person is injured or ill to the nearest hospital where appropriate medical treatment can be obtained; or (b) after being treated at a local hospital, the Insured Person's medical condition warrants transportation to his/her Home Country to obtain further medical treatment or to recover; or (c) both (a) and (b).

If an Insured Person is hospitalized for more than 7 days and is receiving care outside the Home Country, the Plan will pay up to the cost of round-trip economy airfare to bring a person chosen by the Insured Person to and from his/her bedside, if the Insured Person is not accompanied by immediate family.

Repatriation of Remains

If Injury or Illness results in death, all reasonable expenses incurred for preparation and return of the remains to the Home Country are covered up to the maximum amount under the Plan.

All arrangements must be made through the Assistance Services provider, AIGAssist.

Exclusions

For Emergency Medical Evacuation and Repatriation, this insurance does not cover:

Expenses incurred as a result of or in connection with: a) declared or undeclared war or any act thereof; b) injury sustained while participating in professional sports; c) intentionally self-inflicted injury; suicide while sane or attempted suicide while insane; d) commission of a felony; e) pregnancy, except complications of pregnancy; f) alcoholism or drug addiction.

Travel and Medical Assistance Services

The assistance services described below are provided by AIGAssist. Multilingual representatives provide services that can be accessed 24 hours a day, 7 days a week. These services not only support the Insured Person, but also support family members and representative(s) of the sponsoring institution. AIGAssist services include:

- Worldwide, 24-hour medical care location service;
- Medical case monitoring, arranging communication between patient, family, physicians, consulate, etc.;



- Medical transportation arrangements;
- Relaying emergency messages during medical emergencies;
- Arranging evacuation for catastrophic claims;
- Arranging medical transportation home after treatment;
- Arranging transfer of medical records; and
- Arranging repatriation of remains in event of death.

Medical Expense – Optional

If accidental Injury or emergency Illness occurs during the **Term of Insurance**, the Plan will pay, subject to a \$100 Deductible, reasonable and customary charges for **Covered Medical Expenses** resulting from such occurrence, up to the **Medical Expense Maximum** selected—\$25,000 or \$100,000. Only those expenses specifically described below and which are incurred within the **Maximum Coverage Period** (26 weeks from the onset of an Injury or emergency Illness) and which are not excluded are considered Covered Medical Expenses. Initial treatment of an Injury or emergency Illness must occur within 72 hours of the accident or onset of emergency Illness, defined as a condition requiring immediate care and/or hospitalization.

1. Charges made by a hospital for room and board, floor nursing and other services—exclusive of charges for professional services and with the exception of personal services of a non-medical nature—provided, however, that expenses do not exceed the hospital’s average charge for a semiprivate room and board accommodation, or intensive care when medically necessary;
2. Charges made for physician’s diagnosis, treatment and surgery;
3. Charges made for the cost and administration of anesthetics;
4. Charges for medication, X-ray services, laboratory tests and services, the use of radium and radioactive isotopes, oxygen, blood transfusions and medical treatment;
5. Charges for physiotherapy, if recommended by a physician, for the treatment of a specific disablement and administered by a licensed physiotherapist;
6. Dressings, drugs and medicines that can only be obtained upon the written prescription of a physician or surgeon;
7. Charges for miscarriage subject to a maximum benefit of \$1,000;
8. Charges for treatment of mental and nervous disorders subject to the following limits: up to a maximum of 30 days for in-patient care and one Physician visit per day, to a 30 visit maximum, for out-patient care.



Exclusions

For Medical Expense, this insurance does not cover:

1. Charges for Pre-existing Conditions, defined as any injury or illness for which a licensed physician was consulted, or for which treatment or medication was prescribed within 12 months prior to the **Effective Date** of insurance, except for conditions that remained controlled by prescribed medication as long as the prescribed drugs and medicine (maintenance prescriptions) did not change during the 12 months prior to the Effective Date of insurance. The costs of the maintenance prescriptions, which were required or continued during the Term of Insurance, are not a Covered Expense;
2. Services, supplies or treatment, including any period of hospital confinement, which are not recommended, approved and certified as necessary and reasonable by a physician, or expenses which are non-medical in nature;
3. Expenses incurred as a result of or in connection with a) declared or undeclared war or any act thereof; b) injury sustained while participating in professional sports, sponsored interscholastic or intercollegiate sports, or amateur athletic competition; c) intentionally self-inflicted injury, suicide while sane or attempted suicide while insane; d) scuba diving, mountain climbing, sky diving, professional or amateur racing, piloting an aircraft; or e) commission of a felony;
4. Expenses for a) pregnancy or childbirth; b) routine physicals; c) cosmetic or plastic surgery, except as the result of an accident; d) elective surgery; e) dental care, except as the result of injury to natural teeth caused by accident; f) eye refractions or eye examinations for the purpose of prescribing corrective lenses for eye glasses or for the fitting thereof, unless caused by accidental bodily injury incurred while insured; g) alcoholism or drug addiction; or h) treatment by a family member;
5. Treatment paid for or furnished under any other individual or group policy or other service or medical pre-payment plan arranged through an employer to the extent so furnished or paid, or under any mandatory government program or facility set up for treatment without cost to any individual.

The Gateway Plans are underwritten by the Insurance Company of the State of Pennsylvania, a Pennsylvania insurance company, 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. 19429. The Insurance Company of the State of Pennsylvania is a member of the American International Group of Companies (AIG).





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