Extractional Student Insurance

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Travel Medical Insurance® Coverage Summary

International travel medical insurance coverage for those outside of their home country



About Us

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International Student Insurance is a specialized insurance agency, offering health and travel insurance to students around the world. ISI is owned and operated by Envisage International Corporation, which is headquartered in Neptune Beach, Florida. Online since 2001, ISI has been a trusted industry leader for years.

We are also a NAFSA Global Partner, and accredited with an A+ rating by the Better Business Bureau. Our team of highly trained professionals can help you choose the best insurance product for your school and your students.

Contact Us

International Student Insurance 224 First Street Neptune Beach, FL 32266 USA Phone: 877-758-4391 | Int'l: +1 904-758-4391 Fax: 904-212-0412

info@InternationalStudentInsurance.com InternationalStudentInsurance.com

Insurance Explained

Our Insurance Explained Center will help you understand more about student insurance, with helpful resources such as our "US Healthcare System Overview", "Mental Health Awareness" and "Sexual Assault Awareness" videos.

> Find out more today at: InternationalStudentInsurance.com/explained

Student Zone

Whether you have misplaced your ID card or benefit booklet, need assistance with a claim, or have a question about benefits, we are ready to respond. Frequently, these and other issues can be addressed with a short visit to the Student Zone. Student Zone is an online account management and resource tool that allows you to change your personal information, renew coverage, replace your ID card and much more.

> You may access Student Zone by logging in at: InternationalStudentInsurance.com/zone

Security

This plan is insured by Syndicate 4141 at Lloyd's, London. Lloyd's is the largest and oldest insurance market in the world and is rated 'A (Excellent)' by A.M. Best Company and 'A+ (Strong)' by Standard & Poor's. Lloyd's provides financial strength and security that is unparalleled in the worldwide insurance market.

Plan Administrator

Tokio Marine HCC - Medical Insurance Services Group, headquartered in the United States in Indianapolis, Indiana, provides the administration on this plan. Tokio Marine HCC — MIS Group is a full-service company offering 24-hour, multi-lingual, emergency assistance and support; claims processing; and provider referrals. Their assistance is never more than a phone call away.



Frequently Asked Questions

Am I eligible for the Atlas Travel Medical plan?

The plan is available to anyone who is traveling outside of their Home Country and are at least 14 days old. This includes international students, study abroad students, ESL students, foreign scholars, dependents living internationally, travelers, chaperones, international business groups, etc.

Where will this plan cover me?

The Atlas Travel plan will cover you anywhere in the world, outside of your home country. If you are a US citizen, your home country is automatically the US regardless of your principal residence. For non-US Citizens, your home country is the country where you principally reside and receive regular mail.

Can I extend or renew my coverage?

If your Atlas plan includes the US or if you are a US citizen — you can purchase coverage and extend up to a total of 364 days. If your Atlas plan excludes the US and you are not a US citizen — you can purchase and extend coverage up to 365 days. Once you have a full 365 days of coverage, you can renew your coverage up to two additional years. Please note — Extensions and renewals may be completed through the Student Zone before the plan expires and there is a \$5 fee in addition to the premium per extension or renewal.

Can I cancel my Atlas Travel plan?

Yes, to be eligible for a full refund the cancellation request must be received prior to the effective date of your insurance plan. Cancellation requests received after the effective date will be subject to the following conditions:

A \$25 cancellation fee; only the unused portion of the plan cost will be refunded; and only members who have no claims are eligible for premium refund.

All cancellation requests must be submitted in writing via email, we cannot accept cancellation requests over the phone.

When I purchase this plan, will I receive a visa letter to show proof of coverage to the embassy where I am traveling?

Once you purchase the plan, you will have access to your visa letter by logging into the "Student Zone" and selecting the "Visa Letter" option. Your visa letter is a detailed summary of coverage that will show your policy maximum and deductible, as well as your coverage for medical evacuation and repatriation of remains.

Benefits	Atlas Travel®					
Policy Maximum	\$50,000, \$100,000, \$250,000, \$500,000, \$1,000,000 and \$2,000,000 (Ages 70-79: \$50,000, \$100,000 or \$250,000 limit, Ages 80+: \$10,000 Limit)					
Deductible	\$0, \$100, \$250, \$500, \$1,000, \$2,500 or \$5,000 The deductible is due once per certificate period					
ER Co-Pay	\$200 if not admitted to the hospital as an in- patient. Waived for Emergency treatment of injury. Only applies to Claims incurred in U.S.					
Urgent Care Co-Pay	\$15 per visit, then the coinsurance will apply. Not subject to deductible. Only applies to claims incurred in the U.S. Co-payment waived if \$0 deductible elected					
Coinsurance — Out of Network inside the USA	Usual, Reasonable, and Customary (URC)					
Coinsurance — In Network inside the USA and Outside the USA	100% Coverage					
	all subject to the deductible and coinsurance, ess otherwise stated:					
Hospital Room & Board	Average Semi-Private Room Rate					
Level Ausbulance						
Local Ambulance	URC when results in hospitalization					
Intensive Care Unit	URC when results in hospitalization Up to Policy Maximum					
Intensive Care Unit	Up to Policy Maximum					
Intensive Care Unit Outpatient Treatment Acute Onset of a	Up to Policy Maximum Up to Policy Maximum Under age 70: Up to the Overall Maximum Limit Age 70 to 79: Up to a \$100,000 Limit \$25,000 Lifetime Maximum for Emergency					
Intensive Care Unit Outpatient Treatment Acute Onset of a Pre-existing Condition Prescription Medication Outpatient Physical Therapy and	Up to Policy Maximum Up to Policy Maximum Under age 70: Up to the Overall Maximum Limit Age 70 to 79: Up to a \$100,000 Limit \$25,000 Lifetime Maximum for Emergency Medical Evacuation Up to Policy Maximum — For those members with a US destination, you will be automatically enrolled into the VantageAmerica Drug Discount program — please see our website for more information \$50 maximum per day.Must be ordered in					
Intensive Care Unit Outpatient Treatment Acute Onset of a Pre-existing Condition Prescription Medication Outpatient Physical Therapy and Chiropractic Care	Up to Policy Maximum Up to Policy Maximum Under age 70: Up to the Overall Maximum Limit Age 70 to 79: Up to a \$100,000 Limit \$25,000 Lifetime Maximum for Emergency Medical Evacuation Up to Policy Maximum — For those members with a US destination, you will be automatically enrolled into the VantageAmerica Drug Discount program — please see our website for more information \$50 maximum per day.Must be ordered in advance by a physician. Not subject to coinsurance.					
Intensive Care Unit Outpatient Treatment Acute Onset of a Pre-existing Condition Prescription Medication Outpatient Physical Therapy and	Up to Policy Maximum Up to Policy Maximum Under age 70: Up to the Overall Maximum Limit Age 70 to 79: Up to a \$100,000 Limit \$25,000 Lifetime Maximum for Emergency Medical Evacuation Up to Policy Maximum — For those members with a US destination, you will be automatically enrolled into the VantageAmerica Drug Discount program — please see our website for more information \$50 maximum per day.Must be ordered in					

Cont'd	Atlas Travel®				
The following benefits are not subject to the deductible or coinsurance, unless otherwise stated:					
Hospital Indemnity	\$100 per day in addition to all other benefits for inpatient hospitalization				
Emergency Dental	Accident — Up to Policy Maximum. Acute Onset of Pain — \$250 Maximum.				
Medical Evacuation	\$1,000,000 limit				
Emergency Reunion	\$100,000 limit, Maximum of 15 days				
Bedside Visit	\$1,500 limit				
Return of Minor Children	\$50,000 limit				
Political Evacuation	\$100,000 limit				
Accidental Death and Dismemberment	Principal sum — \$50,000 (18-69 years old)				
Common Carrier Accidental Death	\$50,000 per member (18-69 years old) Maximum \$250,000 for any one family/ group				
Repatriation of Remains	Overall Maximum Limit				
Local Burial or Cremation	\$5,000				
Natural Disaster Benefit	Maximum \$250 per day for 5 days				
Trip Interruption	\$10,000 limit				
Travel Delay	Maximum \$100 a day, max 2 days after a 12-hour delay period requiring an unplanned overnight stay				
Lost Checked Luggage	\$500 limit				
Pet Return	\$1,000 to return a pet home if member is hospitalized				
Crisis Response	\$10,000 Maximum benefit per Certificate Period				
Personal Liability	\$10,000 lifetime maximum				
Sports	Non-contact, leisure, recreational and fitness spo included, along with select hazardous sports				
Emergency Eye Exam	Up to \$150. \$50 deductible per occurrence (plar deductible is waived). — not subject to coinsuran				
Border Entry Protection	Up to \$500 if traveling on a valid B-2 visa and denied entrance at the U.S. border				

Premiums

The premiums below are per day, in \$USD and are based on a \$250 deductible.

	Atlas International® Travel Excluding the USA								
Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1,000,000	\$2,000,000			
Age	Daily	Daily	Daily	Daily	Daily	Daily			
14d—29y	\$0.77	\$1.02	\$1.19	\$1.28	\$1.30	\$1.33			
30–39	\$0.91	\$1.24	\$1.39	\$1.47	\$1.53	\$1.56			
40–49	\$1.53	\$1.86	\$2.06	\$2.15	\$2.19	\$2.24			
50–59	\$2.63	\$2.98	\$3.24	\$3.36	\$3.42	\$3.49			
60–64	\$3.25	\$3.55	\$3.89	\$4.08	\$4.12	\$4.20			
65–69	\$3.85	\$4.67	\$5.14	\$5.45	\$5.50	\$5.60			
70–79	\$5.88	\$7.13	\$8.17	N/A	N/A	N/A			
80+	\$10.11	N/A	N/A	N/A	N/A	N/A			

	Atlas America® Travel Including the USA						
Maximum Limit	\$50,000	\$100,000	\$250,000	\$500,000	\$1,000,000	\$2,000,000	
Age	Daily	Daily	Daily	Daily	Daily	Daily	
14d—29y	\$1.32	\$1.68	\$1.90	\$2.39	\$2.60	\$2.65	
30–39	\$1.79	\$2.48	\$2.95	\$3.15	\$3.32	\$3.39	
40-49	\$2.65	\$3.32	\$3.81	\$4.50	\$4.92	\$5.02	
50–59	\$3.95	\$4.98	\$6.29	\$7.11	\$7.47	\$7.61	
60–64	\$4.61	\$6.04	\$8.20	\$8.91	\$9.33	\$9.51	
65–69	\$5.22	\$6.68	\$9.15	\$9.91	\$10.37	\$10.57	
70–79	\$7.82	\$10.00	\$11.46	N/A	N/A	N/A	
80+	\$11.97	N/A	N/A	N/A	N/A	N/A	

Group Rates

For groups of 5 or more we offer discounts up to 15%, please contact us for further information and a personalized proposal.

Exclusion Summary

The following list contains a summary of the plan exclusions. Charges for the following treatments and/or services and/or supplies and/or conditions are excluded from coverage:

- 1. Routine pre-natal care, Pregnancy, child birth, and post natal care.
- 2. Charges incurred by or for any child under the age of 14 days.
- 3. Congenital illnesses.
- 4. Mental Health Disorders.
- Charges for treatment of any condition(s) when the purpose of departing the Home Country was to obtain treatment in the destination country/countries.
- 6. Charges not presented to Underwriters for payment within 60 days beginning on the last day of the Certificate Period.
- 7. Treatment not administered by or under the supervision of a Physician.
- 8. Treatment which is not Medically Necessary.
- 9. Investigational, Experimental or for Research purposes.
- 10. Treatment of obesity or weight modification.
- 11. HIV, AIDS or ARC, and all diseases caused by and/or related to HIV.
- 12. Dental Treatment, except for Emergency Dental Treatment as covered under the plan.
- 13. Vision and hearing tests and examinations.
- 14. Diagnosis, testing or treatment of the temporomandibular joint.
- 15. Medical expenses for Injury or Illness resulting from Amateur Athletics, Contact Sports, intercollegiate, interscholastic, intramural, extreme and club sports or athletic activities and Professional Sports including practice.
- 16. Injury sustained that is due wholly or partially to the effects of intoxication or drugs.
- 17. Self-inflicted Injury or Illness.
- 18. Sexually Transmitted Diseases and conditions.
- 19. Routine medical examinations, including but not limited to vaccinations, immunizations and annual check-ups.
- 20. Charges resulting from or occurring during the commission of a violation of law by the Member.
- 21. Diagnosis, testing, treatment or supplies for the feet.
- Diagnostic testing or procedures, services, supplies, and treatment for hair loss.
- 23. Pre-existing Conditions, except as covered under the table of benefits.24. Organ or Tissue Transplants or related services.
- 25. Diagnosis, testing or treatment for skin conditions.
- 26. Diagnosis, testing, or treatment of all forms of cancer / neoplasm.
- 27. Sleep apnea or other sleep disorders.

Please view the full plan certificate on our website for a complete list of benefits and exclusions.

RC = Usual, Reasonable, and Customary

For full information or to apply, please visit: InternationalStudentInsurance.com