SCHEDULE OF BENEFITS

PREMIUM DUE DATE: On or before the Policy Effective Date, and subsequently, on the Renewal Date, if the Policy is renewed for an additional term.

CLASSES OF ELIGIBLE PERSONS:

A person may be insured only under one Class of Eligible Persons even though he or she may be eligible under more than one class. Also, a person may not be insured as a Dependent and an Insured at the same time.

Class 1 All students, faculty and staff of the Participating Organization traveling outside of the United States

Dependents of Class(es) 1 Insureds are eligible for Coverage under this Policy.

COVERED ACTIVITIES:

Class 1	Educational Travel
Dependents of Class 1	Educational Travel

BENEFITS:

Medical Expense Benefits
Total Maximum per Covered Accident or Sickness, per Covered Person:

Class 1:	$250,000
Spouse of Class 1	$250,000
Children of Class 1	$250,000
Maximum for Preexisting Conditions:	treated as any other medical condition
Maximum for Dental Treatment (Injury Only):	$500 ($100 per tooth)
Maximum for Emergency Medical Treatment of Pregnancy:	treated as any other medical condition
Maximum for Room & Board Charges:	treated as any other medical condition
Maximum for ICU Room & Board Charges:	two (2) times the average semi-private room rate
Maximum for Chiropractic Care:	$35 per visit, $350 Max

Maximum for Mental and Nervous Disorders:	
Inpatient:	$250,000
Outpatient:	$250,000
Maximum for Newborn Nursery Care:	$500
Maximum for Prescription Drugs:	
Inpatient Co-insurance:	100% of Covered Expenses
Outpatient Co-insurance:	100% of Covered Expenses
Maximum for Therapeutic Termination of Pregnancy:	$500
Deductible:	$0 per Covered Accident or Sickness
Co-Insurance Rate:	100% of the Usual and Customary Charges
Incurral Period:	60 days after the date of Covered Accident or Sickness
Maximum Benefit Period:	The earlier of the date the Covered Person's Trip ends, or 52 weeks from the date of a Covered Accident or Sickness
Maximum Period of Coverage:	365 days

Emergency Medical Benefits

Benefit Maximum:	up to $10,000

Emergency Medical Evacuation Benefit

Benefit Maximum:	100% of the Covered Expenses

Repatriation of Remains Benefit

Benefit Maximum:	100% of the Covered Expenses

Emergency Reunion Benefit

Benefit Maximum:	$3,000
Daily Benefit Maximum:	$300
Maximum Number of Days:	10

Home Country Emergency Benefit

Benefit Maximum:	up to the Medical Expense Benefit Maximum
Deductible:	$0
Maximum Benefit Period:	30 days

Security Evacuation Expense Benefit

Benefit Maximum:	$100,000
Aggregate Limit per Occurrence:	$1,000,000

AGGREGATE LIMIT:

Benefit Maximum:	$250,000

We will not pay more than the Benefit Maximum for all Accidental Death & Dismemberment losses per Covered Accident. If, in the absence of this provision, We would pay more than Benefit Maximum for all losses from one Covered Accident, then the benefits payable to each person with a valid claim will be reduced proportionately, so the total amount We will pay is the Benefit Maximum.

Accidental Death & Dismemberment Benefits

Principal Sum:

Class 1	$15,000
Spouse of Class 1	$15,000
Children of Class 1	$15,000

INITIAL PREMIUM RATES: Participants: $1.28 per participant per day
Dependents: $2.79 per person per day