



FOUNDATION FOR
SUSTAINABLE DEVELOPMENT
*Supporting Sustainable
Development Initiatives
Throughout the Developing World*

FSD Volunteer Travel Medical and Evacuation Insurance Program

Frequently Asked Questions and Answers

1. What is the purpose and limitation of this document?

This document exists to answer frequently asked questions about the FSD travel, medical and evacuation insurance program in which all summer and individual internship participants are enrolled (if you are applying for a FSD program other than the summer or individual internships, you must purchase your own insurance). It allows readers to quickly locate the information they need to know about the program and its benefits.

Please note that this document addresses coverage issues in a broad way, and does not contain all of the policy details that govern the insurance. That information is available on the web-site or can also be found via Specialty Risk International, Inc. These benefits are subject to change without notice.

In the event of a coverage dispute or discrepancy, the wording of the actual policy will override. So feel free to examine the policy wording from Specialty Risk International, Inc to read up on coverage fully.

2. What does this insurance program cover and what are its limits?

The insurance is automatically provided to FSD volunteers (summer and individual internship participants only) while they are on a FSD program anywhere in the world outside of the United States. It covers volunteer travel medical risks, including medical expenses and medical evacuation, while you are traveling with FSD overseas. It does not provide any kind of liability insurance or certain types of cancellation insurance.

The limits of coverage provided are:

Medical expense limit	\$100,000
Medical evacuation/transport expense	Included in medical expense limit
Follow Me Home-Medical expenses in home country from accident or endemic disease incurred while on the FSD expedition	\$5,000
Emergency dental for alleviating pain	\$100
Emergency dental from an accident	\$500
Accidental death	\$5,000
Permanent disability arising from accident or endemic disease	Up to \$5,000
Repatriating mortal remains	\$20,000
Loss of Checked Luggage	Up to \$250

3. Can I get higher limits of coverage during my FSD program?

No. However, you may extend the time-limit of your coverage at a rate of \$1.06 per day.

4. Is it possible to buy insurance that would cover me either before or after the FSD program?

Yes, FSD volunteers can elect to extend the dates of coverage beyond those provided for their trip with FSD for a cost of \$1.06 per day. This arrangement should be made directly through the FSD offices, and not the provider.

5. Who is the insurance company?

The insurance is administered by Specialty Risk International, Inc. The name of the insurance carrier is Virginia Surety Company, Inc.

6. Who handles my insurance questions and administration?

For specific questions regarding coverage, volunteers should contact Specialty Risk International, located in Indianapolis, IN, whom is the administrator of the insurance

plan. They process your coverage, can answer any questions you might have, and handle all claims.

They can be reached at (800) 335-0477 or (317) 575-2656.

For Emergency evacuation, repatriation, and assistance services, contact SRI Assist 24 hours a day: From the U.S. or Canada 1-800-690-6295 or outside the U.S. and Canada call (collect) 0-317-818-2808

7. Where is the insurance effective?

Coverage is valid in the country of your FSD program, and during international travel to and from your expedition. Coverage is not available for travel within the US or within your home country.

8. When does the coverage begin and end?

FSD volunteers traveling internationally are automatically covered for the period of the FSD program plus the day(s) that are part of the period of travel to and from the expedition.

Coverage begins at the airport (or any international disembarkation site) on the day you depart for your FSD program and stays in effect until you arrive back at the airport, or port of arrival, in your home country immediately after the FSD program is over.

The insurance does not cover ordinary travel to and from the airport, or to and from the international disembarkation point. However, if you return from your program by medical evacuation, coverage applies for transportation directly to the designated medical facility or to your home.

9. How does the insurance cover travel time to the expedition site?

If you are traveling internationally, your travel insurance covers you once you have left the point of international disembarkation and stays in effect while you are traveling to your overseas destination.

Coverage is only valid while you are actually traveling to and from the international embarkation site and your FSD program site. It is no longer effective once you have arrived in your home country after your program is over. If you plan to make a stopover between leaving the FSD program and getting home, you will need to purchase additional travel insurance. This can be done through the FSD office. Please contact Hailey Brewer at Hailey@fsdinternational.org or 415-283-4873

10. Does coverage continue if I remain overseas?

Coverage ends when your FSD program is over, even if you choose to remain overseas, stay at the program location, or don't return directly home. Your travel medical coverage is only effective for the official period of your FSD trip.

If you plan to continue traveling or remain overseas after your FSD program ends, you may want to extend coverage to remain protected. You need to do that, however, **before your group coverage ends**. There is no extension of coverage available once your FSD expedition is over. You will need to call, fax or e-mail the administrator while the FSD program is still in effect, or make arrangements for additional time before you leave.

11. Is there any deductible or co-payment?

There is a \$250 DEDUCTIBLE.

12. I think I am already insured for medical expenses while on the program. What happens then?

If your existing health insurance covers you for medical expenses you incur on the FSD program, then it will be your choice as to which insurer you prefer to seek any form of necessary reimbursement.

However, many domestic insurance policies don't cover expenses incurred overseas or even in different states or provinces in your home country. In particular, many don't cover medical evacuations, especially from more remote areas. FSD created this policy to make sure that you don't encounter such gaps in coverage that could impede your medical care while on the expedition and result in costly medical expenses. There are also special travel risks that can occur on a FSD program that this policy is designed to address and that other medical coverage might not cover. It is for this reason that the FSD insurance program is mandatory for all volunteers, regardless of existing coverage.

13. What is provided under the medical expense benefit?

The limit of coverage is \$100,000. It applies to medical expenses that arise from a covered illness or from an injury to a covered person. This policy is meant to cover expenses that can't wait until you return home, and expenses that aren't covered under any other source of insurance.

These include the costs of:

- Physicians, surgeons, medicine, exams and X-rays
- Surgery or medical treatment, including nursing
- Hospital stay
- Ambulance

14. What is the "follow-me-home" benefit?

This is a special benefit of the program, not found in many travel insurance policies. It keeps you covered after your return home for medical expenses from an injury or an endemic illness that occurred while you were on an expedition.

It's particularly useful should you be sent home by medical evacuation and face continuing medical bills from a covered event.

Note that this coverage does not apply to new injuries or illness you experience once you have returned. It applies only to the expenses of accidents or endemic illness incurred while you were overseas that continue to produce medical bills once you get home.

This coverage is limited to \$5,000, which you must use in one year months after your return. Coverage ends after one year even if the full limit has not been used up.

Coverage includes doctors, surgery, medicine, hospital stay and ambulance, but not air evacuation that may be desired once you're home.

If you have other insurance, like domestic medical insurance, available on your return that can respond to your injuries, this feature will not apply. This benefit responds in excess of any other applicable insurance.

15. What is endemic disease?

This is illness that is considered to be specific to the country in which you are traveling. Malaria, for example, is endemic to certain countries in the world. The definition does not extend to all disease. Illnesses that can be generally contracted around the world, like respiratory ailments, are not considered endemic so they are not covered under the "tail-medical" benefit.

Rest assured that illnesses in general (except those listed in the policy exclusions) are covered under the medical expense/medical evacuation benefit, even though the tail-medical provision does not extend to them. Tail-medical responds only to endemic disease and to accidents.

16. What is excluded under the medical insurance?

There is a list of exclusions that apply to this entire policy that you will find at the end of this document.

In addition, there are exclusions that apply specifically to the medical insurance. They are:

- Vaccinations
- Routine medical treatment
- Elective surgery, cosmetic or plastic surgery (except resulting from an accident)
- Acupuncture
- Physiotherapy (unless prescribed by a Physician)
- Treatment in a private hospital if it's possible to receive treatment in a public hospital
- Routine eye care and optical prescriptions.

17. How much coverage is available for medical evacuation?

Medical evacuation, also known as medical transport or air ambulance, is shared under the medical expense limit. That limit, which is \$100,000, could be spent entirely on medical evacuation or entirely on medical expenses.

It is important to note that medical evacuation is subject to the terms and conditions of the policy, which means that coverage exclusions apply. If a volunteer is medically evacuated for a reason that is found to be excluded under the policy, such as a pre-existing condition, the evacuation expenses become the responsibility of the volunteer.

If it is possible that you could be medically evacuated for a reason excluded under this policy, it is advisable to make special provisions for additional coverage.

18. How does the medical evacuation provision work?

This comes into effect if the doctor assisting you while you are on an expedition determines that your illness or injuries require an emergency return home. This can include the costs of a nurse and/or doctor to accompany you, either on a commercial airliner, on a special chartered plane, or other means of transport.

Note that medical evacuation is done only in serious cases, where your life is threatened or where you face a risk of permanent disability. Medical evacuation is used when your health would be threatened by using regular forms of transport.

The process has to be coordinated by SRI Inc. in order to be covered. **Do not arrange a medical evacuation on your own.** Make sure that both the insurer and FSD are involved in helping with any medical evacuation plans.

19. Who is SRI Assist?

This is the 24-hour emergency hotline available for the use of insured persons under the FSD program. SRI Assist can help with medical emergencies, doctor and hospital selection, obtaining additional medical opinions, or medical translation problems

20. How do I reach SRI Assist?

If you need assistance outside of the U.S., the number to call is **0-317-818-2808**. Specify that you are with the FSD program.

21. What is the difference between the repatriation benefit and the medical evacuation benefit?

The repatriation benefit comes into effect only when the covered person has died. It pays for the expense for the return of mortal remains to the U.S., and is subject to its own limit of \$10,000.

22. What kind of dental coverage is provided?

Dental expenses are covered two ways. There is coverage of \$100 for the alleviation of pain. This doesn't include expenses arising from TMJ (temporomandibular joint dysfunction).

A separate limit of \$500 accommodates expenses coming from covered injury to natural teeth because of an accident.

23. How does the accidental death benefit work?

This benefit is paid to a beneficiary if the insured person dies as the result of an accident or endemic disease that occurred while traveling on an expedition. The death has to arise solely as a result of the accident or endemic disease, and within twelve months of the date the accident or endemic disease occurred.

Death that occurs as a result of an illness, like a heart attack, is not covered. Also excluded is death that results from “hazardous” sports, which are discussed in a later section.

The insurer will need to see a certificate of death to process a claim. Disappearance of the insured person is not covered.

24. How are benefits paid for permanent disability?

If the insured person is disabled permanently (either partially or fully) because of an accident or an endemic disease then the policy will pay benefits according to a sliding scale.

There is no coverage for disability that arises from illnesses other than endemic disease, or from injuries arising from “hazardous” sports (see the section on sports for a definition). There is also no coverage for disability that is temporary.

To determine eligibility for the benefit, a physician will determine the percentage of loss of a certain part of the body, or the percentage of loss of the body in whole.

25. What is the Emergency Medical Reunion benefit?

When Emergency Medical Evacuation or Repatriation occurs, the company will arrange and pay, up to \$10,000, for round trip economy-class transportation for one individual selected by the insured person, from the Insured person’s home country to the location where the insured person is hospitalized and return to the home country. Emergency medical reunion must be recommended by the attending physician. The benefits payable will include:

1. The cost of a round trip economy airfare
2. Reasonable travel and accommodation expenses (not to exceed \$200 per day) incurred in relation to the maximum of %10,000.
3. The period of Emergency Medical Reunion is not to exceed 10 days, including travel.

26. What are the general exclusions to the Medical Benefits provided by the Insurer?

Note that coverage won’t be provided for any benefit for the following reasons:

1. Conditions that would have caused the person to seek medical care during the 12 months prior to the effective date of the policy (except for the first \$15,000 of incurred costs)
2. Treatments that are investigational, experimental, or for research purposes; expenses which are non-medical in nature such as vocational, speech, recreational or music therapy.
3. Expenses not recommended by a physician.
4. Suicide, or any attempt there at.
5. Any consequence, directly or indirectly, of war, invasion, acts of foreign enemy hostilities and/or civil war.
6. Injury sustained while participating in professional, sponsored or organized amateur or interscholastic athletics.
7. Routine physicals, inoculations, or other forms of examinations not pertinent to abnormal health.
8. Treatment of the temporomandibular joint.
9. Services or supplies supplied by a relative of the insured person, or anyone who lives with the insured person.
10. Treatment and provision of false teeth, hearing aids, plastic surgery, routine dental expenses.
11. Treatment in connection with alcoholism and drug addiction, or use of any narcotic.
12. Congenital abnormalities
13. Unwarranted emergency room visits
14. Injuries sustained while participating in mountaineering, hang gliding, parachuting, bungee jumping, racing my horse or by motor vehicle or motorcycle, scuba-diving (unless certified), water skiing, snow skiing, and snow boarding.
15. Treatment paid for or furnished under any other individual, government, or group policy or charges provided at no cost to the insured person.
16. Treatment of venereal or sexually transmitted disease.
17. Pregnancy expenses or illness resulting from pregnancy, childbirth or miscarriage.

18. Birth control.

19. Expenses incurred while the person is traveling in their home country (except under certain Home country coverage benefits)

20. Expenses incurred for which travel was undertaken to seek medical treatment for a condition; or incurred after the insured person's physician has limited or restricted travel.

21. Services or supplies related to obesity reduction.

27. Many travel insurance policies exclude coverage for athletics or certain sports. How does this policy treat that risk?

Dangerous sports are not covered. Injuries due to involvement in professional and/or any formally organized athletics is also not covered.

28. What sports are not covered under the FSD Volunteer Travel Medical and Evacuation Insurance program?

Injuries sustained while participating in mountaineering, hang gliding, parachuting, bungee jumping, racing my horse or by motor vehicle or motorcycle, scuba-diving (unless certified), water skiing, snow skiing, and snow boarding. Injury sustained while participating in professional, sponsored or organized amateur or interscholastic athletics.

29. Are hazardous sports also automatically included when a FSD volunteer chooses to buy an extension of coverage on an individual basis, after their expedition is over?

Regular sports, as listed below, are always included in coverage. But if a volunteer wants coverage for hazardous sports in an extension of coverage once his or her FSD experience is over, he or she must contact Hailey Brewer at Hailey@fsdinternational.org.

Regular sports include athletics, go-carting, ballooning (as an organized excursion), trekking up to 2,500 meters, ice-skating, cross country running, soccer, surfing, windsurfing, golf, mountain biking on the road, baseball, fencing, sailing, cricket, cycling, rowing, sailing, basketball, volleyball, jogging, and any other sport not involving an extra risk.

30. Many travel insurance policies completely exclude coverage for war-related risks. How does this coverage address these risks?

This insurance does not cover any consequence, whether directly or indirectly, proximately or remotely occasioned by, contributed by, or traceable to, or arising in the connection with war, invasion, act of foreign enemy hostilities, warlike operations (whether war be declared or not), or civil war.

31. How do I make a claim under this policy?

Claim forms and receipts for medical expenses must be sent to SRI quickly. Claim submissions must be made within 90 days after the date of service. Should they be

received after 90 days, they may be considered ineligible. To report claims or verify eligibility, send the original bills and claim forms to Specialty Risk International, Inc or call or fax to the numbers listed below. Be certain to include your ID# shown on your ID card with all correspondences:

Specialty Risk International, Inc.
9200 Keystone Crossing, Ste 300; Indianapolis, IN 46240

800-335-0477 or 317-575-2256
FAX 317-575-2659
Email: Info@specialtyrisk.com