AIME – PAI for Prospective Student Athletics
Coverage Summary

Insurance Policy Information:

Insurance Company	Wellfleet Insurance Company
A.M. Best Rating	A++, XV
Standard & Poor's Rating	N / R
State Covered Status	Admitted
Policy/Coverage Term	February 1, 2024 – February 1, 2025
Policy #	MP0000836945

How to Report a Claim:

Notify your Claims Administrator:

Report claims within 30 days after the covered loss occurs or as soon as reasonably possible to;

Wellfleet Special Risk
PO Box 15369
Springfield, MA 01115-5369
877-657-5039
specialriskCS@wellfleetinsurance.com
Fax: 413-733-4612

Covered Entities:

California State University Risk Management Authority (CSURMA), including:

1. California State University, Bakersfield
2. California State University, Chico
3. California State University, Dominguez Hills
4. California State University, East Bay
5. California State University, Fresno
6. California State University, Fullerton
7. California Polytechnic Humboldt
8. California State University, Long Beach
9. California State University, Los Angeles
10. California State University, Maritime Academy
11. California State University, Monterey Bay
12. California State University, Northridge
13. California State Polytechnic University, Pomona
14. California State University, Sacramento
15. California State University, San Bernardino

16. San Diego State University
17. San Francisco State University
18. San Jose State University
19. California Polytechnic State University, San Luis Obispo
20. California State University, San Marcos
21. Sonoma State University
22. California State University, Stanislaus

Covered Parties:

All prospective registered student athletes' (per schedule on file) ages 14 to 25 participating in Basketball tryouts sponsored and supervised by the Policyholder at one of the 22 named campuses.

Covered Activities:

The Covered Accident must take place 1) on the premises of the Policyholder during normal hours of operation; or 2) on the premises of the Policyholder during other periods, if attending or participating in a Covered Activity; or 3) away from the premises of the Policyholder while attending or participating in a Covered Activity at its scheduled site.

Limits / Sublimit / Deductible:

Accident Medical Benefits:

1. Full Excess Medical Maximum $1,000,000
2. Accident Medical Benefit (of usual and reasonable charges) 100%
3. Treatment Window ..... 60 days
4. Accidental Death & Dismemberment $10,000
5. Accidental Death & Dismemberment Aggregate Limit $1,000,000
6. Benefit Maximum per Covered Accident / Aggregate Limit $35,000
7. Deductible $0
8. Maximum Benefit Period from the date of the covered Accident ..... 52 weeks

Accidental Death and Dismemberment Benefit:

9. Principal Sum $10,000
10. Aggregate AD&D Limit $1,000,000

Endorsements & Exclusions (including but not limited to):

1. Intentionally self-inflicted injury.
2. Suicide or attempted suicide.
3. War or any act of war, whether declared or not.
4. Covered Accident that occurs while on active-duty service in the military, naval or air force of any country or international organization.

5. 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.
6. The Covered Person being legally intoxicated as determined according to the laws of the jurisdiction in which the Injury occurred.
7. Riding in any aircraft except as a fare-paying passenger on a regularly scheduled or charter airline.
8. Injury covered by workers' compensation, employers', liability laws, or similar occupational benefits.
9. Injury or loss contributed to the use of any drug or narcotic, except as prescribed by a Doctor.

Questions:

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