Athletic Injury Medical Expense Program (AIME)
Coverage Summary

Insurance Policy Information:

Insurance Company	California State University Risk Management Authority
A.M. Best Rating	N / A
Standard & Poor's Rating	N / A
State Covered Status	Admitted
Policy/Coverage Term	July 1, 2024 – July 1, 2025
Policy #	CSURMA-AIME-2425

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;

Health Special Risk, Inc. (HSR)
HSR Plaza II, 4100 Medical Parkway
Carrollton, Texas 75007-1517
(972) 512-5600
CSRM@hsri.com

Member Action Required:

1. Annually (in winter), members will be asked to review and update their sport census report

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:

Any regularly enrolled student who is a participant on the intercollegiate team roster of the participating CSU campus or is engaged in scheduled activities to become a roster participant of an intercollegiate team of the participating CSU campus. Coverage for student-athletes, student coaches, student managers, athletic training students and student cheerleaders who are injured while participating in a Covered Activity.

Covered Activities:

1. Benefits are limited to injuries sustained during participation in regularly scheduled intercollegiate sports events of the participating CSU campus, including during the regular season for such sport and the supervised or *customary activities within the scope of such sport*. Coverage includes the sports listed on the sports census from each participating CSU campus.
2. Benefits for a Covered Event are for players on an athletic team who are qualifying intercollegiate sport competition scheduled by the CSU campus, official team activities; conditioning; and practice sessions.
3. For players on an athletic team, Covered Event must be authorized by, organized by, or directly supervised by an official representative of the CSU campus (not including any activities not directly a part of a Qualifying Intercollegiate Sport, such as camps, clinics and other events not conducted by the CSU campus).
4. Covered Event, for Student Cheerleaders, does not include any activities, camps, clinics, national competitions, fund-raisers, alumni events; unless the activity is directly associated with the activities of a Qualifying Intercollegiate Sport team or conducted by the Insured Person's Participating School.

Covered Benefits (Plan of Benefits):

The plan of benefits is self-funded by the participating campuses of the California State University System in excess of other valid and collectible insurance.

When a covered person requires medical services as the result of an injury covered under these benefits, the CSURMA/AIME will pay the expenses actually incurred for the necessary treatment of such injury. Expenses include and not limited to:

1. Medical Expense
2. Expanded Medical Benefits
3. Excess Accident provision
4. HMO/PPO provision
5. Physician and surgeon fees
6. Use of hospital emergency room
7. Cost of confinement in a hospital or medically necessary extended care facility
8. Dentist Fees for injury to sound and natural teeth
9. Physical therapy fees
10. Prescription drugs, if prescribed by the covered person's physician
11. Laboratory tests
12. Expanded medical benefits
13. Out-of-Network provision
14. Third Party Refunds are defined

Limits / Sublimit / Deductible:

1. Each Condition – NCAA athletes $90,000
2. Each Condition – NAIA athletes $35,000
3. Deductible $0
4. Benefit Period ..... 365 days

Endorsements & Exclusions (including but not limited to):

1. Suicide or any attempt thereat by a covered person.
2. Intentionally self-inflicted injuries.
3. Infections, except pyogenic infections due to accident cut.
4. Any injury occurring other than as a participant in a member campus intercollegiate athletic event, or the practice thereof.
5. Dental treatment, except as a result of injury to sound and natural teeth.
6. The Covered Person being intoxicated.
7. Expenses for the treatment of sickness or disease in any form.
8. Benefit will not be paid for services or treatment rendered by any person who is:
    a. Employed or retained by member campus.

b. Living in the Insured Person's household.

c. An Immediate family member, including domestic partner, of either the Insured Person or the Insured Person's spouse; or,

d. The Insured Person.

Questions:

Stacey L. Weeks	Amy Lightner	Van Rin
415-403-1408	415-403-1457	415-403-1408
sweeks@alliant.com	Amy.Lighter@alliant.com	vrin@alliant.com