

health + safety

work & study programs





CIEE is committed to assisting you during your program in the U.S. Please contact CIEE if you need any kind of assistance, whether it be an emergency or for more general information.

Phone: 1-888-COUNCIL (1-888-268-6245)
Email: insurance@cieee.org

Emergencies: Call 911

If you require immediate police protection, medical help, or have been a victim of a crime, dial 911 to reach the local police. The call is free from any phone, including public phones.

CIEE is also available 24 hours a day for emergency situations by calling 1-888-268-6245. Call us if you have been the victim of a crime, have been seriously injured, or have been arrested. Frequently, only general advice can be given evenings and weekends as many types of legal and financial services are closed.

If you have been fired, are having problems with your employer, need general advice, or have any other problems please call us during normal business hours at 1-888-268-6245.

Health Insurance

The health insurance system in the U.S. is likely different than the health care you might have in your home country. It is important for you to understand these differences to make sure that you make the right decision in case you need to visit a doctor or hospital.

Coverage Time Period

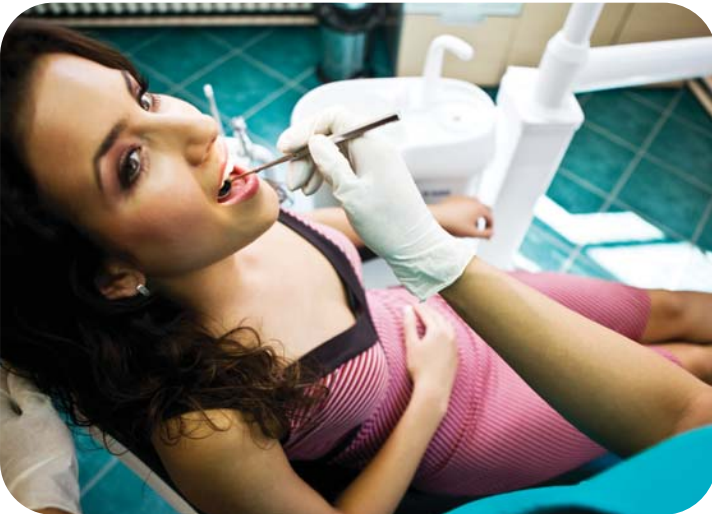
Your dates of insurance coverage are stated on the document “Confirmation of Insurance Coverage.” Please review this document thoroughly to understand the period of time you are covered. Insurance coverage begins on the Effective Date and coverage ends on the Termination Date listed on this form, or when you withdraw from the program or leave the U.S, whichever is earlier.

Emergency Rooms

Your insurance policy covers emergency room visits **only in medical emergency situations**. A medical emergency is a situation where your life or health is in jeopardy. Do not use the emergency room for convenience or for any other reason than a serious medical emergency. Emergency rooms are very expensive. If you use an emergency room for non-emergency situations, your insurance may not cover all of the costs and you may be responsible for payment.

Dental Treatment

We highly recommend that you visit your dentist at home before you start with our program in order to make sure that your teeth are in good condition since coverage for dental treatment is strictly limited to emergencies and does not cover fillings or other similar treatments due to tooth decay.



Five Key Steps to Understanding Health Insurance

1 | Health Insurance ID Card
Attached to this pocket guide is your insurance ID card, which includes your policy number and should be presented when you visit any doctor/hospital. Your Member ID number is listed on your Confirmation of Insurance form. Please write your Member ID number in the boxes provided on your Insurance ID Card.

2 | In-Network vs. Out-of Network
Under this plan you can visit any hospital or doctor. However, using in-network doctors/hospitals may save you money. We recommend that you locate a local in-network doctor and hospital when you arrive in the U.S. by the following methods:

- Call CIEE at 1-888-268-6245
- Visit www.cieee.org/insurance

3 | Visiting the Doctor
When you visit any doctor, whether in-network or out-of-network, you will have to pay a copay directly to the provider. Make sure to bring your insurance card with you.

Copay
It is usual in the U.S. for patients to pay a small portion of their medical bills out of their own pockets. This is called a copay.

Outpatient - \$50 per visit
Inpatient - \$100 per visit

4 | Pre-Existing Illnesses
Your health insurance does not cover pre-existing conditions. If you take medications regularly, bring enough from home to cover the length of your program. If you are suffering from a chronic disease (such as asthma or diabetes), make sure that your health insurance at home covers you for any costs arising from those illnesses.

5 | Exclusions
There are certain exclusions to your health insurance coverage. Please see the reverse side for a list of exclusions.

For information or questions regarding insurance coverage contact:
CIEE
1-888-COUNCIL
(1-888-268-6245)
Email: insurance@cieee.org
www.cieee.org/insurance

Mail all Claims to:
Aetna Student Health Administrators
P.O. Box 15708
Boston, MA 02215-0014
Your Policy number: CIEE-697401
EDI Payor ID# 60054 0315



Visiting A Doctor

To maximize your savings and reduce your out-of-pocket expenses, select a preferred provider that is part of the Preferred Provider Organization Network through Aetna. You can locate a local in-network medical provider easily with the following methods:

- Call CIEE at 1-888-268-6245
- Visit www.cieee.org/insurance

If you cannot locate a preferred provider in your area, please call CIEE.

When you visit the doctor/hospital, show your insurance ID card located on the back cover of this pocket guide. In most cases, the insurance company directly pays the provider for eligible medical expenses on your behalf and you will be responsible for direct payment of your copay at the time of visit. If you use a doctor

or hospital that is outside the Provider Network, additional reimbursement will apply for covered illnesses as outlined in the Schedule of Benefits. Please see the reverse side for the Schedule of Benefits for this plan. If you have received treatment and need to be reimbursed for out-of-pocket medical expenses, complete the Claim Form and submit your original itemized bills and paid receipts to Aetna Student Health Administrators within 90 days.

You must notify CIEE for any scheduled surgical appointments or procedures that the you will need while here in the U.S. You must also notify CIEE in the event of any accident or injury that requires hospitalization or overnight stays in a hospital. It is important that you notify CIEE as soon as possible since there might be a penalty for non-notification.

Precertification may be undertaken by you, the doctor, a hospital administrator, or a relative. The following treatments and services must be precertified or certain reductions in benefits may result: surgery or treatment requiring hospitalization; outpatient surgery; emergency admission to the hospital (within 48 hours); care in an extended care facility; home nursing care; CAT scans, MRIs; and durable medical equipment including artificial limbs.

Prescription Drug Coverage

You may obtain your prescriptions from any pharmacy and you will be required to pay in full at the time of purchase. You will then need to fill out and send in a claim form for reimbursement. You will be reimbursed for covered medications at the Reasonable Charge allowance, less the applicable copay of \$20. You will be responsible for any amount in excess of the Reasonable Charge. When submitting a claim, please include the pharmacy receipt and the cash register receipt.

Baggage & Personal Liability Insurance

You are also provided with limited baggage coverage and some personal liability insurance. The baggage benefit has strict limits and conditions and does not cover such items as mobile telephones, iPods, or other personal communication devices or items that are lost. If your baggage is stolen you must report this immediately to the nearest police station and request a police report. If the baggage was lost in transit, you need to report the loss to the airline. In both cases you must send your claim no later than 15 days after the loss.

Under some circumstances you may also be covered for legal expenses if you receive a summons, threat of lawsuit, actual lawsuit, or other notice of a third party claim against you in regards to personal injury or property damage liability. Liability claims must be reported immediately and no later than five days after the occurrence.



Limitations of Coverage

The insurance policy provides extensive coverage against typical risks to international travelers such as accidents and sudden illnesses. As this is a travel insurance policy for a temporary stay abroad, some limitations and exclusions apply. As a general rule, most medical emergencies are covered, whereas routine examinations, vaccinations, regular dental treatment, or vision services are excluded.

As is typical with other travel insurance policies, there is no coverage for pre-existing conditions (illnesses you have before you begin your program). If you are suffering from a chronic disease (such as asthma or diabetes) make sure that your health insurance at home covers you for costs arising from these illnesses. Additionally, your insurance policy excludes coverage for any accident or sickness occurring while you are under the influence of alcohol or intoxicating drugs. Injuries obtained while playing certain “extreme” sports may not be covered.

Alcohol

Please be aware that you must be at least 21 years old to drink alcohol legally in the U.S. If you are under 21 and are found with alcohol, you may be arrested and subject to fines. In addition, if you purchase alcohol for persons under 21, you can be arrested and subject to fines. Drinking alcohol in public (such as outside a restaurant, bar, or your residence) is prohibited in most places, especially in beach resort towns. You will be subject to fines if you are found guilty.

Drugs

Illegal possession of controlled substances (drugs) in the U.S. is subject to prosecution by law. The penalties for drug possession vary from state to state. You are subject to fines and possible time in jail for any drug possession or association with people who have drugs. **Note: Marijuana is an illegal drug.**

Safety/Laws

Legal Information

Even though you are a visitor, the U.S. laws still apply to you. You must respect local laws, just as you do at home. The U.S. police can be very strict and all laws are enforced.

Legal Rights

If you do get into trouble, CIEE will try to advise and help you. However, you must take responsibility for any crimes or violations that you commit. CIEE can advise you on a course of action, but there are limits to the amount of legal assistance we can offer. Program participants have the same rights as U.S. citizens if accused of a crime. Ignorance of the law is no excuse for committing a crime.

If You are Arrested

If you are accused of a crime, the best advice in most circumstances is to talk to CIEE or a lawyer before you answer any questions. Contact CIEE about the availability of free or low-cost legal services in your area since you may qualify for free or low-cost legal help. A directory of free or low-cost legal programs can be found at www.abanet.org/legalservices/probono.

Avoid the Following to Prevent Arrest:

- Underage Drinking (you must be at least 21 years old to consume or purchase alcohol)
- Drinking Alcohol in Public Places (having an open alcoholic container in public)
- Drug Possession
- Disturbing the Peace
- Disorderly Conduct (such as arguing with a police officer)
- Destruction of Property or Graffiti
- Shoplifting or Theft
- False Identification (using a fake I.D.)
- Driving an Automobile without a License

Driving While Intoxicated (DWI) or Driving Under the Influence (DUI)

To keep yourself and others safe, don’t drink and drive. A national campaign to raise awareness of “drunk driving” and decrease alcohol-related traffic accidents has swept the U.S. As a result, the enforcement of DWI/DUI laws has become very tough. Fines can be up to \$5,000; however, if you are involved in an accident that results in injury, the penalties can be much more severe. Americans generally appoint a “designated driver” when going out with a group of friends. This person agrees to refrain from drinking alcoholic beverages and be responsible for keeping everyone safe by driving.

Automobile Safety

In order to drive an automobile in the U.S., you must have a valid driver’s license and be aware that each state has different traffic and automobile laws. Make sure that you understand these laws and have appropriate additional automobile insurance. If you are involved in an accident your CIEE insurance coverage may be limited depending on the circumstances. High School participants are never allowed to drive. Also, always make sure to wear your seatbelt! If you have any questions, please contact CIEE.

Bicycle Safety

If you are using a bicycle to get to work, it is important to remember that in the U.S., most people use a car as their primary method of transportation; motorists may not be accustomed to sharing the road with cyclists as in your home country. Remember that cars on the road may not be able to see you, and that you need to signal to cars when you are turning. You are subject to the same traffic rules as motor vehicles. Also, be sure your bicycle and clothing have reflective gear if you ride after dark and always make sure that you WEAR A BICYCLE HELMET!

Schedule of Benefits

The following is only a summary of available benefits and coverages, and is subject to the specific terms and conditions of the plan concerning eligible benefits, limitations, eligibility, and exclusions. Please refer to the certificate wording for a complete description, which is available upon request from CIEE.

Coinurance	Preferred Care: 100% of Negotiated Charge, except as otherwise set forth below regarding prescription drugs Non-Preferred Care: 80% of the Reasonable Charge Please refer to your Confirmation of Insurance Coverage document
Limits	120 days per Injury or Illness
Treatment Period	Up to average semi-private room rate, including nursing services
Hospital Room & Board	after \$100 copay
Intensive Care Unit	Up to average semi-private room rate, including nursing services after \$100 copay
Physical Therapy	Outpatient benefits are limited to 1 visit per day
Physician’s Visits	Benefits are limited to 1 visit per day after \$50 copay Not applicable to surgery
Eligible Medical Expenses	Non-Preferred Providers: 80% of Reasonable Charge; 100% of Negotiated Rate if Insured Person lives more than 50 miles from a Preferred Care Provider Preferred Providers: 100% of Negotiated Charge \$20.00 co-payment per prescription per 30 day supply Up to \$5,000 lifetime maximum benefit
Prescription Drugs	
Temporomandibular Joint Disorder and/or Craniomandibular Disorder	
Dental Treatment	Relief of sudden and unexpected pain to sound natural teeth: Up to \$350 Maximum Injury: Up to \$500 per Accident, including fracture of jaw.

Pre-certification	50% reduction of Eligible Medical Expenses if Pre-certification requirements are not met or if the expenses are not Pre-certified.
Urgent Travel Expense	Up to \$500 for transportation to Home Country in the event of death of father, mother, brother, or sister.
Emergency Medical Evacuation Expenses	Up to \$15,000 Maximum Limit. Must be approved in advance and coordinated by the Company.
Emergency Reunion	Up to \$15,000 per Period of Insurance. Must be approved in advance and coordinated by the Company.
Return of Mortal Remains	Up to \$ 15,000. Must be approved in advance and coordinated by the Company.
Medical Exclusions	(1) Pre-existing Conditions (and illness and injury caused by any pre-existing conditions) (2) War, military action, terrorism, political insurrection, protest, or any act thereof (3) Congenital conditions (4) Maternity and Newborn Care (5) Mental or Nervous Disorders and/or Substance Abuse (6) Charges for services that are: <ul style="list-style-type: none">• not incurred during the Period of Insurance• not submitted for payment within ninety (90) days of the date of service• not Medically Necessary• not administered or ordered by a Physician• provided at no cost• in excess of Usual, Reasonable, and Customary• for venereal disease, AIDS virus, AIDS related illness, ARC Syndrome, or AIDS, and the cost of testing for these conditions, and charges for treatment or surgeries which are incurred by any Insured who was HIV+ at time of enrollment into this insurance• provided by a chiropractor, unless ordered in advance by a doctor of medicine• provided by a Relative or by a person who resides in your home• not included as Eligible Medical Expenses as defined in certificate wording• required or recommended as a result of complications arising from any Treatment, illness, Injury, or supply excluded from coverage or which is otherwise not covered under this insurance
	(7) Charges incurred for telephone consultations or due to a failure to keep a scheduled appointment
	(8) Charges incurred for Surgeries or Treatment or supplies which are Investigational, Experimental, or for Research Purposes, or charges related to genetic medicine or genetic testing
	(9) Charges incurred while confined primarily to receive Custodial Care, Educational or Rehabilitative Care
	(10) Charges incurred for any surgery, Treatment or supplies relating to: <ul style="list-style-type: none">• weight modification (including morbid obesity)• modification of the physical body in order to change the physical appearance or psychological, mental or emotional well-being of the Insured Person• cosmetic or aesthetic reasons, except for reconstructive Surgery when such Surgery is Medically Necessary and is directly related to and follows a Surgery which was covered under this insurance• professional athletics, (including Injury sustained while (1) participating in any intercollegiate, or professional sport, contest or competition; (2) traveling to or from such sport, contest or competition as a participant; or (3) while participating in any practice or conditioning program for such sport, contest or competition)• Injury or illness sustained while taking part in mountaineering activities; aviation (except when traveling as a passenger in a commercial aircraft); hang gliding; parachuting; glider flying; parasailing; sail planing; bungee jumping; snowmobiling; snow skiing except for recreational downhill and/or cross country snow skiing and/or snow boarding) (no cover provided whilst skiing in violation of applicable laws, rules or regulations; away from prepared and marked in-bound territories; and/or against the advice of the local ski school or local authoritative body); racing of any kind including by horse, motor vehicle (of any type) or motorcycle; spelunking; and scuba diving• traveling in or upon, sitting in or upon, alighting to or from, or working on or around any motorcycle or recreational vehicle including without limitation: two- or three-wheeled motor vehicle; four-wheeled all-terrain vehicle (ATV); jet ski; or ski cycle• any illness or Injury sustained while participating in any sporting, recreational or adventure activity when undertaken against the advice or direction of any local authority or qualified instructor or contrary to the rules and procedures of a recognized governing body for the sport or activity

- any illness or Injury sustained while participating in any activity when such activity is undertaken against medical advice
 - any Injury or illness sustained while under the influence of intoxicating liquor or drugs
 - any willfully self-inflicted Injury or illness
 - any illness or Injury resulting from or occurring during the commission of a violation of law, excluding minor traffic violations
 - speech, vocational, occupational, biofeedback, acupuncture, recreational, sleep or music therapy
 - orthoptics, visual therapy or visual eye training
 - any Treatment of the feet
 - any hair loss
 - any sleep disorder
 - any exercise program
 - any exposure to any non-medical nuclear or atomic radiation, and/or radioactive material(s)
 - any organ or tissue or other transplant or related services, Treatment or supplies
 - any artificial or mechanical devices designed to replace human organs temporarily or permanently
- (11) Charges incurred for any Treatment or supply that promotes or prevents conception, and any illness caused by such Treatment or supply
- (12) Charges incurred for any Treatment /supply that promotes, enhances or corrects impotency or sexual dysfunction
- (13) Charges incurred for Dental Treatment, except those set forth in the emergency Dental Treatment Benefit
- (14) Charges incurred for eyeglasses, contact lenses, hearing aids, hearing implants
- (15) Charges incurred for eye Surgery to correct nearsightedness, farsightedness, or astigmatism
- (16) Charges incurred for any immunizations and/or routine physical exams
- (17) Charges incurred for any travel, meals, transportation and/or accommodations, except as provided for in this insurance
- (18) Charges or expenses incurred for nonprescription drugs, medicines, vitamins, food extracts, or nutritional supplements
- (19) Charges related to trips outside the country where an Injury occurred, except as provided for hereunder and as approved by the Company
- (20) Charges for Treatment or supplies for temporomandibular joint syndrome in excess of the limited benefit provided under this insurance
- (21) Charges and all costs related to trips to the Host Country undertaken for the purpose of securing medical Treatment or supplies
- (22) Charges and all costs related to Additional Emergency Medical Benefits unless approved and coordinated in advance by CIEE
- (23) Charges for Treatment of learning disabilities, attitudinal disorders or disciplinary problems
- (24) Charges incurred for hospice care
- (25) Charges for Treatment of a Chronic Injury or illness incurred beyond one hundred and twenty (120) days from the date of initial Treatment thereof

For additional exclusions relating to the Baggage and Liability Benefits please refer to the Additional Benefits tab listed on our website at www.ciee.org/insurance or call us at 1-888-268-6245.

CIEE is the plan administrator. For more information on specific terms, conditions, and other details regarding the benefits, limitations, eligibility, and exclusions of your insurance coverage, please go to www.ciee.org/insurance.



PPO
NAP

Mail all claims to:
Aetna Student Health
P.O. Box 15708
Boston, MA
02215-0014

EDI Payor ID# 60054 0315

Member ID _ _ _ _ _

To precertify, prenotify, verify eligibility
and/or benefits, please contact CIEE at:

1-888-268-6245

insurance@cieee.org

www.cieee.org/insurance

\$50 Outpatient Copay

\$50 ER Services Copay

\$100 Inpatient Copay