

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, 2025 – February 1, 2026
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), and those Campuses enrolled in the AIME program.

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 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

This insurance document is furnished to you as a matter of information for your convenience. It only summarizes the listed policy(ies) and is not intended to reflect all the terms and conditions or exclusions of such policy(ies). Moreover, the information contained in this document reflects coverage as of the effective date(s) this document was created and does not include subsequent changes. This document is not an insurance policy and does not amend, alter, or extend the coverage afforded by the listed policy(ies) and the policy(ies) listed are subject to all the terms, exclusions, and conditions of such policy(ies).

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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