FILING A CLAIM

CLAIM FORMS

A Claim form can be obtained at the Office of Student Accounts or online at:

www.BollingerColleges.com

The claim form must be fully completed and submitted to Bollinger within 30 days of the date of withdrawal.

PHYSICAN STATEMENT

All claims must be accompanied by a statement from a licensed physician detailing the illness/ injury and how it prohibits the student from attending all scheduled classes.

TIME FRAMES

Notice of Claim

We must receive written notice of claim within 20 days after a covered loss occurs.

Claim Forms

After we receive notice of a claim, a Claim Form must be filled out and sent to us within 30 days. If this does not occur, the claimant must provide us with a written Proof of Loss statement within 90 days.

ABOUT BOLLINGER, INC.

Since 1946, Bollinger has been providing student health and athletic accident insurance plans to schools and colleges throughout the country. Today, Bollinger provides accident insurance plans to over 1,800 public and parochial school districts as well as student accident insurance plans to over 90 colleges throughout the country.

ABOUT TRANSAMERICA CASUALTY INSURANCE COMPANY

This plan is underwritten by Transamerica Casualty
Insurance company which is currently rated A (3rd out of
16) for financial strength and operating performance by
A.M. Best Co. (Ratings and Analysis as of April 9, 2013).
All plan administration is done by Bollinger, Inc. from
our Whippany, NJ location.

ADDITIONAL QUESTION?

If you have any other questions regarding this tuition protection plan, please contact Bollinger, Inc. at:

Phone: 1.800.526.1379

Fax: 973.921.2876

Administered By:



Bollinger Specialty Group

BOLLINGER, INC., A SUBSIDIARY OF ARTHUR J. GALLAGHER & CO.

115 S Jefferson Rd., Bldg. 200 Whippany, NJ 07981

Corporate Website
www.BollingerInsurance.com
College Website
www.BollingerColleges.com

Underwritten By:



Columbus, OH

This brochure is intended to give general information only and is subject to the insurance carrier's coverages, conditions and exclusions as stated in its policies.

Policy Form #SCTR1000GP

1256098

TUITION

PROTECTION

PLAN

DESIGNED FOR THE STUDENTS OF



FALL 2015 - SPRING 2016

Contract # TPNJ802



THE TUITION PROTECTION PLAN

Obtaining your education today can be one of the largest financial obligations you undertake. If a student experiences an unforeseen Injury or Sickness and is forced to withdraw from school, tuition and fees previously paid may be lost.

While most schools have a refund policy, depending upon the timing of the withdrawal, a student could lose thousands of dollars in unused tuition. As a solution to this potential problem, Bollinger Inc. and Transamerica Casualty Insurance Company are pleased to offer a voluntary insurance program that addresses these concerns. It is called the "Tuition Protection Plan".

The Tuition Protection Plan outlined in this brochure has been selected by Ramapo College to be offered to all students on a voluntary basis. The plan benefit has been tailored to coordinate with Ramapo College's tuition refund policy as illustrated in the chart under Refund Schedule. This plan works to help ensure that covered students are provided refund benefits. So, if the unforeseen happens, the students' tuition payments and costs may be refunded.

THE TUITION PROTECTION PLAN

Helping to protect your educational costs.

Helping to ensure your future.

PLAN DETAILS

COVERAGES AND LIMITS

In coordination with the school's tuition refund schedule, this plan covers 100% of Tuition and other school related fees for a covered loss of academic times as a result of an Injury or Sickness.

In coordination with the school's tuition refund schedule, this plan covers 60% of Tuition and other school related fees for a covered loss of academic time as a result of a Mental or Psychological condition.

PLAN COST

Student Tuition Plan:	Tuition Costs:	Protection Plan Costs:			
Full-Time Undergraduate— Living on Campus (Insures Tuition, Room, Board, & Fees) * amounts will vary depending on Room & Baord assignments					
- New Jersey Resident	\$13,158.60	\$173.70			
- Out of State Resident	\$17,561.60	\$231.80			
Full-Time Undergraduate— Living off Campus (Insures Tuition & Fees)					
- New Jersey Resident	\$6,848.80	\$90.40			
- Out of State Resident	\$11,281.60	\$148.92			
Part-Time Undergraduate – 6 Credits (Insures Tuition & Fees)					
- New Jersey Resident	\$2,568.30	\$33.90			
- Out of State Resident	\$4,230.60	\$55.80			
To calculate your exact Tuition Protection Plan Premium:					

REFUND SCHEDULE

SEMESTER COSTS X 0.0132 = PREMIUM DUE

	student s during the:	College Refunds:	Tuition Protection Plan Refunds:*	Total Refund
Fall 2015 Semester	Spring 2016 Semester			
Up until 9/9	Up until 1/25	100%	0%*	100%
9/10 to 9/16	1/26 to 2/2	50%	50%*	100%
9/17 to 12/22	2/3 to 5/10	0%	100%*	100%

*Note: The Tuition Protection Plan will refund 60% of its share of the percentages illustrated above when the withdrawal is due to a mental / psychological disorder referenced in the Diagnostic and Statistical Manual of Mental Disorders Edition #4 (DSM-TV).

PLAN EXCLUSIONS

COVERAGE DOES NOT APPLY TO LOSS DUE TO:

- Declared or undeclared war, or any act of war;
- Pregnancy or childbirth;
- Being under the influence of drugs or intoxicants, unless prescribed by a Physician;
- Civil Disorder;
- Failure to attend classes for any reason other than Injury or Sickness;
- Suicide or intentionally self-inflicted Injury, or self-inflicted Sickness;
- Nuclear reaction, nuclear radiation or radioactive contamination;
- Alcoholism or use of alcohol;
- Act or threat of terrorism (an act of violence, other than civil disorder or riot, (that is not an act of war, declared or undeclared) that results in loss of life or major damage to property, by any person acting on behalf of or in connection with any organization which is generally recognized as having the intent to overthrow or influence the control of any government);
- Withdrawal or an absence from class attendance for the balance of the period of enrollment, as specified in your Tuition Fees Schedule, due to completion of academic requirements or early graduation.

PRE-EXISTING CONDITION LIMITATION:

No benefits will be payable for loss due to an Insured Student's Pre-Existing Condition. A Pre-Existing Condition is defined as an Injury sustained or a Sickness for which the Insured Student noticed symptoms or was medically diagnosed, treated (including medication), or advised by a Physician within the 12 months immediately prior to the Insured Student's effective date of coverage under this policy.

Covered Losses resulting from a Pre-Existing Condition will not be covered unless:

- A.) 6 consecutive months have elapsed during which no medical treatment or advice is given by a Physician for such condition: or
- B.) The Insured Student has been insured under this Policy and your prior policies for 12 months; or
- C.) The Insured Student has been receiving benefits under your prior policies and has been continuously insured since the date of accident, Injury, or Sickness whichever occurs first.