

# The Student Accident Plan

A.W.G. Dewar, Inc. currently serves over 1200 leading independent schools and colleges.

**2022-2023**

**DEWAR**

# Student Accident Plan

As health care costs continue to rise, many insurers are implementing cost saving measures including high deductibles and larger co-insurance payments. This places a financial burden on families who are already carrying significant cost for education.

This Plan provides reimbursement for medical expenses resulting from a student accident, which includes but is not limited to family paid deductibles and co-insurance.

## Coverage highlights

- Complements existing family coverage
- Worldwide coverage
- Reimburses deductibles and co-insurance
- 24 hour coverage
- Covers accidents whether or not the student is school supervised
- No limit on number of accidents covered during policy period
- Sports related injuries are covered

This inexpensive Plan is broad in its scope and covers accidents on a 24-hour basis wherever the student may be - at school, at home or anywhere in the world - during the term of the policy. There is no limit to the number of accidents covered by the Plan during the policy term. The plan covers accidents whether or not the student is school supervised.

## Benefits

The Plan will pay the medical expenses incurred by an insured student by reason of accidental bodily injury sustained (including interscholastic sports and accidental ingestion of a controlled drug) and causing loss commencing during the period of coverage, in accordance with the following available benefits.

Pays 100% of eligible expenses incurred for services actually performed including charges for hypodermic needles, syringes and ambulance services, for medical care or treatment by a doctor, hospital confinement, for the professional care and services of a registered nurse, or home health care for each incident resulting in injury during the 24 month period\* immediately following date of injury up to a maximum payment of \$1,000.

When injury results in any of the losses within 6 months from the date of accident, amounts indicated below will be paid in addition to other benefits for medical expenses.

\$1,000.00 for Loss of: 1. Life 2. Both Hands, or Both Feet or Total Sight of Both Eyes 3. One Hand and One Foot 4. Either Hand or Foot and Total Sight of One Eye.

\$500.00 for loss of: 1. Either Hand or Foot 2. Total Sight of One Eye.

In the event of more than one loss, only one, the greatest, will be paid.

## Definitions and conditions

- "Injury" means bodily injury caused by an accident. The accident must occur on or after the effective date of the Insured Person's coverage under the contract and while it remains in force. Loss must result therefrom directly and separately of any other causes.
- This Plan does not cover an accident occurring before the effective date of coverage.

## Exclusions

*Insurance is not provided for loss resulting from:*

1. war, any act of war, whether declared or undeclared
2. service in the armed forces of any country
3. injury sustained while taking part in any professional or semi-professional sports contest
4. injury covered under any Worker's Compensation or Employer 's Liability Law unless a sole proprietor, partner or corporate officer who has opted out of Workers' Compensation
5. injury sustained while operating, learning to operate or serving as a member of a crew of any vehicle or device for aerial navigations
6. dental treatment except treatment for injury to sound, natural teeth within 1 year after date of injury
7. taking part in a riot
8. the voluntary use of any controlled substance as defined in Title II of the Comprehensive Drug Abuse Act of 1970, unless prescribed by a doctor
9. prescription for or repair or replacement of eyeglasses or contact lenses

## Policy term

From 12:01 A.M., on August 1, 2022 to 12:01 A.M., on August 1, 2023. If payment is made after the effective date of the policy, coverage is effective from the date payment is received by the school until the end of the policy term. Late applicants are subject to evidence of insurability, if requested.

## Cost

\$ 46.00 for each participating student for the policy term outlined above.

## Claims

Claim forms are available at the school. The forms must be submitted to A.W.G. Dewar, Inc. within 30 days from the date of injury. Written proof of loss must be furnished to the Company or A.W.G. Dewar, Inc. within 90 days after the date of loss unless it is not reasonably possible to do so. It is recommended that covered medical bills for treatment of any injury be paid promptly and then sent to A.W.G. Dewar, Inc., Four Batterymarch Park, Quincy, MA 02169-7468 for reimbursement.

NOTE: Any provision of this coverage which, on its effective date, is in conflict with the statutes of the state in which it is issued, is amended to conform to the minimum requirements of such statute.

# Contact Us

Website: [www.tuitionrefundplan.com](http://www.tuitionrefundplan.com)

Email: [trp@dewarinsurance.com](mailto:trp@dewarinsurance.com)

## **A.W.G. DEWAR, INC.**

4 Batterymarch Park  
Quincy, MA 02169

# Underwriter

Student Accident Plan policies are underwritten by Atlantic Specialty Insurance Company and OBI National Insurance Company. Plan policies are produced by A.W.G. Dewar, Inc., dba A.W.G. Dewar Insurance Agency, Four Batterymarch Park, Quincy, MA 02169. The name of each student is listed on a policy which is held by the school business office, not as agent for the insurance company, but on behalf of insured students and their parents. This leaflet is an outline of coverage for the ensuing academic year. Actual coverages are governed by the insurance policy on file in the school's business office. Coverage may change each academic year.

Academic year: 2022-2023

Form number: C57011-1

Coverage code: 1000/1000 D&D CT