

K-12 Accident Insurance

With our K-12 Accident Program, QBE makes it possible for schools to fulfill their commitment to the health and well-being of their students and athletes.

School or District-Paid Coverage

Can be purchased to cover all students during school time activities or athletes during covered sports activities, or both.

School Time Accident medical coverage

Provides benefits for covered injuries sustained when school is in session and while covered persons are attending or participating in school-sponsored and supervised activities, on or off school premises.
Coverage may include:

- interscholastic sports, including football, if elected
- overnight, domestic field trips of up to 7 days are included at no additional charge
- summer recreational activities
- travel to and from school and other sites of school-sponsored and supervised activities

Interscholastic sports/interscholastic football coverage

Provides benefits for covered injuries sustained during tryouts, pre-season and post-season play, and travel to and from games and/or practice.

Parent-Paid Coverage

Available to the student body and paid for by each covered person.

Full-time 24-hour Accident medical coverage

Provides benefits for covered injuries around the clock and throughout the year including weekends, vacations and throughout the summer. Each insured person is covered while at home or away, any place and any time.

School time accident medical coverage

Provides benefits for covered injuries sustained when school is in session and while covered persons are attending or participating in school-sponsored and supervised activities, on or off school premises.
May include:

- summer recreational activities
- travel to and from school and other sites of school-sponsored and supervised activities

Interscholastic football coverage

Provides benefits for covered injuries sustained during football tryouts, pre-season and post-season play, including travel to and from games and/or practice.

See the chart on the third page regarding benefits for each QBE Student/Athlete Accident Medical Expense Plan.

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Additional Coverage Options

Coverage can also be added for:

– Before/After School Care
– District Band
– JROTC
– Work Based Learning
– Adult Volunteers

How benefits are paid

School or District-Paid Coverage – Excess

Benefits are payable for eligible expenses that are in excess of benefits paid to the insured by any other health care plan. If no other health insurance exists, benefits will be payable like primary coverage.

Parent-Paid Coverage – Excess or Primary

Benefits can be payable on a primary or excess basis in most states. In North Carolina, only primary benefits are available for Voluntary coverage.

Plans Include Accidental Death, Dismemberment and Paralysis (Plegia) Benefits

If a covered injury results in any of the losses specified within one year from the date of the accident, we will pay the benefits listed below in addition to the medical expense benefits. If the same accident causes more than one of these losses, we will pay the largest amount that applies.

– Loss of life
– Total Paralysis of upper and lower limbs, both lower limbs, or upper and lower limbs on one side of the body
– Loss of any combination of two: hands, feet or eyesight
– Loss of one hand, one foot, or sight in one eye

Note: Loss of a hand or foot means complete severance through or above the wrist or ankle joint. Loss of sight means the total, permanent loss of sight of the eye. The loss of sight must be irrecoverable by natural, surgical or artificial means. Severance means the complete separation and dismemberment of the part from the body. Paralysis means loss of use, without severance, of a limb. This loss must be determined by a physician to be complete and nonreversible.

For your peace of mind

You can be sure that your K-12 Accident Insurance will be administered by experts who are:

– Financially sound, established specialists in the student accident and special risk accident insurance business
– Quick to answer inquiries and requests for quotes
– Service oriented and able to issue policies and settle claims efficiently

Crisis Death benefit

A benefit that pays up to $10,000 to the parents of any student who is the victim of a fatal knife stabbing or gunshot wound with up to $100,000 payable for any one incident. Students are covered while on school premises during normal school hours or during a school-supervised and sponsored activity at or away from school. This benefit is paid in addition to the Accidental Death benefit.

The maximum benefit payable is $100,000. This benefit will be split evenly among all students if more than 10 lives are lost in a covered accident. For purposes of this benefit, normal school hours means a scheduled period of instruction that includes the half hour before the school day begins and the half hour after the school day ends. This coverage is not provided while a student is traveling to and from school or an offsite activity. Benefits also will not be paid if:

1) the act of violence is committed by the student's parent or sibling; or
2) the student produced or obtained a gun or knife during the incident, whether used in self-defense or not.

These exclusions may vary by state.



About QBE

QBE North America is part of QBE Insurance Group Limited, one of the world's largest insurance and reinsurance companies. Headquartered in Sydney, Australia, QBE operates out of 31 countries around the globe, with a presence in every key insurance market. The North America division, headquartered in New York, conducts business through its property and casualty insurance subsidiaries. QBE insurance companies are rated "A+" by Standard & Poor's and "A" (Excellent) by A.M. Best.*

Four popular K-12 Student/Athlete Accident Medical Expense insurance plans — with no deductibles

	Plan 1	Plan 2	Plan 3	Plan 4
Maximum Benefit				
School Time Option	$100,000	$75,000	$50,000	$25,000
24-Hour Option	$100,000	$75,000	$50,000	$25,000
Interscholasitc Football Option	$100,000	$75,000	$50,000	$25,000
Deductible	$0	$0	$0	$0
Accidental Death Benefit	$10,000	$10,000	$10,000	$10,000
Single Accidental Dismemberment Benefit	$5,000	$5,000	$5,000	$5,000
Double Accidental Dismemberment Benefit	$10,000	$10,000	$10,000	$10,000
Accidental Paralysis Benefit - Compulsory only	$10,000	$10,000	$10,000	$10,000
Benefit Period	One Year	One Year	One Year	One Year
Initial treatment must begin within 60 days of date of accident				
Hospital/Facility services				
Daily room & board — semi-private	100% of Usual and Customary expenses	100% of Usual and Customary expenses	100% of Usual and Customary expenses up to $200/day	80% of Usual and Customary expenses up to $200/day
Intensive care room & board	100% of Usual and Customary expenses	100% of Usual and Customary expenses	80% of Usual and Customary expenses, up to $400/day	80% of Usual and Customary expenses up to $200/day
Miscellaneous services — when hospital confined or when surgery is performed	$10,000 maximum	$7,500 maximum	$5,000 maximum	$1,000 maximum
Free-standing ambulatory surgical facility	$2,000 maximum	80% of Usual and Customary expenses not to exceed $1,000	$500 maximum	$250 maximum
Outpatient hospital miscellaneous — (except Physician services and x-rays paid as below)	$750 maximum	80% of Usual and Customary expenses not to exceed $500	$250 maximum	$150 maximum
Emergency room physician	$75	$50	$50	$50
Emergency room (outpatient)	$500 maximum	80% of Usual and Customary expenses not to exceed $350	80% of Usual and Customary expenses, not to exceed $250	$100 maximum
Physician services				
Surgery, including pre- and postoperative care	80% of Usual and Customary expenses up to $3,000	80% of Usual and Customary expenses up to $2,000	80% of Usual and Customary expenses, up to $1,000	50% of Usual and Customary expenses, up to $1,000
Assistant surgeon	25% of Surgery benefit	25% of Surgery benefit	25% of Surgery benefit	25% of Surgery benefit
Anesthesiologist	25% of Surgery benefit	25% of Surgery benefit	25% of Surgery benefit	25% of Surgery benefit
Physician's outpatient treatment in connection with physical therapy	$75/visit up to 5 visits	$40/visit up to 5 visits	$25/visit, up to 5 visits	$20/visit up to 5 visits
Physician's non-surgical treatment for other than physical therapy, or similar treatment	$75/day	$40/day	$25/day	$20/day
Other medical services				
Registered nurses' services	100% of Usual and Customary expenses	100% of Usual and Customary expenses	100% of Usual and Customary expenses	80% of Usual and Customary expenses
Prescriptions - outpatient	100% of Usual and Customary expenses	100% of Usual and Customary expenses	80% of Usual and Customary expenses	80% of Usual and Customary expenses
Lab tests, x-rays, including interpretation - outpatient	$300 maximum	$250 maximum	$200 maximum	$100 maximum
Diagnostic imaging (MRI, CAT scan, etc.) including interpretation - outpatient	$1,000 maximum	$750 maximum	$300 maximum	$200 maximum
Ground ambulance/Air ambulance	$500/$1,500 maximum	$400/$1,000 maximum	$200/$400 maximum	$200/$250 maximum
Durable medical equipment including orthopedic braces and appliances	$500 maximum	$300 maximum	$150 maximum	$75 maximum
Dental treatment to sound, natural teeth due to covered injury	$2,000 maximum	$1,500 maximum	$1,000 maximum	$500 maximum
Replacement of eyeglasses, contact lenses, hearing aids, if medical treatment is also received for the covered injury	$700 maximum	$500 maximum	$250 maximum	$200 maximum

Optional extended dental treatment benefit (voluntary only)
For additional premium, dental benefits may be extended under the overall Medical Expense Maximum to provide payment of eligible expenses to a maximum of $50,000. This additional coverage provides payment for the Usual and Customary expenses incurred within two years from the date of a covered accident for treatment, repair and replacement of each injured natural tooth, including examination, diagnosis, X-ray, restorative treatment, endodontics and oral surgery, plus for the replacment of caps, crowns, dentures and orthodontic appliances. Limitations apply to treatment deferred until after the two year benefit period. See the Program Manager for further details.

Exclusions and limitations:

Coverage is not provided for any accident which is caused by or results from any of the following:

- intentionally self-inflicted injury, suicide or any attempted threat while sane or insane;
- commission or attempt to commit a felony or an assault; commission of or active participation in a riot or insurrection;
- bungee-cord jumping, parachuting, skydiving, parasailing, hang-gliding, snowboarding, skateboarding, motorcycle racing or racing rocket-powered, jet propelled or nuclear-powered vehicles;
- declared or undeclared war or act of war;
- flight in, boarding or alighting from an aircraft, except as a fare-paying passenger on a regularly scheduled commercial or charter airline;
- travel in or on any on-road and off-road motorized vehicle that does not require licensing as a motor vehicle; participation in any motorized race or contest of speed;
- an accident if the covered person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, unless the covered person holds a valid learner's permit and the covered person is participating in a drivers' education program;
- 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;
- travel or activity outside the United States, unless advance written approval is provided;
- the covered person being legally intoxicated as determined according to the laws of the jurisdiction in which the covered accident occurred;
- voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a physician and taken in accordance with the prescribed dosage;
- injuries compensable under Workers' Compensation law or any similar law;
- an accident which occurs while the covered person is driving a private passenger automobile while intoxicated.
- Benefits will not be paid for any hospital stay that is not considered appropriate treatment for the condition and locality.
- Overnight Supervised and Sponsored Activities with duration of more than 7 days and related travel are not covered, unless agreed to in writing by the Company.
- In addition, benefits will not be paid for services or treatment rendered by any person who is employed or retained by the policyholder or living in the covered person's household or provided by a parent, sibling, spouse or child of either the covered person or the covered person's spouse.
- The Accidental Death and Dismemberment aggregate limit, only applicable to the Compulsory Plan, is $500,000.

Accident Medical Benefit limitations and excluded expenses:

- cosmetic surgery, except for reconstructive surgery needed as the result of a covered injury;
- any elective or routine treatment, surgery, health treatment, or examination;
- blood, blood plasma, or blood storage, except expenses by a hospital for processing or administration of blood;
- examination or prescription for initial eyeglasses, contact lenses or hearing aids;
- treatment in any Veteran's Administration, Federal, or state facility, unless there is a legal obligation to pay;
- services or treatment provided by persons who do not normally charge for their services, unless there is a legal obligation to pay;
- rest cures or custodial care;
- repair or replacement of existing dentures, partial dentures, braces or bridgework;
- personal services such as television and telephone or transportation;
- expenses payable by any automobile insurance policy without regard to fault;
- services or treatment provided by an infirmary operated by the policyholder;
- treatment of injuries that result over a period of time (such as blisters, tennis elbow, etc.), that are a normal, foreseeable result of participation in the covered activity;
- treatment or service provided by a private duty nurse;
- treatment of hernia of any kind;
- treatment of injury resulting from a condition that a covered person knew existed on the date of the accident, unless he received a written medical release from his physician.

Any covered expenses payable under the Accident Medical Expense benefit will be reduced by 50 percent if the covered person has HMO or PPO coverage and elects not to use that coverage.

Terms of Coverage

Benefits are payable for injuries which result directly and independently of all other causes from a covered accident, while coverage is in effect, up to the plan maximum.

Eligibility — All day students who attend kindergarten, elementary, junior or senior high school (public or private) are eligible for this coverage. Coverage can also be added to cover those students participating in Before/After School Care, District Band, JROTC, Work Based Learning and Adult Volunteers.

Effective Date — Coverage becomes effective on the date requested provided the premium and the application are received and accepted by QBE Insurance Corporation.

School or District-Paid coverage is paid for by the policyholder. 100% participation is required on the school or district paid plans.

General Definitions

Covered Accident - means a sudden, unforeseeable, external event that results, directly and independently of all other causes, in an injury or loss and meets all of the following conditions:

1. occurs while the covered person is insured under this Policy;
2. is not contributed to by disease, sickness, or mental or bodily infirmity; and
3. is not otherwise excluded under the terms of this Policy.

Health Care Plan — Any contract, policy, or other arrangement, whether individually purchased or incidental to employment or membership in an association or other group, which provides benefits or services for health care, dental care, disability benefits or repatriation of remains. A Health Care Plan includes group, blanket, franchise, family or individual policies; subscriber contracts; uninsured agreements or arrangements; coverage provided through Health Maintenance Organizations, Preferred Provider Organizations and other prepayment, group practice and individual practice plans; medical benefits under automobile "fault" and "no-fault"-type contracts; medical benefits provided by any governmental plan or coverage or other benefit law, except a state-sponsored Medicaid plan; or a plan or law providing benefits only in excess of any private or non-governmental plan; other valid and collectible medical or health care benefits or services.

School Travel — Transportation to or from a supervised and sponsored activity on a school bus or private passenger automobile driven by a member of the faculty or staff of the school, a parent of the covered person, or other adult with a valid driver's license.

Usual and Customary — All benefit payments will be based on the normal charge, in the absence of insurance, made by the provider of a necessary supply or service, but not more than the prevailing charge in the area for like services by a provider with similar training or experience; or for a supply that is identical or substantially equivalent. Where appropriate, Usual and Customary Charge will be based on a relative value schedule appropriate to the area and type of service provided.

This information is a brief description of the important benefits and features of the Blanket Accident Medical Insurance underwritten by QBE Insurance Corporation. It is not a contract. Full terms and conditions of coverage, including effective dates of coverage, benefits, limitations and exclusions, are set forth on policy form, BAM-03-1000 et seq. Any policy QBE offers to issue will be subject to the laws of the jurisdiction in which it is issued. QBE may (1) not be able to offer this coverage in all states and (2) elect at its sole discretion not to offer or quote any specific benefit amount or risk. Please contact your agent or local administrator for the availability of coverage in your state.

* For ratings guidelines and the latest information, access ambest.com and standardandpoors.com

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