

# 2017-2018 STUDENT ACCIDENT INSURANCE DOMINICAN UNIVERSITY

Policy GA-2200Ed.11-16

## SUMMARY OF GROUP COVERAGE

Registered students and student athletes who are actively attending classes on campus are eligible to enroll. Coverage will become invalid for students who leave school within the first 31 days beginning with the first day for which coverage is effective. Coverage is in force for each insured for whom the premium has been paid:

- while on the University premises during the hours and on the days school is in regular session, and during the hours and on the days when school is not in session while the insured is participating in or attending any Sponsored and Supervised Activity; and
- while away from the University premises, other than traveling, if participating in a Sponsored and Supervised Activity; and
- while participating in University-sponsored and supervised physical educational classes, recreational instructional classes, intramural athletics, club sports, and intercollegiate sports; includes conditioning and training for an intercollegiate sport during the official season of the sport while under direct and immediate supervision of an employee of the University; and
- while traveling directly to or from the Insured's residence and the University for regular school sessions, or for any Sponsored and Supervised Activity, in School provided transportation.

The Medical Benefits and Exclusions below apply to the Summary of Group Coverage options above.

## MEDICAL BENEFITS

When injury covered by the Policy results in treatment by a licensed physician within 90 days from the date of injury, the Company will pay the usual and customary (U&C) expenses incurred for necessary services as listed below, for expenses actually incurred within two years from the date of injury. Benefits are payable up to a policy **maximum benefit of \$15,000 per injury**. **Unless stated otherwise, all amounts below are per injury**. Benefits shall be paid first by any other valid and collectible insurance or group plan including an ERISA or self-funded group policy.

### PHYSICIAN'S SERVICES

- Surgical Care (includes services for surgeon, anesthesia, assistant surgeon) - U&C
- Nonsurgical Care (includes physician physiotherapy) - U&C

### HOSPITAL CARE

- Inpatient Care
  - Hospital Semi-private Room - U&C
  - Hospital Miscellaneous Services - U&C
- Outpatient Care (includes facility charges for day surgery and emergency room) - U&C

**Note: Benefits for hospital miscellaneous and outpatient care charges are limited to services not scheduled under Medical Benefits.**

**RADIOLOGY SERVICES** (includes diagnostic imaging, x-rays, and charges for reading) - U&C

**DENTAL TREATMENT** (for the repair and/or replacement of sound and natural teeth, including x-rays, in lieu of all other medical benefits) - U&C

**ORTHOPEDIC APPLIANCES** (when prescribed by a physician for healing) - U&C

**AMBULANCE SERVICES** - U&C

**PRESCRIPTION DRUGS** (take home) - U&C

**MOTOR VEHICLE INJURY** - Same as any Injury, up to \$1,000

**OVER-EXERTION BENEFIT** (conditions or aggravation of physical conditions caused by prolonged over-exertion, stress or strain occurring while participating in intercollegiate game or practice) - Same as any Injury

**RE-INJURY BENEFIT** (re-injury or aggravation of an injury occurring while coverage is in force) - Same as any Injury

**HEART AND CIRCULATORY CONDITIONS BENEFIT** (acute onset of physical conditions related to heart or circulatory system occurring while participating in intercollegiate game or practice) - U&C

## EXCLUSIONS

The Policy does not provide benefits for:

- Any sickness, disease, infection (unless caused by an open cut or wound), aggravation of a congenital condition, blister, headaches, hernia of any kind, mental or physical infirmity, Osgood-Schlatter disease, osteochondritis, osteochondritis dissecans, osteomyelitis, spondylolysis, or slipped femoral capital epiphysis, orthodontics, injuries involving bone cysts, dental implants.
- Injuries for which benefits are payable under Worker Compensation or Employer's Liability Laws.
- Any Injury involving a two or three-wheeled motor vehicle or snowmobile or any motorized or engine driven vehicle not designed primarily for use on public streets and highways, unless the insured is participating in an activity sponsored by the Policyholder.
- Air travel or the use of any device or equipment for aerial navigation, except as a fare-paying passenger on a regularly scheduled commercial airline.
- Intentionally self-inflicted Injuries; Injuries to which the contributing cause was the Insured's commission of or attempt to commit a felony or being engaged in an illegal occupation; Injuries resulting from the use of alcohol (as determined by the laws of jurisdiction where the loss incurred) or drugs or narcotics unless administered on the advice of physician.
- Services provided normally without charge by the Health Service of the Policyholder; or by any person employed or retained by the Policyholder; or services covered or provided by the student health fee.
- Replacement of contact lenses, eyeglasses, hearing aids or prescriptions or examinations thereof.

## EFFECTIVE AND EXPIRATION DATES AND ENROLLMENT

**EFFECTIVE DATE** – is the Master Policy effective date 08-01-2017.

**TO FILE A CLAIM** – notify the University officials immediately if the accident has occurred at the University. Obtain a claim form from the Plan Administrator. Submit the completed claim form with the student's itemized bills to Student Assurance Services, Inc. P.O. Box 196, Stillwater, MN 55082.

**EXPIRATION DATE** – is the Master Policy expiration date 07-31-2018.

**TO ENROLL** – All students are automatically enrolled for this accident-only insurance plan and premium is charged to student's account.

This provides a very brief description of some of the important features of the insurance policy. It is not the insurance policy and does not represent it. A full explanation of benefits, exceptions and limitations is contained in the Group Accident Insurance Policy Form GA-2200Ed.11-16 (and any state specific). This policy is considered term accident insurance and is non-renewable. This product may not be available in all states and is subject to individual state regulations. The Master Policy is issued to the School. A copy of the Privacy Notice may be obtained on the website [www.sas-mn.com](http://www.sas-mn.com).

Underwritten by:



Ameritas Life Insurance Corp.  
Lincoln, Nebraska

Servicing Agent:



ASSOCIATED  
INSURANCE PLANS  
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