

2019–2020



Student Intercollegiate Sports Injury Only Insurance Plan

Policy No. 2019E2A01

Effective 8/1/19–8/1/20



ROSE-HULMAN INSTITUTE OF TECHNOLOGY

Terre Haute, IN

Serviced by:



ATTN: Student Team
200 South Wacker Drive, Suite 1000
Chicago, IL 60606
888-255-4029

Underwritten and Administered by:



**National Guardian
Life Insurance Company**
Student Insurance Division
Commercial Travelers Building
70 Genesee Street
Utica, NY 13502
1-800-756-3702

Product underwritten by
National Guardian Life Insurance Company (NGL), Madison, WI.
National Guardian Life Insurance Company is not affiliated with
The Guardian Life Insurance Company of America a.k.a. The Guardian or Guardian Life.

As Policy Form No.: NSP-IN 2013

19-E2A01 Bro.

ELIGIBILITY

All Intercollegiate student athletes participating in Baseball, Basketball, Cheerleading, Cross Country, Football, Golf, Soccer, Softball, Student Managers, Swim/Dive, Tennis, Track & Field, and Volleyball are eligible and covered under the Intercollegiate Sports Policy. The Policy covers injuries that occur during the play, practice or conditioning of a covered sport while under the supervision of proper adult authority of the Policyholder and when traveling as a member of a supervised group or on an authorized team trip.

EFFECTIVE AND TERMINATION DATE

The Master Policy on file at the school becomes effective at 12:01 a.m., August 1, 2019. Coverage becomes effective on that date or the date application and full premium are received by the Company (or its authorized representative), whichever is later. The Master Policy terminates at 12:01 a.m., August 1, 2020. Coverage terminates on that date or at the end of the period through which premium is paid, whichever is earlier.

MEDICAL EXPENSE BENEFITS

If the Insured Person incurs Eligible Expense as the result of a covered Injury, We will pay the charges incurred for such expense within 104 weeks from the date of Injury, beginning on the date of accident. Payment will be made for eligible expenses in excess of a \$500 Deductible per Injury, not to exceed the \$90,000. The first such expense must be incurred within 60 days after the date of Accident.

Eligible Expense means the Usual and Customary charges for the following treatments and services as the result of a covered Injury.

1. Medical and surgical care by a physician;
2. Hospital care and service in semi-private accommodations, or as an outpatient;
3. Radiology (X-rays);
4. Orthopedic appliances necessary to promote healing;
5. Ambulance service from the scene of the accident to the nearest hospital;
6. Dental treatment of sound natural teeth.

ACCIDENTAL DEATH AND DISMEMBERMENT INDEMNITY

If a covered injury results in any of the losses specified below within 180 days after the date of the accident. We will pay the applicable amount stated.

For loss of:

Life	\$10,000
Two or more members	\$10,000
One Member	\$ 5,000

“Member” means hand, foot, or eye. Loss of hand or foot means complete severance above the wrist or ankle joint. Loss of eye means the total, permanent loss of sight.

If the Principal Sum is payable, no indemnity will be paid for dismemberment. In any event, the Double Dismemberment Indemnity is the maximum amount payable under this Part for all losses resulting from one accident.

DEFINITIONS

Usual and Customary means the normal charge of the provider, in the absence of insurance, for a service or supply, but not more than the prevailing charge in the area for a: 1) Like service by a provider with similar training or experience; or 2) Supply that is identical or substantially equivalent.

Injury means bodily Injury to an Insured caused by an Accident. It must occur while the Policy is in force.

Injury will also include the following list of conditions which are attributable to exertion from participating in a covered activity: Tendinitis, Bursitis, Strains, Sprains, Shin Splints, Stress Fractures, Heat Exhaustion, High Blood Pressure, Hernia, or Similar Conditions.

Injury will also include the acute onset of conditions relating to the heart and/or circulatory system. Such condition must have resulted from the play, practice or conditioning of a sporting event. These conditions include, but are not limited to, heart attack, stroke, brain circulatory malfunctions and heat exhaustion.

EXCLUSIONS AND LIMITATIONS

The Policy does not cover any loss contributed to or resulting from:

1. Sickness or disease in any form (except pyogenic infections due to an accidental cut or wound).
2. The use of drugs or narcotics, unless administered on the advise of a physician.
3. War or any act of war, whether or not declared, or participation in any riot or civil commotion.
4. 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; or as a passenger on a flight chartered by the School.
5. Suicide, attempted suicide, or any intentionally self-inflicted injury.
6. Fighting or brawling.
7. Expenses incurred for the use of Orthotics unless solely to promote healing.
8. Hernia, in any form.
9. Off season physical conditioning for interscholastic, intercollegiate, intramural, or club/sports.

The Policy does not cover treatment administered by any person or facility employed or retained by the Policyholder, or by any member of the Insured Person's family or household. This includes a team Physician, team trainer or nurse.

NON-DUPLICATION OF INSURANCE PROVISION

The Policy does not cover treatment or service for which benefits are payable or service is available under any Other Valid and Collectible Insurance. This includes Worker's Compensation and automobile no-fault insurance.

CLAIM PROCEDURES

- A. Obtain medical claim form from the Athletic Trainer or the Office of Insurance and Risk Management.
- B. You must submit all bills relative to the Injury to your (parents) insurance carrier.
- C. If there are expenses due after your insurance Company has paid, please provide National Guardian Life Insurance Company with copies of any medical

worksheets, vouchers, explanation of benefits and any relevant itemized bills, at which time they will be processed for payment.

- D. If you are not covered under your parents' Insurance plan, you must submit a LETTER OF DENIAL from their insurance company before any further claim payment can be considered.
- E. **Athletes covered under an HMO/PPO medical plan should follow their guidelines for treatment.**

Written notice of injury upon which claim may be Based must be given to the Company within thirty (30) days of the date of the commencement of the First loss for which benefits arising out of each such Injury may be claimed.

Complaints: If you disagree with our claim determination, write to us and we will review Your claim. Such request must include the following information: 1. Your name; 2. Policy number; 3. Other identifying information found on the notice from us, if any; 4. A brief summary of the issues in conflict; and 5. Any information, documents, or comments that you want us to take into consideration. The results of this review will be sent to you within thirty (30) days following our receipt of your request.

If you have any questions about this coverage or claim procedures, you may contact: The Office of Insurance and Risk Management at 812-877-8457.

Underwritten by

National Guardian Life Insurance Company

Madison, WI

as policy form # NSP-IN 2013

National Guardian Life Insurance Company is not affiliated with Guardian Life Insurance Company of America aka The Guardian or Guardian Life.

Claims Administered by

National Guardian Life Insurance Company

Student Insurance Division

Commercial Travelers Building

70 Genesee St., Utica, NY 13502

Toll Free: 800-756-3702

www.studentplanscenter.com

Serviced by

EIIA

Attn: Student Team

200 South Wacker Drive

Chicago, IL 60606

888-255-4029

Representations of this plan must be approved by the Company.

This is not the Policy. Rather it is a brief description of the benefits and other provisions of the Policy. The Policy is governed by the laws and regulations of the state in which it is issued. Any provisions of the Policy, as described in this brochure, that may be in conflict with the laws of the state where the school is located will be administered to conform with the requirements of that state's laws, including those relating to mandated benefits.