

Beaufort Academy

Student Accident Reimbursement Plan

This Plan provides reimbursement at moderate cost, for unexpected medical expenses that arise when accidents occur during the years when students and their families are already carrying the financial burden of an education.

BENEFITS

The Plan will pay the medical expenses incurred by an insured student by reason of accidental bodily injury sustained (including interscholastic sports) 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, for medical care or treatment by a doctor, hospital confinement, or for the professional care and services of a registered nurse, for each incident resulting in injury during the 24 month period* immediately following date of injury up to a maximum payment of **\$1,000.00**.

EXTENSIVE PROTECTION

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.

Note: This Plan does not cover accidents occurring before the effective date of coverage.

EXCLUSIONS

Insurance is not provided for loss resulting from:

- a) War; any act of war, whether declared or undeclared; or injury sustained while serving in the armed forces of any country; or
- b) Injury sustained while participating in or preparing for any professional or semi-professional sports contest; or
- c) Injury covered under any Worker's Compensation or Employer's Liability Law; or
- d) Injury sustained while operating, learning to operate or serving as a member of a crew of any vehicle or device for aerial navigations; or
- e)
 1. Disease, or any bacterial infections;
 2. Abdominal or inguinal hernia;
 3. Prescription for, or repair or replacement of eyeglasses; or
- *f) Dental treatment. **Exception:** treatment for injury to sound, natural teeth within 1 year after date of injury up to maximum benefit specified; or
- g) The use of any drug, narcotic, or an agent which is similarly classed or has similar effects unless it is given by and while under the care and attendance of a doctor; or
- h) Taking part in a riot.

CLAIM SERVICE

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 for any injury be paid promptly and then sent to A. W. G. Dewar, Inc., Four Batterymarch Park, Quincy, MA 02169 for reimbursement.

This document is a digest. Actual coverages are governed by the insurance contract on file in the School's Business Office. Coverages may change each academic year. This document describes coverages for the ensuing academic year.

UNDERWRITER

The Plan is underwritten by one of the member companies of OneBeacon Insurance Group, Boston, MA, for A. W. G. Dewar, Inc., dba A. W. G. Dewar Insurance Agency. The name of each student is listed on a contract which is held by the School, not as agent for the insurance company, but on behalf of insured students.

POLICY TERM

From 12:01 A. M., August 10, 2009 to 12:01 A. M., June 1, 2010. If payment is made after the effective date of the policy, coverage is effective from date payment is received by the School to the end of the policy term. Late applicants are subject to evidence of insurability, if requested.

COST

\$18.00 for each participating student.

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.