K-12 STUDENT ACCIDENT INSURANCE
BASIC & CATASTROPHIC ACCIDENT POLICIES

Philadelphia Insurance Companies has years of experience underwriting basic & catastrophic Accident insurance policies for students enrolled in grades K-12. We emphasize broad coverage, competitive pricing and outstanding claim service. Our overriding goal is to minimize the financial burden for a family when medical treatment is required as a result of an accident at School. Today, even for a family with private healthcare coverage, that financial burden can be significant due to large family deductibles, coinsurance and co-payments. Contact our highly experienced underwriting team for a quote.

Basic Accident Insurance
Our Basic policies will provide coverage for eligible medical expenses incurred as a result of a Covered Accident up to $50,000 per Covered Person, per Accident. Alternative Accident Medical Expense limit options are also available. In addition to the Accident Medical Expense benefits, we’ll automatically include high limit Accidental Death, Dismemberment and Paralysis benefits. A Deferred Dental Expense benefit is also automatically included.

Catastrophic Accident Insurance
Our Catastrophic policies will consider eligible medical expenses that exceed $50,000 and go up to as high as $5,000,000 per Covered Person, per Accident. In addition to the Accident Medical Expense benefit, we can also include additional Accidental Death & Dismemberment benefits as well as Catastrophic Cash benefits which will provide lump-sum payments to the family when a Covered Accident results in Paralysis, Coma or Brain Death.

When Coverage Applies – School Purchased Policies
All enrolled students of the School are automatically covered while they’re engaged in School sponsored and supervised activities including athletics, internships, field trips, and summer programs. Please review the sample policy that accompanies our quotation for a list of excluded expenses and excluded activities. Exclusion wording varies from state to state. Coverage applies to activities in the United States, Canada and Mexico. School sponsored and supervised activities taking place outside these regions can also be covered. Coverage for athletics only or specified exposures such as athletics and extracurricular activities can also be modeled for your school. We’ll do our best to find the right solution.

When Coverage Applies – Voluntary Policies
Optional School-time Only or 24-Hour coverage purchased by the student’s family. School administrators and faculty may also be eligible. Our Voluntary Policies automatically include Extended Dental benefits. This coverage is only offered if the school purchases an Accident policy that includes coverage for interscholastic sports.

Optional Coverage & Benefits
(An additional premium may apply)
• Coverage for Volunteers
• Expanded Medical Expense (overuse injuries)
• Heart & Circulatory Conditions
• Crisis Death

Services We Offer
We offer a highly experienced underwriting team that listens to the insurance broker and the school’s needs. We partner with an outstanding Claims Administrator with years of experience and a family and school focused customer service team. Claim forms and claim instructions are available in English and Spanish. Doctor and hospital charges are evaluated for discounts to help keep costs down. Claim reports are delivered in a timely, comprehensive manner. Risk Management services can be made available as part of the package of insurance products offered through Philadelphia Insurance Companies.

Select Definitions
Select Definitions (Definition wording varies by state, please review the sample policy for a complete list of your state specific definitions)

Full Excess Coverage
We will pay Covered Expenses:
1. After the Covered Person has satisfied any applicable Deductible; and
2. Only when they are in excess of amounts payable by any Other Health Care Policy whether or not claim has been made for benefits it provides

Benefit Period
After a Covered Person incurs their first eligible medical expense within 180 days of the date of the Accident, the Covered Person can incur additional, eligible medical expenses for up to the time frame allowed under the Benefit Period in the policy. This provision applies regardless of whether the policy was renewed.

800.734.9326 | PHLY.com
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.

Covered Activity
Means any recurring activity that is shown in the Schedule of Benefits and:
1. Takes place under one of the Conditions of Coverage specified in the Schedule of Benefits; and
2. Is sponsored; organized; scheduled; or otherwise provided by the Policyholder.

Covered Expenses
Means the lesser of the usual and customary charge and the maximum benefit shown, for services or supplies listed in the Schedule of Benefits and described in the Accident Medical Expense Benefits section of this Policy. Covered Expenses must be Incurred by a Covered Person for treatment for injuries sustained in a Covered Accident.

Covered Injury
Means any bodily harm that results directly and independently of all other causes from a Covered Accident.

Health Care Policy
Means any 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 Policy includes group, blanket, franchise, family or individual:
1. Insurance policies;
2. Subscriber contracts;
3. Uninsured agreements or arrangements;
4. Coverage provided through: Health Maintenance Organizations; Preferred Provider Organizations; State or Federal Exchanges; Insurance Cooperatives and other prepayment; group practice and individual practice policies;
5. Medical benefits provided under automobile “fault” and no-fault” type contracts;
6. Medical benefits provided by any governmental policy or coverage or other benefit law, except:
   a. A state-sponsored Medicaid policy, or
   b. A policy or law providing benefits only in excess of any private or non-governmental policy;
7. Other valid and collectible medical or health care benefits or services.

Exclusions & Limitations
Definitions, exclusions and limitations vary from state to state. For a complete list of your state specific exclusions and limitations, request a sample policy. We’re prepared to review the sample policy form with your insurance broker and your school administrator.