For catastrophic injuries, QBE makes it possible for schools to fulfill their commitment to the health and well-being of their students and athletes.

Despite our best efforts, serious accidents can happen anytime. And with them come increasing medical expenses. Our catastrophic plans provide an extra layer of protection for you and your K-12 students and athletes.

Key features
QBE offers two solid plans — choose one or both:

Interscholastic Athletics Coverage
– Provides coverage during interscholastic athletic competitions that are officially authorized, sanctioned and scheduled by the participating school, and governed by rules and regulations of the appropriate state high school athletic/activities association or related governing body.
– Also provides coverage during related pre-competition activities and practice sessions that are authorized and supervised by the participating school. Your school can choose whether to include or not include interscholastic football.

Student Coverage
– Provides coverage during intramural sports, physical education classes, regular school sessions, school-sponsored and supervised on- and off-campus group activities, and during travel directly to and from these activities. Under this plan, your school protects students from the high cost of catastrophic injuries for activities other than interscholastic athletic competitions.

Customized Coverage Options
Choose the program that suits you best:
– Up to $1 million excess accident medical expense benefit for covered accidental injuries with a choice of 10-year or lifetime benefit periods.
– Limits above $1 million are also available with either a five- or 10-year benefit period.
– Deductibles range from $25,000 to $100,000.

The first eligible expense must be incurred within 26 weeks of the covered accident date, and the deductible chosen must be satisfied within two years after the accident date. Once the deductible is satisfied, benefits will be payable for Usual and Customary charges for eligible medical expenses in excess of those paid by any other health care plan — up to the maximum benefit amount and for the benefit period chosen.

Eligible Accident Medical Expenses include:
– Hospital bills, including semi-private room and board
– Intensive Care room and board charges
– Medical or surgical treatment by a licensed physician, including anesthesia
– X-rays and laboratory tests
– Outpatient charges for emergency room treatment
– Physiotherapy treatment during a hospital stay or on an outpatient basis

The covered person must be under the care of a physician when expenses are incurred. Eligible medical expenses are listed in the policy. For a copy of the policy, contact your plan administrator.
Optional Catastrophic Cash Benefit

If a covered person suffers paralysis, coma, or brain death as a result of a covered accident, a catastrophic cash benefit will be paid in accordance with the option you select, and in addition to the medical expense benefits.

Option I
Up to $500,000 Benefit — A lump-sum benefit of up to $100,000 for any of the conditions in the Table of Losses shown. Thereafter, a yearly benefit of $40,000 to be paid for up to 10 years, as long as the covered person remains paralyzed or in a coma, or brain death has occurred.

Option II
Up to $250,000 Benefit — A lump-sum benefit of up to $50,000 for any of the conditions in the Table of Losses shown. Thereafter, a yearly benefit of $20,000 to be paid for up to 10 years, as long as the covered person remains paralyzed or in a coma, or brain death has occurred.

Catastrophic Cash Benefits are not available without Catastrophic Accident Medical Expense Benefits.

About QBE
QBE North America is part of QBE Insurance Group Limited, one of the largest insurance carriers worldwide. 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 – financial-size category (XIV).*

Table of Losses

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage of Option I or II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain Death or Coma</td>
<td>100 percent</td>
</tr>
<tr>
<td>Paralysis of:</td>
<td></td>
</tr>
<tr>
<td>Both upper and lower limbs</td>
<td>100 percent</td>
</tr>
<tr>
<td>Both lower limbs</td>
<td>100 percent</td>
</tr>
<tr>
<td>One lower and one upper limb</td>
<td>100 percent</td>
</tr>
<tr>
<td>One lower or one upper limb</td>
<td>50 percent</td>
</tr>
</tbody>
</table>

Note: Paralysis, coma or brain death must occur within 180 days from the date of the covered accident, must continue for six consecutive months, and must be diagnosed by a physician as being complete and irreversible. Payment of this benefit is in addition to and without regard to other insurance.
Terms of Coverage

Once the deductible is satisfied, benefits are payable for injuries which result directly and independently of all other causes, and from a covered accident while coverage is in effect, up to the plan maximum for the benefit period chosen. Deductible must be satisfied within two years of the date of the covered accident.

Eligibility — With the Interscholastic Athletics Plan, you can cover all participating team members for coverage including student athletes, managers, trainers, cheerleaders and participants in related activities. If Student Coverage is chosen, all students participating in school-sponsored and supervised activities (other than interscholastic athletic competitions) are eligible.

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

Coverage is paid for by the policyholder. 100 percent participation is required.

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 injury, and
3. is not otherwise excluded under the terms of this Policy.

Brain Death — Irreversible unconsciousness with total loss of brain function and complete absence of electrical activity of the brain, even though the heart is still beating.

Coma — A profound state of unconsciousness from which the covered person, through powerful stimulation, is not likely to be aroused. This condition must be diagnosed and regularly treated by a physician.

Deductible — The dollar amount of eligible expenses which must either be incurred as out-of-pocket expenses or satisfied by any other health care plan, or combination thereof; by each covered person for treatment of injuries sustained in each covered accident before benefits are payable under the 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 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.

Paralysis/Paralyzed — The complete loss of function and sensation of limbs.

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 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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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 driver’s 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 a 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.

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 transportation;
- expenses payable by any automobile insurance policy without regard to fault;
- services or treatment provided by an inpatient 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 services 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. Home Health Care benefits are limited to $30,000 per year.