



Villa Maria College
2017 – 2018
Student Accident Insurance Plan
Group # ST1002AC
Policy # ACOMO-50685-754

Who is Eligible?

Class	Eligibility	Conditions of Coverage
1	All registered students of the Policyholder excluding study abroad programs.	24-Hour Coverage

**What is covered?
Benefits at a Glance**

Accident Medical Expense	
Coverage Basis	Excess
Maximum Benefit	\$1,000 “Per Injury”
Percentage Payable	100% of Usual & Customary
Dental Limit	100% of Usual & Customary
Deductible per Injury	\$0
Deductible Type	Integrated
Benefit Period	52 weeks from the date of the Covered Accident
Incurred Expenses Period*	90 days

*First covered expense must be incurred within 90 days after the Covered Accident

DATES OF COVERAGE:
Effective Date:
 September 1, 2017

Termination Date:
 August 31, 2018

CLAIMS ADMINISTRATOR:
 Consolidated Health Plans
 2077 Roosevelt Avenue
 Springfield, MA 01104
 1-800-657-5030
www.chpstudent.com

Basic Accident Benefits

When Your Injury requires: (a) treatment by a Physician; (b) Hospital services; (c) services of a licensed practical nurse or R.N.; (d) x-ray service; (e) use of operation room, anesthesia including the administration thereof, laboratory service; (f) use of an ambulance; (g) use of an ambulatory surgical center or ambulatory medical center; (h) if ordered by a Physician, prescription medicines, drugs, or any other therapeutic services or supplies; or (i) home care Expenses, We will pay the Expenses incurred up to an aggregate maximum of \$1,000. This benefit includes coverage for treatment of Injury to natural teeth.

Coordination of Benefits

This policy coordinates with other plans under which an individual is covered so that the total benefits available will not exceed 100% of the allowable Expenses.

If any discrepancy exists between this flyer and the Policy, the Master Policy will govern and control the payment of Benefits.

