



**MICHIGAN
CATHOLIC**
CONFERENCE

Travel/Accident Policy (Chubb)

WORLDWIDE TRAVEL ASSISTANCE AND ACCIDENTAL DEATH AND DISMEMBERMENT

Carrier: Chubb/Ace

Coverage Territory: Domestic and International

Covered: All priests, religious, clergy, students, volunteers, employees and Guests of the proposed Policyholder who are in Active Service. Guests means individuals invited and authorized to participate in a Covered Activity that is under the control of the Policyholder.

Coverage Highlights:

- 1) 24/7 Access, 365 days a year thru AXA Assistance
- 2) Emergency Medical Services
- 3) Security Evacuation Services
- 4) Emergency Travel Services
- 5) Information Services

Limit: \$2,500,000 Aggregate per Covered Accident

Maximum AD & D Benefit is \$250,000

Out of Country Medical Expense is \$250,000

“Medical Emergency” means a condition caused by an Injury or Sickness that manifests itself by symptoms of sufficient severity that a prudent layperson possessing an average knowledge of health and medicine would reasonably expect that failure to receive immediate medical attention would place the health of the person in serious jeopardy.

“Medically Necessary” means a treatment, service or supply that is: 1) required to treat an Injury; 2) prescribed or ordered by a Doctor or furnished by a Hospital; 3) performed in the least costly setting required by the Covered Person’s condition; and 4) consistent with the medical and surgical practices prevailing in the area for treatment of the condition at the time rendered. Purchasing or renting 1) air conditioners; 2) air purifiers; 3) motorized transportation equipment; 4) escalators or elevators in private homes; 5) eye glass frames or lenses; 6) hearing aids; 7) swimming pools or supplies for them; and 8) general exercise equipment are not Medically Necessary. A service or supply may not be Medically Necessary if a less intensive or more appropriate diagnostic or treatment alternative could have been used. We may consider the cost of the alternative to be the Covered Expense.

Spouse - \$50,000 Benefit

Dependents - \$25,000 Benefit

Bereavement and Trauma Benefit

Benefit Amount per session: \$150

Maximum number of sessions: 10, Maximum Benefit amount per covered accident \$1,500

Coma Benefit

Benefits are payable initially as 1% of the Principal Sum per Month up to 11 months and thereafter in a lump sum of 100% of the Principal Sum.

Emergency Medical Evacuation Benefit

Benefit Maximum: 100% of Covered Expenses

Home Alteration and Vehicle Modification Benefit

Benefit Maximum: 10% of the Covered Person’s Principal Sum up to a Maximum Benefit of \$25,000

Rehabilitation Benefit

Benefit Amount: 10% of the Covered Person’s Principal Sum up to a Maximum Benefit of \$25,000

Repatriation of Remains Benefit

Benefit Maximum: 100% of Covered Expenses

Seatbelt and Airbag Benefit

Seatbelt Benefit Amount: 10% of the Covered Person’s Principal Sum up to a Maximum Benefit of \$25,000

Airbag Benefit Amount: 10% of the Covered Person’s Principal Sum up to a Maximum Benefit of \$2,500

Default Benefit Amount: \$2,000

Accidental Death and Dismemberment Benefits

If Injury to the Covered Person results in any one of the losses shown below within 365 days from the date of a Covered Accident, We will pay the Benefit Amount shown below for that loss. The Principal Sum is shown in the *Schedule of Benefits*. If multiple losses occur, only one Benefit Amount, the largest, will be paid for all losses due to the same Covered Accident.

Schedule of Covered Losses

Covered Loss Benefit Amount

Life.....	100% of the Principal Sum
Two or more Members.....	100% of the Principal Sum
Quadriplegia	100% of the Principal Sum
One Member.....	50% of the Principal Sum
Hemiplegia.....	75% of the Principal Sum
Paraplegia	75% of the Principal Sum
Thumb and Index Finger of the Same Hand	25% of the Principal Sum
Uniplegia.....	25% of the Principal Sum

Maximum for Preexisting Conditions: treated as any other medical condition:

Maximum for Dental Treatment

(Injury Only): \$1,500

Maximum for Emergency Medical Treatment of Pregnancy: Treated as any other medical condition

Maximum for Room & Board Charges: The average semi-private room rate per day

Maximum for ICU Room & Board Charges: Two (2) times the average semi-private room rate per day

Deductible: \$0 per Covered Accident or Sickness

Co-insurance Rate: 100% of the Usual and Customary Charges

Incurred Period: 30 days after the date of Covered Accident or Sickness

Maximum Benefit Period: The earlier of the date the Covered Person returns to his or her Home Country or Country of Permanent Assignment, or 26 weeks from the date of a Covered Accident or Sickness

Maximum Period of Coverage: 180 days

Emergency Medical Evacuation Benefit

Benefit Maximum: 100% of Covered Expenses

Repatriation of Remains Benefit

Benefit Maximum: 100% of Covered Expenses

Includes 7 day personal deviation coverage.

Coverage trigger is an accident or sickness