

California Student Accident Insurance Program

K-12 Student Accident Insurance

The California Student Accident Insurance Program (CSAIP) is pleased to provide a student accident insurance plan for the 2025-2026 school year. Enrolled students participating in school sponsored and supervised activities are covered for Accident Medical Expense Benefits and Accidental Death and Dismemberment Benefits, subject to the terms, conditions, limitations and exclusions of the Policy. It covers certain medical expenses for the treatment of injuries that are the direct and independent result of a Covered Accident during the policy period. See "Benefits," "Definitions," and "Exclusions" in the Policy for further details.

Claims Procedures

Always keep a copy of all claim related documents. Written proof of loss must be submitted within 90 days from the date of such loss.

1) Contact your school to obtain an accident claim form.

2) Complete the claim form in its entirety and submit to BMI Benefits within 90 days from the date of the accident.

3) Submit all itemized bills and primary insurance E.O.B's to BMI Benefits for processing outstanding balances due to a Covered Accident. You may also contact the medical provider and submit BMI's information as your secondary coverage, which would allow the provider to bill BMI Benefits directly with the necessary billing documents.

SUBMIT TO:

BMI BENEFITS, LLC

PO Box 511

Matawan, NJ 07747

Phone: 800.445.3126 | Fax 732.583.9610 | Email: BMI@bobmccloskey.com

Why Purchase Student Accident Insurance?

Schools are a foundational part of any community where children spend much of their time during the week. But in their pursuit of mental, social, and physical growth, schoolchildren face a number of risks that can lead to injuries. For example, did you know that according to the Centers for Disease Control and Prevention, in 2019 around 15% of U.S. high school students reported suffering a sports or recreation related concussion within the preceding 12 months?¹



3.5 million

Children in the US are injured playing sports or participating in other recreational activities each year²



55%

of all major accidents in schools are caused by slips, falls and trips.³

Treatment for even minor injuries like sprains and fractures that happen at school or during school sponsored activities can cost thousands of dollars. Serious injuries can lead to very expensive ongoing medical care. While students and their families may have coverage through a private health care plan, there may be additional patient responsibilities resulting from co-insurance, high deductibles, or other costs.

The CSAIP K-12 Student Accident Insurance provides schools and school districts coverage for medical expenses incurred by injured students to help protect against potential liability claims and to offer students and their families the comfort of knowing they will be supported should an accident occur. We offer a comprehensive program with a wide range of coverage and benefts so schools can customize a policy to meet the needs of their students and staff.

Basic Student Accident Insurance plans are school-purchased and automatically extend coverage to all registered students at the school or school district.







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Description of coverage

California Student Accident Insurance Program (CSAIP)

PreK-8 or K-8: Mandatory School-Time Coverage Including Interscholastic Sports, Football and Summer Camps PreK-12 or K-12: Mandatory School-Time Coverage Including Interscholastic Sports, Football and Summer Camps

Accident Medical Expense Maximum Benefit (AME)	\$25,000
Deductible	\$0
Loss Period - Treatment Must Begin	Within 90 days after a Covered Accident
Benefit Period	2 years from the date of the Covered Accident
Coverage	100% Usual & Customary (U&C) Charges
Plan Design	Full Excess
Inpatient	
Hospital Room & Board	100% of the semi-private room rate
Hospital Intensive Care	100% U&C Charges
Hospital Miscellaneous	100% U&C Charges
Outpatient	
Ambulatory Medical Center	100% U&C Charges
Emergency Room Treatment	100% U&C Charges
Physician Services	
Surgical	100% U&C Charges
Assistant Surgeon	100% U&C Charges
Physician's Assistant	100% U&C Charges
Anesthesiologist	100% U&C Charges
Physical Therapy	100% U&C Charges
Physician's Surgical Facilities	100% U&C Charges
Other Services	
Registered Nurses' Services	100% U&C Charges
Prescriptions	100% U&C Charges
Laboratory Tests, X-rays and Interpretation	100% U&C Charges
Diagnostic Imaging (MRI, CAT Scan, etc.)	100% U&C Charges
Air/Ground Ambulance	100% U&C Charges
Durable Medical Equipment	100% U&C Charges
Dental Treatment to Sound Natural Teeth	100% U&C Charges
Extended Dental Benefit	\$2,500 up to age 21
Volunteer Coverage	Included
Accidental Death & Dismemberment Benefits	
Accidental Death Benefit	\$25,000
Accidental Dismemberment Benefit Maximum	\$50,000
Accidental Paralysis Maximum	\$50,000
Aggregate Limit of Indemnity	\$1,000,000
Crisis Death Benefit	\$10,000 / \$100,000 Max per incident







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Common Exclusions:

In addition to any benefit-specific exclusions, benefits will not be paid for any Covered Injury or Covered Loss which, directly or indirectly, in whole or in part, is caused by or results from any of the following unless coverage is specifically provided for by name in the *Description of coverage* section:

- 1. Suicide, self-destruction, attempted self-destruction, or intentional self-inflicted Injury while sane or insane.
- 2. War or any act of war, declared or undeclared.
- 3. An Accident which occurs while the Covered Person is on Active Duty in any Armed Forces, National Guard, military, naval or air service or organized reserve corps:
- 4. Injury sustained while in the service of the armed forces of any country. When the Covered Person enters the armed forces of any country, We will refund the unearned pro-rata premium upon request;
- 5. Participation in a riot or insurrection. Riot means a public disturbance involving an assemblage of 5 or more persons which by tumultuous and violent conduct or the threat thereof creates grave danger of damage or injury to property or persons. An exclusion for riot shall apply only when a person willfully engages in a riot or willfully incites or urges other persons to engage in a riot.
- 6. Any Injury requiring treatment which arises out of, or in the course of fighting, brawling, assault or battery.
- 7. Sickness, disease, bodily or mental infirmity or medical or surgical treatment thereof, bacterial or viral infection, regardless of how contracted. This does not include bacterial infection that is the natural foreseeable result of an accidental external bodily injury or accidental food poisoning.
- 8. Disease or disorder of the body or mind.
- 9. Mental or Nervous disorders, except as specifically provided in the Policy.
- 10. Asphyxiation from voluntarily or involuntarily inhaling gas and not the result of the Covered Person's job.
- 11. Voluntarily taking any drug or narcotic unless the drug or narcotic is prescribed by a Physician and not taken in the dosage or for the purpose as prescribed by the Covered Person's Physician.
- 12. Intoxication or being under the influence of any drug or narcotic.
- 13. Injury caused by, contributed to, or resulting from the Covered Person's use of alcohol, illegal drugs or medicines that are not taken in the dosage or for the purpose as prescribed by the Covered Person's Physician.
- 14. Driving under the influence of a controlled substance unless administered on the advice of a Physician.
- 15. Driving while Intoxicated. Intoxicated will have the meaning determined by the laws in the jurisdiction of the geographical area where the loss occurs.
- 16. Violation or in violation or attempt to violate any duly-enacted law or regulation, or commission or attempt to commit an assault or felony, or that occurs while engaged in an illegal occupation.
- 17. Conditions that are not caused by a Covered Accident.
- 18. Covered Expenses for which the Covered Person would not be responsible in the absence of this Policy.
- 19. Any treatment, service or supply not specifically covered by this Policy.
- 20. Loss resulting from participation in any activity not specifically covered by this Policy.
- 21. Charges which are in excess of Usual and Customary charges.
- 22. Expenses incurred for an Accident after the Benefit Period shown in the Schedule of Benefits.
- 23. Regular health checkups.
- 24. Travel or activity outside the United States.
- 25. Any Accident where the Covered Person is the operator of a motor vehicle and does not possess a current and valid motor vehicle operator's license.
- 26. Travel in or upon:
 - a. A snowmobile;
 - b. A water jet ski;
 - c. Any two or three wheeled motor vehicle, other than a motorcycle registered for on-road travel;
 - d. Any off-road motorized vehicle not requiring licensing as a motor vehicle.
- 27. Travel or flight in or on any vehicle for aerial navigation, including boarding or alighting from:
 - a. While riding as a passenger in any Aircraft not intended or licensed for the transportation of passengers; or
 - b. While being used for any test or experimental purpose; or
 - c. While piloting, operation, learning to operate or serving as a member of the crew thereof; or







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- d. While traveling in any such Aircraft or device which is owned or leased by or on behalf of the Participating Organization of any subsidiary or affiliate of the Participating Organization, or by the Covered Person or any member of Their household.
- e. A space craft or any craft designed for navigation above or beyond the earth's atmosphere; or an ultralight hang-gliding, parachuting, or bungee-cord jumping.
- f. Except as a fare paying passenger on a regularly scheduled commercial airline or as a passenger in a non-scheduled, private Aircraft used for business or pleasure purposes.
- 28. Treatment for an Injury that is caused by or results from a nuclear reaction or the release of nuclear energy. However, this exclusion will not apply if the loss is sustained within 365 days of the initial incident and:
 - a. the loss was caused by fire, heat, explosion or other physical trauma which was a result of the release of nuclear energy and
 - b. the Covered Person was within a 100-mile radius of the site of release either:
 - i. at the time of the release; or
 - ii. within 24 hours of the start of the release; or
 - iii. occurs while the Covered Person is in
- 29. Rest cures or custodial care.
- 30. Elective or Cosmetic surgery, except for reconstructive surgery on an injured part of the body.
- 31. Services rendered for detection and correction by manual or mechanical means (including x-rays incidental thereto of structural imbalance, distortion or subluxation in the human body for purposes of removing nerve interference where such interference is the result of or related to distortion, misalignment or subluxation of or in the vertebral column.
- 32. Pregnancy (except complications of pregnancy); childbirth; miscarriage; abortion; or any complications of any of these conditions. This does not apply if treatment is required as a result of a Covered Accident.

Excluded Expenses:

The following will not be considered Covered Expenses unless coverage is specifically provided.

- 1. Any service, treatment or supply that is not considered appropriate treatment as defined in this Policy.
- 2. Expenses Incurred after the end of the Benefit Period, even if Incurred for continuing services or treatment of a Covered Injury.
- 3. Whole blood, concentrated red blood cells or blood storage except expenses by a Hospital for processing or administration of blood.
- 4. Cosmetic surgery or care, or treatment solely for cosmetic purposes, or complications therefrom. This exclusion does not apply to:
 - a. cosmetic surgery resulting from a Covered Accident, if initial treatment of the Covered Person is begun within 12 months of the date of the Covered Accident;
 - b. reconstruction incidental to or following surgery resulting from a Covered Accident;
 - c. any unplanned and unintended adverse consequences that may result during the treatment of a Covered Accident.
- 5. Any elective or routine treatment, surgery, health treatment, or examination, including any service, treatment or supplies that: (a) are deemed to be experimental or investigational; and (b) are not recognized and generally accepted medical practice in the United States.
- 6. Services or treatment provided by persons who do not normally charge for their services, unless there is a legal obligation to pay.
- 7. Rest cures or custodial care.
- 8. Personal services such as television and telephone.
- 9. Sickness, disease, bodily or mental infirmity or medical or surgical treatment thereof, bacterial or viral infection, regardless of how contracted. This does not include bacterial infection that is the natural foreseeable result of an accidental external bodily injury or accidental food poisoning.
- 10. Routine dental care and treatment.
- 11. Routine nursery care.







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Note: Once coverage is accepted, a Policy will be issued to your school. This information is a brief description of certain benefits and features of the California Student Accident Insurance Program underwritten by Everest Reinsurance Company. It is not a contract and does not extend or alter the coverage afforded by the Policy. Full terms and conditions of coverage, including effective dates of coverage, benefits, limitations, and exclusions, are set forth on the applicable policy form. To the extent there is any discrepancy between the descriptions in this brochure and the terms, conditions, limitations and exclusions of the Policy, the Policy shall prevail.

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