

OHIO HIGH SCHOOL ATHLETIC ASSOCIATION (OHSAA) 2024-2025 CATASTROPHIC ACCIDENT INSURANCE GENERAL SUMMARY

Again this year the Ohio High School Athletic Association (OHSAA) has purchased excess catastrophic accident insurance for the 2024-2025 school year, effective 08/01/2024. This plan is placed by the brokerage Hylant, of Dublin Ohio. Coverage is written by Philadelphia Insurance Company of Philadelphia, Pennsylvania.

ELIGIBILITY

All 7th-12th grade student athletes (to include home educated athletes residing or not residing within a district), non-public school athletes (chartered or non-chartered school) pursuant to Bylaw 4-3 of the OHSAA handbook, student managers, student trainers, student cheerleaders and other students as participants of an interscholastic competition.

COVERED EVENT(S)

Eligible insureds are covered while participating in interscholastic competitions authorized, sanctioned or scheduled by the OHSAA and governed by the regulations of the OHSAA in sports in which the OHSAA conducts tournaments (includes 8 on 8 Football). Covered events also include: school-supervised tryouts, practice, pre and post-game related activities (including award banquets), tournaments, and covered travel*, between the starting date and ending date of the respective sports season as determined by the OHSAA.

***Covered Travel** means team or individual travel, for purposes of representing the Participating School, that is to or from the location of a Covered Event and is authorized by the Insured Person's Participating School, provided the travel is paid for or subject to reimbursement by the Participating School. Covered Travel to a Covered Event will commence upon embarkation from an authorized departure point and terminate upon arrival at the location of the Covered Event. Covered Travel from a Covered Event will commence upon departing from the location of the Covered Event and terminate upon return to the authorized place from which such Covered Travel to the Covered Event began.

DESCRIPTION OF COVERAGE

Benefits are payable for Medical Expenses incurred by an Insured following a Covered Accident subject to: (a) the \$25,000.00 Covered Accident Deductible (it must be satisfied within 24 months from the date of the accident), (b) the 5 Year Maximum Benefit Period and (c) the Maximum Benefit Amount of \$1,000,000.00. Coverage is excess of other valid and collectible insurance.

Benefit Highlights include:

1. \$25,000.00 Accidental Death, Dismemberment, Loss of Sight, Speech or Hearing Benefit.
2. Home Health Care and Custodial Care Benefit; Both benefits Reimbursed on a Usual & Customary Basis. Home Health Care is limited to 40 visits per calendar year.
3. Catastrophic Cash Benefit: Provides lump sum payments up to \$250,000 to the family when a covered accident results in Paralysis, Coma, or Brain Death. This benefit replaces the following benefits that were in the previous policy but allows families to use the Catastrophic Cash Benefit for expenses such as:

Special Expense Benefit: Includes those reasonable and customary expenses incurred for special items to accommodate the insured person's physical disability or adaptation/modification of the insured person's housing or motor vehicle. All special items, modification or adaptation expenses must be approved by the doctor to be medically necessary and appropriate for the insured person.

Adjustment Expense Benefit: Includes those reasonable and customary expenses incurred: (a) for training a member of the Immediate Family to perform Rehabilitative or custodial functions necessary to the care of the insured; (b) for travel expenses for Immediate Family members between their home and the insured's place of treatment; and (c) for lost earnings by the insured's parents, due to and in connection with a covered accident.

College Education Benefit: Includes any expenses associated with the pursuit of an undergraduate degree.

Crisis Death Benefit: A death benefit of \$10,000 in the event a covered person dies from an act of violence from another person's use of a gun or knife at a covered event.

Determination of Benefits If a benefit is payable under more than one provision of this policy, payment will be made only under the provision providing the greater benefit.

The above is a general summary of the insurance. The policy on file with the OHSAA contains all of the provisions, exclusions, and qualifications of the insurance benefits. If any discrepancy exists between this summary and the policy, the policy will govern and control the payment of benefits. Copies of the policy are available from the office of the OHSAA.

REPORTING OF POTENTIAL CLAIMS DURING POLICY PERIOD

If a student suffers accidental injury under the above described circumstances which might exceed \$25,000 in covered expenses within 24 months from the date of injury, contact the Administrator listed below and they will forward instructions for filing the school's claim to the school district.

For filing any claims, please contact Cathy Noskowiak with Hylant at cathy.noskowiak@hylant.com or mail them to the attention of Cathy Noskowiak at Hylant, 565 Metro Place South, Suite 450, Dublin Ohio 43017

For any questions regarding this policy, please contact Phil Hein with Hylant at 614.932.1265 or phil.hein@hylant.com