**Additional Insurance**

Every registered girl and adult member in Girl Scouting is provided basic accident insurance protection. The entire premium cost for the protection plan is assumed by GSUSA. New members are considered covered when they complete their membership registration through the Girl Scouts of Southern Nevada website girlscoutsnv.org. Troop must submit the insurance request four weeks prior to activities or event along with the Special Activity Form.

**PLAN 1: Girl Scout Basic Activity Accident Insurance** covers every registered member for accidents occurring while participating in any approved, supervised activity of the Girl Scouts, except events lasting more than two consecutive nights (a third night is covered only for any official federal holiday). This plan carries a non-duplication provision* Pays up to $10,000 in medical expense. Cost of premium: $.11 per person per day, with a minimum premium of $5.

Please note: to cover guests at troop meetings please multiply (# of guests) x (# of troop meetings) x ($ .11).

**PLAN 2: Accident Insurance for Activities or Events Excluded Under the Basic Plan**

Designed to provide the same level of benefits for approved, supervised activities/events excluded under the Basic Plan. **Non-members participating in Girl Scouts events can be insured under this plan.** This plan should be considered if the event is of a short duration and/or close to home. Examples of such activities/events are field trips or camping on long weekends. **All participants, members and nonmembers, must be insured.** Plan 2 provides coverage for accidents and includes all participants for events lasting more than two consecutive nights (three nights when one is an official federal holiday). Non-duplication provision included in their plan*. Pays up to $10,000 in medical expense. Cost of premium: $.29 per person per day, with a minimum premium of $5. Pay up to $5,000 in medical expenses for sickness and up to $10,000 for accident.

**PLAN 3E: Accident and Sickness Insurance for Activities or Events Excluded Under the Basic Plan**

Provides sickness and accident coverage for all participants in an approved Girl Scout activity/event lasting more than two nights (three when one of the nights is an official federal holiday). It is designed for extended trips. **All participants, members and nonmembers, must be insured.** This plan has a non-duplication provision* Cost of premium: $.70 per person per day, with a minimum premium of $5. Pays up to $5,000 in medical expenses for sickness and up to $10,000 for accident.

**PLAN 3P: Accident and Sickness Insurance for Activities or Events Excluded Under the Basic Plan**

Same as Plan 3E with the exception that it is not subject to the nonduplication provision*. It is recommended for extended trips. Cost of premium: $.70 per person per day, with a minimum premium of $5. Pays up to $5,000 in medical expenses for sickness and up to $10,000 for accident.

**PLAN 3PI: International Travel Plan. Accident and Sickness Insurance for Activities or Events excluded under the Basic Plan**

Same as Plan 3P, but with international travel assistance services “Safety Net” feature** added (see description below). This is the only plan that covers international travel. Cost of premium: $1.17 per person per day, with a minimum premium of $5. Pays up to $10,000 in medical expense. If the claim exceeds that amount, benefits are paid only for covered expense, which is not payable under any other insurance policy or service contract.

Please note: to cover guests at troop meetings please multiply (# of guests) x (# of troop meetings) x ($1.17).

When an injury occurs: The Troop Leader completes the Leader portion (lower half) of Girl Scouts of the USA Insurance Claim Form and gives the entire form to the parent. Treatment must occur within 30 days of the accident date. The parent completes the claimant portion (top half) of the Girl Scouts of the USA Insurance Claim Form, attaches copies of the attending physicians’ treatment form, and forwards the entire form to the Member Care Department, for Girl Scouts of Southern Nevada for validation (extreme lower boxes). Completed claim form MUST be submitted to the council office as soon as possible or within 30 days. Claims submitted after 30 days may not be eligible for processing. Once a claim has been validated it will be forwarded to Mutual of Omaha for processing. Claims will not be processed without council validation. Additional bills received after the initial treatment should be forwarded to the council office as soon as possible. If you have any questions, please contact the Member Care Department at (702) 385-3677.

* Non-duplication Provision: Up to $100 in medical or dental expenses is paid by the insurance company without regard to other insurance. If the claim exceeds that amount, benefits are paid only for covered expense, which is not payable under any other insurance policy or service contract.

** International Travel Assistance Services “Safety Net”: Should a medical or other emergency occur while abroad, the leader is a free telephone call away from mobilizing AXA Assistance resources to provide their hands-on assistance. AXA Assistance Services can be secured in an emergency, 24 hours a day around the globe by making a toll-free or collect telephone call to its services center. This company is strategically located worldwide to intercede locally whenever needed in an emergency. Physicians and nurses working with AXA are available to interact immediately when notified of an emergency, thus ensuring continuous contact between all interested parties, including the treating physician(s), facilities, home physician(s), family members, and the Council.
**Additional Insurance Request Form**

**OPTIONAL PLANS:** Plan 2, Plan 3E, 3P or 3PI coverage is needed for events or activities for longer periods and/or to insure persons who are not registered Girl Scouts.

**PLAN 2:** Accident Insurance for Activities or Events Excluded Under the Basic Plan

**PLAN 3E:** Accident and Sickness Insurance for Activities or Events Excluded Under the Basic Plan

**PLAN 3P:** Accident and Sickness Insurance for Activities or Events Excluded Under the Basic Plan

**PLAN 3PI:** International Travel Plan. Accident and Sickness Insurance for Activities or Events excluded under the Basic Plan

ALL above plans for additional insurance must be purchased for the entire period of the event and for 100% of the participants. When figuring cost, remember to count ALL days of the event, including the date of departure and the date of return.

Additional Plan 2 and Plan 3 insurance are purchased in daily, 24 hour increments. Additional coverage cannot be purchased for half days.

**PLEASE SUBMIT AT LEAST FOUR WEEKS PRIOR TO DEPARTURE DATE**

<table>
<thead>
<tr>
<th></th>
<th>Plan 2</th>
<th>Plan 3E</th>
<th>Plan 3P</th>
<th>Plan 3PI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost</td>
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<td>$0.29</td>
<td>$0.70</td>
<td>$1.17</td>
</tr>
</tbody>
</table>

Departure Date (mm/dd/yy) | Return Date (mm/dd/yy) | Total # of Days | Total # of Participants | Insurance Rate Person/Day | TOTAL AMOUNT DUE

**MINIMUM $5.00 – NO REFUNDS – DO NOT SEND CASH**

Make Check Payable to: **Girl Scouts of Southern Nevada**

Troop #____________________ Leader’s Name____________________ Phone (home)____________________

Leader’s Street Address____________________

City____________________ State_______ Zip____________________ Phone (work)____________________

Email____________________

Trip or Event____________________ Location/Destination____________________

Mail completed form with your check or money order to (no cash) *

Girl Scouts of Southern Nevada
2941 Harris Ave., Las Vegas NV 89101

*Payments can be made over the phone with a Member Care Specialist
How to File a Claim

If you or one of the girls in your troop is injured, simply follow these four easy steps to file a claim:

1. Complete and sign the front of the Claim Form as soon as reasonably possible. Be sure to provide all the information required to expedite processing and to avoid delay. Please note: if a minor, the parent’s signature is required to process the claim.

2. The doctor who treated the injury should complete the Attending Physician’s Statement on the reverse side of the Claim Form. (The Form will not be considered unless both Eyes were treated by a Legally Qualified Physician.) An itemized billing complete with diagnosis, date(s) and procedure code(s) should be submitted for the Attending Physician’s Statement.

3. Keep a copy of the completed claim form for your records.

4. Send the claim form to your council for validation along with any available bills for covered expenses which have been incurred. Claims will not be processed without council signature.

Upon receiving your completed Claim Form, the council will validate it in the space provided and send it to the address below for processing. Benefits will be sent directly to the provider unless otherwise instructed at the time of claim filing.

After the Claim Form and initial bills have been sent to your council, any additional bills should be sent by parent, leader or other responsible person directly to:

United of Omaha
Special Risk Services
P.O. Box 3156
Omaha, Nebraska 68103
In your correspondence to United of Omaha, be sure to indicate the name of your council.

If you or any injured member has a question about the handling of the claim under this coverage, please write to the above address or call 1-800-524-2324. Allow sufficient time for validation, mailing and processing.

Validation, mailing and processing.

To the Girl Scout Leader: Girl Scout programs are designed with a view toward safety. However, when an accident does occur, this basic accident coverage is designed to help meet the costs of accident medical care.

Every registered girl scout and registered adult member in the Girl Scout Movement is automatically covered under the plan . . . and the entire premium cost for this protection is borne by Girl Scouts of the United States of America. It's important to note, however, that it's not the intention of this plan to diminish the need for family health insurance—or to replace the benefits that may be available under a family medical plan. Rather, it's the plan's objective to provide you and the parents of each girl entrusted to your care the assurance that, should the need arise, financial coverage is available to help pay the medical expenses of accidents that occur during normal, supervised activities of the Girl Scout program.

Girl Scout leaders need to be aware of the requirements for council approval of events or special activities apart from normal troop meetings. Additional coverage is needed if activities last more than two consecutive nights, or three consecutive nights if one of the nights is an official federal holiday. Please consult your council well in advance of an event requiring approval.

This brochure contains a complete description of the coverage available under this plan and answers to the questions most frequently asked. This brochure contains information and instructions on how to file claims. Please be sure to read the entire brochure carefully and retain it as a reference.

Girl Scouts of the USA

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SGS19

HERE’S THE PROTECTION TROOP MEMBERS RECEIVE UNDER THIS PLAN*

Covers Every Registered Member

This plan provides basic accident protection for every registered Daisy, Brownie, Junior, Cadette, Senior and Adult troop member. New members are covered upon registration and payment of dues.

Provides Accident Protection for

Every girl and adult member of your troop for any approved, supervised activity of the Girl Scouts, except activities lasting more than two consecutive nights (a third night is an official federal holiday, such as Memorial or Labor Day). Also, costs travel directly to and from the covered activities, with a health maintenance organization, preferred provider organization or prepaid health-care program, for service or treatment performed or supplies furnished.

(NOTE: This provision applies only to accident medical and dental expense benefits. The benefits described below for ambulance service, accidental death and dismemberment and paralysis are chargeable regardless of other insurance.)

Ambulance Expense

Pays up to $3,000 for surface ambulance transportation to a hospital, $5,000 for air ambulance service that in the judgment of the duly authorized medical authority or the senior representative of the camp or activity is necessary to facilitate treatment of Injuries and no other ambulance service is available.

Accidental Death, Dismemberment and Paralysis Benefits

When injuries result in any of the following specific losses within 365 days from the date of the accident, benefits will be paid as follows:

- Loss of Life ...........................................$15,000

- Loss of Both Hands, Both Feet or Both Ears  ..................$20,000

- Loss of One Hand & One Foot ..........................$20,000

- Loss of One Hand & One Eye ..........................$20,000

- Loss of One Foot & One Eye ..........................$20,000

- Loss of One Hand, One Foot or One Eye ..................$10,000

- Loss of Thumb & Index Finger of the Same Hand .............$5,000

(continued)

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SGS19
Loss of sensory or motor function is not payable for paralysis which: (a) is first diagnosed and treated while the registered youth member’s coverage is in force; (b) occurs as a result of your supervised Girl Scout troop or group activity within 24 hours after participation in any activity sponsored, approved and/or supervised by Girl Scouts of the USA; (c) is due to an injury or illness that the registered member has not been medically advised of or received any medical treatment for such heart or circulatory malfunction prior to such troop or group activity.

Benefits Are Not Payable for:
(a) Losses payable under workers’ compensation or employer’s liabilities laws, (b) dental treatment, except for Injuries to sound, natural teeth, (c) Injuries received while in attendance at or participating in activities lasting more than two consecutive nights (three nights, when one of the nights is a federal holiday, such as Memorial or Labor Day). Coverage is automatic for all girls upon registration in the troop. No. Travel to and from troop meetings is covered. 
(b) occurred at an approved and supervised Girl Scout trip or group activity, sponsored, approved and supervised by a Girl Scout Council.

What are examples of events that could last more than two nights and would be excluded under the Basic Plan? When Injuries result in hemiplegia, paraplegia or complete loss of function of both the upper and lower extremities of the body with involvement of one side of the body with involvement of both arms and legs or eyesight or paralysis must be independent of sickness and all other causes.

Is it an activity carried out by girls who are registered members of the Movement under the overall supervision of adults, in keeping with Girl Scout Program Standards. (See the following publications: Blue Book, Safety-Wise and the Handbooks. If more information is needed, ask your council.)

The accident date is the date of the accident, such as Memorial or Labor Day. Coverage is automatic for all girls upon registration in the troop. 
(b) occurred at an approved and supervised Girl Scout trip or group activity, sponsored, approved and supervised by a Girl Scout Council.

Are fund-raising drives and money-earning events covered? To assure that every registered Girl Scout is covered for Injuries to sound, natural teeth, (c) Injuries caused by act of declared war, (d) the cost of eyeglasses or contact lenses, (e) Injuries caused by act of declared war, (f) the professional services which: (a) is first diagnosed and treated while the registered youth member’s coverage is in force; (b) occurs as a result of your supervised Girl Scout troop or group activity within 24 hours after participation in any activity sponsored, approved and/or supervised by Girl Scouts of the USA; (c) is due to an injury or illness that the registered member has not been medically advised of or received any medical treatment for such heart or circulatory malfunction prior to such troop or group activity.

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