Volunteers Insurance Service Association, Inc.
Court Referred Alternative Sentencing Program

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VIS Court Referred Alternative Sentencing Program

In response to the development of work release and alternative-sentencing programs throughout the United States, Volunteers Insurance Service (VIS), working in conjunction with The CIMA Companies, Inc. and QBE Specialty Insurance, has established an accident insurance program for these volunteers.

Because of the nontraditional nature of these volunteers, it was necessary to establish a separate program with these people in mind.

The following is a brief description of the insurance program now available for your court-referred volunteers.

SUMMARY OF COVERAGES

I. Accident Insurance

Excess Accident Medical Coverages

QBE Specialty Insurance is the underwriting company for the accident insurance.

This coverage will pay up to $25,000 for medical treatment, hospitalization and licensed nursing care required as the result of a covered accident. The insurance applies while the volunteer is traveling directly to and from, and while participating in, volunteer-related activities. Initial medical expenses must be incurred within 60 days of the accident. Expenses are then covered for a one-year period following the accident.

Other than X-rays, dental care is covered up to $500 per tooth for accidental injury to sound, natural teeth and repair of dentures. Maximum benefit per accident is $900.

This coverage also provides up to $50.00 for repair or replacement of eyeglass frames and up to $50.00 for repair or replacement of eyeglass prescription lenses damaged as a result of a covered accident.

The maximum payment under this coverage, including dental and eyeglass expenses, is $25,000.

This insurance does not duplicate benefits payable under Medicare or any other valid and collectible insurance coverage.

Additional eligible accident medical expenses are as follows:

In-patient Hospital Services: room and board; hospital miscellaneous charges including X-rays, lab work, physiotherapy, nursing services, and all medically necessary charges other than room and board; ambulance service from the accident to the hospital.

Physician Services: surgery, use of surgical facilities, second opinions, anesthesia and its administration, in-hospital or office visits.

Out-patient Services: emergency room treatment, X-rays and laboratory tests, physiotherapy (acupuncture, microthermy, adjustment, manipulation, diathermy, massage therapy, heat treatment and ultrasonic treatment), certain medical treatment rendered in a convalescent, nursing home or extended care facility.

Medical Equipment, Services and Supplies: prescription drugs; rental of a wheelchair or other medically necessary equipment that has received prior approval by the insurance company.

Accidental Death and Dismemberment Coverage

In addition to the accident medical coverage, LINA will pay the following benefits for death or loss of limb or sight, occurring within one year after a covered accident.

- Loss of life (paid to beneficiary) - $2,500
- Loss of both hands, feet or eyes, or any combination of two thereof (paid to volunteer) - $2,500
- Loss of either foot or either hand, sight of one eye (paid to volunteer) - $1,250
- Loss of thumb and index finger of same hand (paid to volunteer) - $625

Only one amount, the largest to which the volunteer is entitled, is paid for all losses resulting from one accident.

Loss of hand or foot means complete severance through or above the wrist or ankle joint. Loss of sight means total, permanent loss of sight of the eye. The loss of sight must be irrecoverable by natural, surgical or artificial means. Loss of a thumb and index finger means complete severance through or above the metacarpophalangeal joints (the joints between the fingers and the hand).

Severance means the complete separation and dismemberment of the part from the body.

Coverage is effective once premium is paid and the application has been completed, signed and received. Termination of coverage is effective with at least 31 days written notice from the policyholder or failure by the policyholder to pay premiums when due or within the grace period. Your coverage will continue as long as you remain eligible and the policy remains in force.

Exclusions to Accident Insurance

The policy does not cover any loss as a result of:

- Declared or undeclared war or any act of war;
- Hernia of any kind; or any bacterial infections not caused by an accidental cut or wound; any form of sickness or disease;
- An injury caused by flight in an aircraft, except as a fare-paying passenger; spacecraft or any craft designed for navigation beyond the earth's atmosphere; or an ultra light, or caused by hang-gliding, parachuting or bungi-cord jumping;
- An injury or accident occurring while a Volunteer Fireman, Rescue Squad member or sports team member.

Benefits will not be paid for services for treatment rendered by a doctor, nurse or any other person who is employed or retained by the policyholder, the VIS member; or the member's immediate family.

This plan provides Accident insurance only. It pays benefits for bodily injury. It does not provide benefits for sickness. This information is a brief description of important features of the Plan. It is not a contract. Terms and conditions of coverage are set forth on Policy Form Number TL-002790 (VIS) issued in the District of Columbia. This Group Policy is subject to the laws of the state in which it is issued. The availability of this offer may change. Please keep this material as a reference.

How To File a Claim

If a volunteer has an accident which results in bodily injury, he can obtain a claim form from the policyholder organization for which he volunteers. The volunteer should follow the instructions carefully. When the form has been completed, the volunteer should return it to the designated person at the policyholder organization, with any itemized bills. That person will then sign the form and submit it to CIMA, 2750 Killarney Drive, Suite 202, Woodbridge VA 22192.

Other VIS Insurance Programs Available To Your Volunteers and Your Organization

Volunteer Insurance Program -- This program combines accident, personal liability and excess automobile coverage for your traditional (non work-release or court-referred) volunteers.

Work Release Volunteer Insurance Program -- This program is designed to provide accident insurance protection for an organization's work-release program volunteers.

Directors and Officers/Professional Liability Insurance Program -- A comprehensive directors and officers/professional liability (errors and omissions) insurance program for your organization and its directors and officers.

To learn more about either of these programs, call our representative at 800.468.4200.

Disclaimer

This is intended solely to provide a general description and neither intends to nor changes the actual terms of the policies. The insurance coverages apply only to certain occurrences and there are additional exclusions.

Read the policies themselves to determine the full extent and limitations of the coverages provided.

VIS Administrative Guidelines

1. Coverage is available to any volunteer registered on the volunteer organization's Volunteer Roster.
2. The policy year is July 1 to July 1. However, you can apply for insurance for your volunteers on any date. See the application for instructions on how to calculate your premium.
3. All volunteers registered on your Volunteer Roster will be covered regardless of your initial estimated premium.
4. In order to become eligible for the Volunteers Insurance Service insurance plan, an annual VIS membership fee of $135 is required. This is due with your first application for VIS insurance.
5. Before your application will be accepted, a description of your volunteers' duties must be included. The insurance company reserves the right to decline coverage for those volunteer organizations who do not meet their underwriting requirements.
6. Volunteer firemen, rescue squad members and sports team members are not eligible for VIS.
7. Upon acceptance of your application, you will receive your policy and claim forms.
8. The CIMA Companies, Inc. is the administrator of the VIS insurance plan. All questions, correspondence and claims should be addressed to CIMA.