

# Questions and Answers

These Questions and Answers will serve to interpret the insurance for Councils. The questions have been broken down by General Questions, Plan Differences, Covered Activities and AXA Travel Assistance Services. The added notations for the Council which follow the asterisk (\*) contain the rationale for the answers.

## General Questions:

**1. What is meant by an approved, supervised Girl Scout activity?**

- A. It is an activity carried out by registered Members of the Movement, under supervision of adults, in keeping with the **Girl Scout Program Standards and Safety Activity Checkpoints**.

**2. What is the minimum premium per event?**

- A. There is no minimum premium per event. The \$5.00 minimum applies to each online submission of an Enrollment Form. More than one event may be listed on an Enrollment Form.

**3. What is the purpose of the Basic Plan?**

- A. To assure that every registered Girl Scout is automatically covered by accident insurance during normal supervised program activities. Coverage is automatic for all Girl Scout Members and participants.

**4. What are federal holidays recognized by the Basic Plan?**

- A. The Basic Plan currently recognizes the following federal holidays.

New Year's Day (January 1)  
Martin Luther King Day (3rd Monday in January)  
Presidents Day (3rd Monday in February)  
Memorial Day (last Monday in May)  
Independence Day (July 4)  
Labor Day (1st Monday in September)  
Columbus Day (2nd Monday in October)  
Veterans Day (November 11)  
Thanksgiving Day (4th Thursday in November)  
Christmas Day (December 25)

**5. Is a new Member automatically covered under the Basic Plan when she joins Girl Scouts?**

- A. For a new registrant who has met the requirements for membership, including payment of membership dues, insurance coverage becomes effective the date the volunteer receives the dues and appropriate registration paperwork. New Members and late re-registrants joining the group after the group's registration has been sent will be covered effective the date the volunteer receives their registration and membership dues.

**6. Are nonregistered mothers, consultants or other persons assisting the volunteer covered under the Basic Plan?**

- A. No. Only registered Girl Scouts and registered Adult Members and Nonmembers are covered.

\*It is expected that Nonmember parents and others will be involved from time to time in Girl Scout activities just as they usually do in PTAs, community services, school events, etc., in providing transportation, chaperoning, decorating, visiting or just lending a hand. These activities are done without expectation of reimbursement for medical expenses in case of accidental injury.

**7. Are "Tagalongs" (brothers, sisters, friends) covered under the Basic Plan?**

- A. Yes. "Tagalong" means a person who attends an event but is not of an age or skill level to participate.

**8. Are covered medical expenses under the Basic Plan payable regardless of the existence of other health insurance policies?**

- A. The Basic Activity Accident Plan is not intended to diminish the need for or replace family health insurance; however, the Plan does pay for the first \$140 in benefits. When \$140 in benefits has been paid, any subsequent benefits for the same accident will be payable only for covered medical expenses that exceed the limit of benefits available under other forms of insurance or health care programs ... up to the maximum of \$20,000. (This provision applies only to the medical expense benefits. The benefits for accidental loss of life, limb or eyesight are payable regardless of other insurance.)

9. Is it possible to purchase insurance for groups of unregistered participants (including family members) in approved, supervised Girl Scout activities?
- A. Yes, optional coverage is available for such approved Girl Scout activities as nursery units at day camp, a special community group invited to join a Council-sponsored event, boys who are active participants in a co-ed activity.
- \*Optional Plans are available at Council's discretion and at additional costs.
10. When and how can sickness insurance be provided?
- A. Sickness insurance is provided along with accident insurance under one of the Optional Plan 3's, but it is not available for events lasting less than three nights.
11. If a staff Member has an ACCIDENT which occurs in the course of her duties at an event, would Accident and Sickness Insurance cover the medical bills incurred?
- A. Generally no, accidents which occur in the course of employment must be reported under workers' compensation. Workers' compensation provides not only medical benefits, but indemnity for time lost from work, if any. Check your state law. In some states, honorariums to volunteers, room and board, etc., will turn a volunteer into an employee for workers' compensation purposes.
12. If a staff Member becomes SICK, i.e., earache, virus, while at an event, would Accident and Sickness Insurance cover the medical bills incurred?
- A. Yes. If the SICKNESS is contracted and treatment begins while the coverage for the participant is in force, nonoccupational illness is covered by the SICKNESS portion of Accident and Sickness Insurance.
13. Are pre-existing health conditions covered by Accident and Sickness Insurance?
- A. No, only sickness which is contracted and for which treatment begins while the coverage for the participant is in force is covered. Many HMOs, PPOs and other medical plans require prompt notice; don't delay notifying the family's insurance carrier if a pre-existing condition is or might be involved.
14. How can reimbursement be made when payment for treatment was provided, via a credit card, at the time of services rendered?
- A. Reimbursement for eligible expenses under all Plans can be made by submitting a completed Claim Form (M18979), the providers diagnosis and a copy of the bill (charge slip) showing charges incurred for treatment.
15. The doctor treating the participants has prepared one bill for a group of injured people. Is it necessary to complete a separate Claim Form for each individual receiving treatment?
- A. Yes. Even though payment will be made to one doctor or hospital, a Claim Form must be fully completed for each person.
16. A participant decides, while returning from an event, to visit a relative or friend who lives nearby and becomes injured in a bus accident on the way to or while leaving the relative or friend's home. Would the participant's medical bills be covered?
- A. No. Coverage only applies to accidents which occur while traveling directly to and from the covered activity. Side trips or visits are not covered.
17. When counting the number of days of an activity/event on the Enrollment Form, do you include the beginning day and ending day of the event?
- A. Yes. Since coverage for travel directly to and from an activity/event is covered, all days, including days traveled, should be included. For example, a group leaves home Friday afternoon and returns home Tuesday morning. Coverage must be arranged for five calendar days.
18. Who are benefits paid to?
- A. Unless a specific beneficiary designation has been made for this insurance and is on file with the company, the benefit for loss of life and other unpaid accrued benefits will be paid in accordance with the following surviving preference beneficiaries: **(a)** the Insured's spouse; **(b)** the Insured's child or children, jointly; **(c)** the Insured's parents, jointly, or to the surviving parent; **(d)** the Insured's brothers and sisters, jointly; or **(e)** the Insured's estate.

19. For a coverage or claim questions how do we contact United of Omaha?

- A. United of Omaha's toll-free number is:  
1-800-524-2324

20. How are benefits claimed?

- A. To claim benefits, fill out a Claim Form (M18979).  
See Section 6, How to File a Claim.

**Note:** The council will need to review all claim forms and report serious accidents to its liability insurance carrier. Liability policies often provide medical payments. These may be in addition to plan benefits or in lieu of. Check with your agent/broker.

21. How does Plan 3PI differ from Plan 3P?

- A. Plan 3PI provides accident and sickness insurance along with travel assistance services for trips or events which take place outside the USA. Plan 3P provides accident and sickness insurance as described in the Guide in section 3, for trips or events which take place in or out of the USA. However, keep in mind that Travel Assistance Services are not included under Plan 3P. Please note the return transportation and air ambulance expense benefits are provided by the AXA Assistance-USA Travel Assistance Coverage, and are higher than those under Plan 3P.

## Covered Activities:

22. Are fundraising drives, money-earning events and program activities, such as cookie sales, covered?

- A. Yes, they are covered under the Basic Plan, if they are approved and supervised.

23. Is traveling to and from a group meeting or activity covered?

- A. Yes, it is covered under the Basic Plan. The insurance includes travel to and from group meetings or activities, provided it is direct. The insurance does not cover accidents which occur during or after deviation from the direct route to or from the meeting place. For example, a parent picks up a Member(s) from a meeting, then proceeds to the shopping mall before returning home.

24. Are activities engaged in independently, that is, on their own, by one or more Members of the group covered under the Basic Plan?

- A. No. Personal activities engaged in by Members, individually or in groups, on their own are not included within the meaning of "approved, supervised Girl Scout activity."

\*The Basic Plan of Activity Accident Insurance does not cover situations such as: **(a)** several Members who, apart from the Girl Scouts of which they are Members, are also personal friends or classmates and as such go swimming, camping, traveling to a recreation center or elsewhere; **(b)** a mother who is a volunteer who takes her daughter and her daughter's friends, also Girl Scouts, on an outing; **(c)** two or three Girl Scouts of one group who, in the home of one, work on a project toward a badge without adult supervision; **(d)** some or all of the Girl Scouts on the way home after a troop meeting go to the movie or stop in at the mall.

25. If a Member is injured while individually practicing skills for a badge or learning a sport, such as individual roller skating or horseback riding, is she covered under the Basic Plan?

- A. No. These are individual activities conducted outside of the Girl Scout group setting and not under the direct supervision of Girl Scout group leadership.

26. Is coverage provided under the Basic Plan if Members of our group travel outside the United States on a Girl Scout project or activity?

- A. Yes.

27. Does the Basic Plan cover the delivery of Girl Scouting programs outside of the traditional Girl Scout group?

- A. Yes. An example of such a program would be a Special Interest Group, which meets the criteria established for the activity to be considered Girl Scouting.

28. Would coverage be provided under the Basic Plan for medical expenses of a Member who became ill during an approved activity?

- A. No. Sickness is not covered; only medical expense arising out of an accident during an approved, supervised activity is covered. However, illness caused by an accident, such as a poisonous snake or insect bite, would be covered.

29. A participant falls while hiking along a trail during a Girl Scout approved event and hits her face on a rock breaking off two front teeth. Is the repair of the damaged teeth covered by this insurance?

A. Yes. Treatment received from a legally qualified dentist or surgeon for injuries to sound, natural teeth as a result of an ACCIDENT are covered. Coverage is only for such treatment received within the 52-week period immediately following the date of the accident unless, within that period, the dentist certifies that such dental treatment must be deferred. The estimated cost of the deferred treatment would be covered, but not to exceed the \$5,000 maximum deferred dental benefit for each accident.

30. If a Member loses a filling or breaks a false tooth, a bridge or a brace, would the dental work be covered by Accident and Sickness Insurance?

A. No. Only dental treatment to sound, natural teeth damaged as a result of an accident is covered by the policy.

31. Suppose a group of campers, upon leaving camp and returning home, become ill as the result of food poisoning contracted while attending the event, would this be covered by Accident and Sickness Insurance?

A. Yes, if it can be shown that the group became ill due to food poisoning contracted during participation in the activity/event covered by Accident and Sickness Insurance.

32. Suppose an outside group (Nonmembers) uses Council property for an activity which is under the supervision of the Girl Scout Council, is it possible to arrange insurance under any of the Optional Plans of insurance?

A. Yes. The Optional Plan coverage and rates were developed on the basis of Girl Scout managed experience only. The Insurance Company relies on Girl Scout supervision and approval for all events and especially the adherence to health and safety standards.

33. When may Plan 3P be used for family camping?

A. If the program is planned and managed by Girl Scout staff (paid or volunteer) in accordance with Girl Scout Program Standards and has the approval of the Council, Plan 3P may be used. Family camping which encompasses structured Girl Scout programming — not just allowing families to camp on Girl Scout property — may be covered.

**Note:** Providing food and shelter only is not sufficient to allow for Plan 3P coverage.

### AXA Travel Assistance Service:

34. What are the additional AXA Travel Assistance Service benefits provided under Plan 3PI?

A. Pre-Trip Services, Travel Assistance Services, Technical Assistance Services and Medical Assistance Services. Medical Evacuation (which includes but is not limited to Return Transportation and Air Ambulance Services) and Repatriation services are payable up to a combined single limit of \$50,000. All services are subject to the terms and conditions of a service agreement with AXA Assistance-USA. Services must be provided by AXA Assistance-USA. No claims for reimbursement will be accepted.

35. Does a Claim Form have to be completed and sent to the travel assistance service company after using any of their services?

A. No. Claim Forms are not required or submitted to AXA Assistance-USA.

36. For a coverage or claim question how do we contact AXA Assistance-USA?

A. AXA Assistance-USA can be reached at either of the following numbers:

When traveling within the U.S. call Toll Free:

**1-800-856-9947**

When traveling outside the U.S. call Collect or Direct:

**1-312-935-3658**

# Definitions

“**Company**” means United of Omaha Life Insurance Company.

“**Heart or Circulatory Malfunction**” means disease or illness of the heart or circulatory system which: **(a)** is first diagnosed and treated while the registered participants coverage is in force; **(b)** occurred at an approved and supervised Girl Scout activity within 24 hours after participation; and **(c)** the registered participant has not been medically advised of or received any medical treatment for such heart or circulatory malfunction prior to such group activity.

“**Hemiplegia**” means complete loss of function of one side of the body with involvement of the arm and leg.

“**Hospital**” means a place licensed as a hospital (if licensing is required by law), and which has a graduate nurse always on duty, and a laboratory and an operating room (both on the premises) where major surgical operations are performed by persons legally qualified to do so. In no event, however, will the term “hospital” mean a hospital or an institution or part of such hospital or institution which is licensed as or used principally as a clinic, convalescent home, rest home, nursing home or home for the aged, or treatment center for drug addicts or alcoholics.

“**Injuries**” means accidental bodily injuries received by you while this policy is in force which result independently of sickness and all other causes in: **(a)** loss of life, limb or sight, paraplegia, hemiplegia or quadriplegia; and/or **(b)** expense incurred for hospital and professional services specified in this policy.

“**Irreversible Coma**” means: **(a)** state of unconsciousness in which there is a cessation of activity in the central nervous system as demonstrated by an electroencephalogram (using criteria established by the American Electroencephalography Society); and **(b)** a diagnosis of brain death by the attending Legally Qualified Physician.

“**Legally Qualified Physician**” means a physician, other than the Insured, who is practicing within the scope of his or her license and is recognized as a physician in the state where the services are rendered.

“**Loss of Hand or Hands or Foot or Feet**” means severance at or above the wrist joint or ankle joint, respectively.

“**Loss of Arm or Arms or Leg or Legs**” means severance at or above the elbow joint or knee joint, respectively.

“**Loss of Eye or Eyes**” means the total, uncorrectable and irrecoverable loss of the entire sight thereof.

“**Loss of Thumb and Index Finger**” means severance of at least one entire phalanx from each digit of the same hand.

A “**Medically Necessary**” service or supply means one which: **(a)** is recommended by the attending Legally Qualified Physician; **(b)** is appropriate and consistent with the diagnosis in accord with accepted standards of community practice; and **(c)** could not have been omitted without adversely affecting the Insured’s condition or the quality of medical care.

“**Nonduplication Amount**” is the amount that will be paid under the Medical Expense for an accident or sickness, then any subsequent benefits for the same accident or sickness will be paid only for expenses incurred which is not compensable under any other insurance policy or service contract; or expense incurred for charges not covered under a contract with a health maintenance organization, preferred provider organization or prepaid health care program, for service or treatment performed or supplies furnished.

“**Nonmember**” means any person invited to attend or participate in a Girl Scout approved/supervised event.

“**Paraplegia**” means complete loss of function of the lower extremities of the body with involvement of both legs.

“**Quadriplegia**” means complete loss of function of both the upper and lower extremities of the body with involvement of both arms and both legs.

# Terms

Some of the terms used in this Guide are defined in the applicable contracts, insurance law and usage, and case law. The following is designed merely to assist users of the Guide as they administer the applications and claims.

**Environmental Educational Camping** — This includes use of Girl Scout facilities by Nonmembers, and can be insured IF the actual management of activity is by Girl Scout staff/volunteers in conformance with Girl Scout Program Standards. Such groups may include school classes, members of other informal educational groups such as Boy Scouts, and community or religiously funded organizations.

**Family Camping** — Girl Scout property may be made available for Members and their families for camping. If the Council provides activities for part of the period, and actively manages the event, then family camping events can be insured. If the Council merely acts as a “campground” where families do as they desire (whether or not the Council supplies the meals), then the event is not insurable under the Plans in this Guide.

**Girl Scout Program Standards** — This term is meant to include applicable portions of **The Blue Book**, **Girl Scout Safety Standards**, **Volunteer Essentials and Safety Activity Checkpoints** as well as related GSUSA materials.

**Member** — A currently registered Member of the Girl Scouts of the USA. This means that visiting Girl Scouts/Guides from other organizations are not covered as “Members,” but can be as “Nonmembers.”

**Participants** — This includes adults, minors, Members and Nonmembers who participate in an event. For example, at an enrollment event, it would include current Members, the volunteers and any staff that will be attending and managing the activities designed especially for the potential enrollees, their parents, the

children placed in a Supplemental Supervised Unit, and the supervisor(s) of that unit. As always, it would not include “Tagalongs.” (See below.)

**Staff** — This includes both volunteers and employees. The definition focuses on the role of the person, not whether or not they are “paid” or are statutory employees under various laws.

**Supplemental Supervised Unit** — This may be called by many names. Some common ones include “boys’ unit,” and “pixie unit.” It is the children who would be “Tagalongs,” except for the fact that they are kept under the continuous supervision of an adult while a Girl Scouting activity takes place for Members. The reason they are insurable is that they are continuously supervised. In resident camping there may be a counselor assigned specifically to supervise the children of staff who are not campers. In the troop/group setting, it may be siblings who are kept together away from the Girl Scout programming and supervised by an adult: Member or Nonmember, or a properly trained and adult-supervised older Girl Scout.

**Tagalong** — Tagalongs are siblings and friends who come with parents or guardians to a Girl Scout event.