

was covered under a prior qualifying insurance program for six consecutive months. Prior qualifying service of less than six months will be credited toward satisfying the preexisting condition limitation. This waiver of the preexisting condition limitation will be effective provided the Insured becomes eligible and applies for coverage under the Policy within 90 days of the termination of his or her prior coverage.

Exclusions

The Policy does not cover Loss nor provide benefits for:

1. Preventive medicines, serums or vaccines of any kind; routine physical or other examinations where there are no objective indications of impairment of normal health; or well baby care, except as shown in the schedule of benefits.
2. Dental treatment, except as specified for accidental Injury to Sound, Natural Teeth and as shown in the Schedule of Benefits.
3. Services or supplies in connection with eye examinations, eyeglasses or contact lenses or hearing aids, except as shown in the Benefit Schedule.
4. Temporomandibular Joint disorder, unless shown in the Benefit Schedule.
5. Cosmetic surgery or treatment for congenital anomalies, except for reconstructive surgery as the result of a Covered Injury or Sickness. Correction of a deviated nasal septum is considered cosmetic surgery unless it results from a Covered Injury and is necessary for its treatment.
6. Expenses covered under any Workers' Compensation, occupational benefits plan, mandatory automobile no-fault plan, public assistance program or government plan, except Medicaid.
7. Treatment, services, supplies or facilities in a Hospital owned or operated by the Veterans Administration or a national government or any of its agencies, except when a charge is made which the Insured Person is required to pay.
8. Expenses incurred after: the date insurance terminates as to the Insured Person; the Aggregate Lifetime Maximum Benefit for each Covered Injury or Sickness has been attained; or the end of the Benefit Period specified in the Benefit Schedule.
9. Elective surgery or treatment.

10. Loss resulting from the Insured Person's participation in a riot or felony.
11. Diagnostic or surgical procedures in connection with infertility unless such infertility is a result of a Covered Injury or Sickness.
12. Any expenses in excess of Usual and Customary charges.
13. Treatment of nervous or mental disorder or treatment of alcoholism or drug addiction except as provided for in the Benefit Schedule.
14. Services or supplies not necessary for the medical care of the Insured Person's Injury or Sickness.
15. Charges of an institution, health service or infirmary for whose services payment is not required in the absence of insurance.

Claim Procedure

In the event of Accident or Sickness the student should:

1. Consult a doctor and follow his advice.
2. Complete and submit a claim form. Claim forms can be obtained from the Dean of Students' Office at Eastern Maine Community College, or on-line from Cross Insurance at:

www.crossagency.com/emcc

Submit the completed claim form, together with copies of itemized bills and your other insurance carrier's Explanation of Benefits, within 90 days after first treatment to Commercial Travelers. (The address is on the claim form.)

3. After the first \$100 of eligible expenses, coverage is excess to all other insurance. Claims must be filed with your other insurance carrier(s) prior to filing under this Plan.

How to File an Appeal

Once a claim is processed and upon receipt of an Explanation of Benefits (EOB), an insured student who disagrees with how a claim was processed may appeal that decision. The student must request an appeal in writing within 60 days of the date appearing on the EOB. The appeal request must include why they disagree with the way the claim was processed. The request must include any additional information they feel supports their request for appeal, e.g. medical records, physician records, etc. Please submit all appeal requests to the Claims Administrator at the address listed on the next panel.

Underwritten and Claims Paid By:

Commercial Travelers

Mutual Insurance Company

70 Genesee Street • Utica, NY 13502
1-800-756-3702

as policy form # SHME-01

**For a copy of the Company's
privacy notice you may:**

go to

www.commercialtravelers.com/privacy.html

or

**Request one from the Servicing Agent,
Cross Insurance**

or

Request one from:

Commercial Travelers Mutual Insurance
Company

c/o Privacy Officer

70 Genesee Street • Utica, NY 13502

**(Please indicate the school you attend
with your written request.)**

Serviced By:

Cross Insurance

217 Main Street, PO Box 3028

Lewiston, ME 04243-3028

(207) 783-8591 or 1-800-537-6444

Web site: <http://www.crossagency.com>

**Representations of this plan
must be approved by the Company.**

Note: The time you were covered under this plan may count as creditable coverage under State and Federal Law if you leave this plan and go to an employer's plan within 63 days thereafter. You are eligible to receive a certification from the Company regarding the periods you were covered. Please contact Cross Insurance if you need such certification.

This is not the Policy. Rather, it is a brief description of the benefits and other provisions of the Policy. The Policy is governed by the laws and regulations of the state in which it is issued and is subject to any necessary State approvals. Any provisions of the Policy, as described in this brochure, that may be in conflict with the laws of the state where the school is located will be administered to conform with the requirements of that state's laws, including those relating to mandated benefits.

Eastern Maine Community College is an equal opportunity/affirmative action institution and employer. For more information, please call 207-974-4633.

EASTERN MAINE COMMUNITY COLLEGE

2007–2008

Student Accident and Sickness Insurance

Policy #: 2007J3A18

**EASTERN MAINE
COMMUNITY COLLEGE**
Bangor, Maine

07-J3A18(Bro.)

TEMPORARY ID CARD

Name of Insured

EASTERN MAINE COMMUNITY COLLEGE

POLICY# 2007J3A18

Claims to: **Commercial Travelers**

70 Genesee St.

Utica, NY 13502

(800) 756-3702

Possession of this card does not guarantee eligibility.

Eastern Maine Community College 2007–2008

Student Accident and Sickness Insurance Plan

Eastern Maine Community College has always been vitally concerned with the promotion of good health for its students. Therefore, we are pleased to announce the availability of our Student Accident and Sickness Insurance Plan. This plan will help provide benefits for covered accidents or sickness requiring medical treatment and is available to all students taking credit courses on or off campus. Students carrying more than six credit hours will be automatically charged for this insurance. Students carrying six or fewer credit hours must sign up for the insurance in the Student Accounts Office at Eastern Maine Community College.

The student who has no other health insurance coverage will benefit most from this plan. In addition, for those with other insurance, this plan will ease the costs of out-of-pocket expenses and deductibles. Other insurance plans must be used to cover expenses before this plan's benefits can be considered.

Students enrolled in this insurance plan will be covered 24 hours a day. Coverage begins on September 1, 2007 or upon arrival for duly authorized class activity and ends on September 1, 2008. Athletes and Resident Assistants who arrive on campus early for the Fall semester will have their coverage start earlier at the discretion of the College.

The annual premium for this insurance is \$310. The premium will either be included in your tuition bill or you may enroll by sending \$310 to the EMCC Student Accounts Office. Students enrolling for the second semester only will pay \$208.

Once enrolled, a student may not cancel the insurance. There are no refunds. Coverage continues until the Policy expires.

To Waive Insurance:

Students who choose not to enroll need to complete the waiver form on studentOne (www.emcc.edu) no later than September 14, 2007 for the Fall semester or February 1, 2008 for Spring semester. No waiver requests will be accepted after these dates.

PLEASE READ THE FOLLOWING PAGES CAREFULLY!

Eastern Maine Community College offers to all of its students outpatient health services through Eastern Maine Medical Center for Family Medicine, located at 895 Union Street, Suite 12, in Bangor. These services are free of charge to those students who set up their appointments through the Dean of Students' Office, located in the Enrollment Center in Katahdin Hall. *Appointments are mandatory.* Charges will be made for lab tests and x-rays. Students who are enrolled in the Student Accident and Sickness Insurance Plan may submit medical claims to the Dean of Students' Office for these lab tests and x-rays.

THIS PLAN WILL PAY UP TO \$5,000 IN COVERED MEDICAL EXPENSE PER CONDITION

BASIC ACCIDENT & SICKNESS BENEFITS

The following benefits are provided for incurred eligible medical expenses up to \$1,000 per covered accident or sickness when eligible medical expenses are incurred as an inpatient or outpatient, as a result of a covered accident or sickness, until the termination date, or any extension of benefits of the Policy. The first \$100 of covered expense incurred will be paid regardless of any other insurance. If expenses exceed \$100, the claim will then be processed on an excess basis, if other insurance or medical service plans are involved.

Benefits	For Accidents	For Sickness
Hospital Room & Board	80% of U&C* up to Semi-private Room Rate	70% of U&C, up to \$100 per day
Miscellaneous Inpatient Hospital Expense including anesthesia, use of operating room, nurse services of an LPN or RN, laboratory tests, X-ray examinations, prescription drugs and medications, casts & temporary surgical appliances	80% of U&C	70% of U&C up to \$500
Surgical Expense (Inpatient or Outpatient) Anesthetist	80% of U&C up to \$500 25% of Surgery Allowance	70% of U&C up to \$500 25% of Surgery Allowance
Miscellaneous Outpatient Expense (Hospital and non-hospital) including diagnostic X-rays, laboratory tests, and services & supplies prescribed by the attending physician	80% of U&C	70% of U&C up to \$500
In-Hospital Physician's Fees	80% of U&C	\$20/visit; one visit per day; \$100 max
Out-of-Hospital Physician's Fees**	80% of U&C	70% of U&C up to \$500
Dental Treatment	80% of U&C	Up to \$100 per tooth for the removal of wisdom teeth \$50 max per sickness
Ambulance Expense for Emergency Transportation	80% of U&C	
Mental & Nervous Disorders		
Mental Health Care		
Outpatient***	N/A	70% of U&C up to \$1,500
Inpatient	N/A	Same as any other Sickness
Alcohol & Drug Dependency		
Outpatient***	N/A	70% of U&C up to \$1,500
Inpatient (Residential Treatment)	N/A	Same as any other Sickness
Maternity	N/A	70% of U&C up to \$150
Prescription Drugs	70% of U&C up to \$150	
Accidental Death & Dismemberment		
Accidental Death	\$1,000	N/A
Double Dismemberment	\$1,000	N/A
Single Dismemberment (Arm, leg or eye)	\$500	N/A

SUPPLEMENTAL EXPENSE BENEFIT

After incurring \$1,000 in expenses for a covered accident or a covered sickness which are payable under the Basic Medical Expense Benefit section above, eligible expenses in excess of the \$1,000 are payable at 80% of the usual and customary charges up to a maximum of \$4,000 in additional benefits after a \$100 deductible is applied per accident or sickness. This benefit is payable only after other collectible insurance has paid to its limit. Expenses must be incurred during the policy term. Outpatient Mental Health Care and Alcohol & Drug Dependency Benefits are not covered under the Supplemental Expense Benefit, except Severe Mental Illness as defined in the Policy.

* U&C means Usual and Customary

** Routine Physical Examinations are covered at 100% of U&C, not to exceed \$200. The benefit includes pre-sports physicals, eye exams and depression screening when referred by an EMCC counselor.

*** Outpatient Mental Health Care and Outpatient Alcohol & Drug Dependency benefits are covered under the Basic Benefits of the Policy up to \$1,500 as provided by the benefits mandated by the State of Maine.

Coverage for Mandated Benefits

Your Student Accident and Sickness Insurance Plan includes, but is not limited to, benefits for the following coverages as mandated by the state of Maine: Home Health Care Expense; Hospice; Treatment of Inborn Error of Metabolism; Diabetic Supplies and Education; Prosthetic Devices; Treatment of Mental and Nervous Conditions including Severe Mental Illness; Alcohol and Drug Dependency; Maternity Including Newborn Coverage; Dental Anesthesia and facility charges for certain individuals; Prescription Contraceptives and Outpatient Contraceptive Services and Cancer Screening Tests, including Mammograms (annually after age 40), Pap Smears, and Prostate Cancer Screening; and Coverage for Breast Cancer Treatment. See the Policy on file at the College for benefit amounts if you need to file a claim under one of these benefits.

Extension of Benefits

The benefits under the Policy terminate on September 1, 2008; however if an Insured Person is hospitalized on the date his or her insurance terminates, benefits will continue to be paid until completion of that hospital confinement, not to exceed 31 days from such termination date or the maximum Policy benefits, whichever occurs first. **Please be sure that you purchase new insurance coverage upon termination so you don't have a break in coverage.**

Limitations and Reductions

Non-duplication of Benefits Provision: After the first \$100 of eligible expense, the Policy will not duplicate benefits for expense covered by any Other Valid and Collectible medical, health or accident insurance or prepayment plan. Benefits payable under the Policy will be excess and secondary to such other coverage.

If the Insured Person is insured under any other valid and collectible insurance or plan which is also excess to other coverage, we will pay a maximum of 50% of the benefits otherwise payable.

Preexisting Condition Limitation: Benefits are payable for expenses incurred as the result of a preexisting condition after the first six months following the effective date of the Insured's coverage.

However, this limitation will not apply if, during the period immediately preceding the effective date of coverage under this plan, the Insured