

Implementation Management Guidelines on Group Insurance for TKU Students

Secretariat Regulation No. 1080000008 (6/11/2019)

1. Purpose

These guidelines were formulated to provide TKU students who participate in TKU's group insurance plan (including deferred students who pay separate group insurance premiums) with compensation in the event of illness or accidental injury leading to death, disability, or injury requiring hospitalization.

2. Eligible Participants

All currently enrolled TKU students (including intern teachers and intern students) and deferred students currently paying other group insurance premiums may be covered under this plan.

3. The Administering Office / Section:

The Guidance Section, Office of Student Affairs.

4. The Scope of Student Group Insurance

- a) TKU first seeks an external organization to handle student insurance by soliciting tenders from insurance companies. The President of TKU or a representative assigned by the president serves as the "policy holder"; participating TKU students are the "insured"; and the legal representative or family member named in the student's enrollment data is the "beneficiary".
- b) Insured students who, in the period covered under the insurance contract, become ill or are accidentally injured, leading to death, disability, or injury requiring hospitalization, can apply for compensation in accordance with the contract. Categories of compensation are listed as follows:
 - i) Death benefits
 - ii) Specified accidental death
 - iii) Disability benefits and lifestyle subsidies (paid in accordance with the insurance company's regulations on levels of disability)
 - iv) Payments for severe burn injuries
 - v) Payments for surgical procedures
 - vi) Payments for medical fees while hospitalized.
 - vii) Accidental injury outpatient services (including large-scale food poisoning on campus)
 - viii) Payments for cancer

- ix) Specialized subsidies for operations
 - x) Others (costs of medicine, X-ray tests, and bone fractures).
- c) All members who are hospitalized for medical treatment may apply for compensation provided that the hospital they stay at is a Medical Organization covered under National Health Insurance (NHI) and that they provide a diagnostic treatment report.
- d) The period of coverage for this insurance is one year, from 12:00 am, August 1, to 12:00 am, July 31, the following year.
- i) Those who pay the insurance premium at a date later than August 1 will nonetheless be covered from August 1.
 - ii) Coverage for graduating students will terminate on July 31.
 - iii) Students who transfer to another university will not receive a refund on the insurance premium. The insurance contract will continue to have effect and the policy holder will inform the insurance provider of the change.
 - iv) Students who defer studies will continue to be covered under the insurance contract. When the period of deferment ends and if the participant loses their status as a TKU student, the policy holder will inform the insurance provider.
 - v) If a participant loses student status, their insurance coverage will be terminated as of the beginning of the following month. In this situation, the insurance provider should refund the participant a proportion of the paid premium, taking into account the number of months remaining.

5. Taking Out Insurance

- a) This insurance is not mandatory, but is recommended for all TKU students (including intern teachers and intern students). Students who wish to participate in the student group insurance plan must pay two insurance premiums per year: once at the beginning (within one month of registering for study) of each semester.
- b) Students who decide not to take part in the student group insurance scheme will not be entitled to Ministry of Education subsidies. Moreover, families of such students must sign a written letter of agreement. If the student is of legal age, or not of legal age but already married, the agreement should be signed by the students themselves. In such cases, TKU will send a written letter to the student's family, informing them of the student's decision not to take part. For students who opt not to take part, the procedure for withdrawing from the scheme and collecting refunds is outlined to follow:

- i) In the two weeks before the start of the semester, such students should submit a “Letter of Notice for Students Not Participating in the Student Group Insurance Plan”, along with proof of payment of the first insurance premium to the Guidance Section, Office of Student Affairs.
 - ii) After checking that the student information provided contains no errors, the Guidance Section will issue a refund slip and proceed to carry out the refund process.
- c) Within one month of student registration and the beginning of a new semester, the TKU Guidance Section should handle the process of taking out insurance with the selected insurance provider. This process involves the following steps:
- i) First, the Guidance Section must deduct the number of non-participating students from the total number of registered students (with figures provided by the Office of Academic Affairs), and thus obtain the total number of participating students.
 - ii) It then reviews documents submitted by applying students. According to regulations on related government subsidies, certain groups of people may submit the “Application Form for Exemption of Payment of Student Group Insurance Premiums”. These people include:
 - Students exempt from paying miscellaneous student fees (students from low income households; students suffering from severe or extremely severe physical or intellectual disability; or students whose parents suffer from severe or extremely severe physical or intellectual disabilities).
 - Students of aboriginal descent.
 - iii) The Section then calculates the total number of participating students, total premiums to be paid and total amount of process and handling fees to be collected; provides a report on the amount of approved subsidies to be offered; and renders payment to the insurance provider based on the calculated total of participating students’ insurance premiums.
 - iv) It then sends a letter to the insurance provider, attached with all related statistical data.

6. Joining or Exiting the Plan

- a) If a participant loses his / her status as a student, the Guidance Section will prepare a letter – comprising the student’s name, grade, and date of exit from the plan – and, after calculating the correct amount to be refunded, will provide a refund to the student and send the letter to the insurance provider, so

as to obtain the refund from the insurance provider.

- b) Students who wish to join the plan halfway through the semester must submit an application to the Guidance Section within the stipulated time frame. After calculating the cost of the insurance premium that must be paid, TKU will issue the applicant with a “payment notification”, which the student must take to the TKU Cashier Section and settle in full. TKU will then send a letter to the insurance provider, comprising the student’s details – name, grade, and date of joining – along with the rendered premium. The insurance provider will then process the application.

7. Applying for Compensation

- a) Students who fall ill or are hospitalized due to accidental injury may apply for compensation. To do so, they must go to the TKU Guidance Section, and take with them a written letter of diagnosis and other related documents of proof. At the Guidance Section, they should submit these forms as well as a “Compensation Application Form” provided by the contracted insurance company. The types of compensation available and the required documentary proof for each are listed below:

- i) The “Compensation Application Form” is available from the following places:

Tamsui Campus: TKU Guidance Section, Business and Management Building

Taipei Campus: Office of the Business and Management Joint EMBA Program

Lanyang Campus: Joint Administrative Office

Or, download an application form from the TKU Guidance Section website.

- ii) Those collecting death benefits must supply an autopsy report or a report on the diagnosis of death, as well as their household registration transcript.
 - iii) Those collecting death benefits for a missing person must provide documented proof of the person’s status as missing.
 - iv) Those collecting disabled benefits must submit a written diagnosis of disablement issued by a doctor in a medical organization recognized by the National Health Insurance System.
 - v) Those collecting compensation for medical fees must provide written proof of the medical diagnosis and a receipt of medical fees (original or copy).
 - vi) Documentary proof of the participant’s student status (eg. Student card).
- b) After checking the submitted documents, including the “Compensation Application Form” and other documentary forms of proof, to ensure there are

no errors, the Guidance Section then files the application with the insurance provider on the student's behalf.

- c) The deadline for applying for compensation is two years from the date on which the illness or accident occurred.
- d) When the beneficiary applies for insurance benefits, the insurance provider has the right to conduct a medical examination of the insured and to request the beneficiary to provide proof of identification.

8. Regulations Governing the Provision of Compensation

- a) Time restraints on payment: If the insured falls ill or is injured in a sudden, externally-occurring accident during the period of coverage, and then – 180 days after the coverage expires – he or she still requires medical treatment, dies, or becomes disabled, the insurance provider will still confer payment.
- b) Maximum Compensation Payouts
 - i) Payout for regular death: Maximum of NT \$1 million
 - ii) Specified accidental death: Maximum of NT \$2 million. This includes:
 - Death due to a traffic accident occurring on a school bus commissioned (with a signed contract) by TKU.
 - Death due to an accident occurring at a TKU approved student club activity, an off-campus field trip, or an on or off-campus sports competition.
 - iii) Participants who meet government subsidy criteria for exemption of payment of insurance premiums, and who, after falling ill or being hospitalized due to injury, undergo major surgery within one year of being hospitalized, may apply for an extra subsidy in addition to the initial insurance payout (limited to those listed in the regulations of the insurance slip). To apply for this, they must submit their official medical fees to the insurance provider. The maximum additional subsidy offered is NT \$120,000.
- c) Circumstances in which payouts will be refused:
 - i) Under the following circumstances, the insurance provider will not provide payment of benefits for death or disability, or lifestyle subsidies for the disabled:
 - The beneficiary murders the insured. However, in this instance, other beneficiaries may apply for the full amount of death benefits.
 - The insured commits suicide or intentionally harms himself / herself, leading to disability. However, this restriction does not apply to participants who have been in the plan for at least 2 years.
 - The insured person commits a crime and is sentenced to death, escapes arrest, or escapes from jail, leading to death or disability.

- ii) If the insured person commits any of the following acts, which result in illness, injury leading to hospitalization, the use of outpatient services, or the need for surgical treatment, the insurance provider will not provide any form of payment:
 - Intentional acts of self harm (including suicide or attempted suicide) committed by the insured person.
 - Criminal acts committed by the insured person.
 - The insured person takes illegal substances or narcotic drugs.
- iii) If the insured person is hospitalized to undergo the following procedures, the insurance provider will not offer any form of compensation or payment:
 - Operations, plastic surgery, or cosmetic surgery for natural deformities. However, if the insured person is accidentally injured, and requires cosmetic surgery as a result, he / she may apply for compensation.
 - Dental surgery. However, if the dental surgery required is the result of an accidental injury, the insured person may apply for compensation.
 - The insertion or use of false teeth, prosthetic limbs, artificial eyes, spectacles, hearing aids and any other supplementary devices. However, if an accidental injury leads to the need for a supplementary device, the insurance provider will subsidize the cost of the device a total of one time.
 - Medical examinations, recuperation, and convalescence.
 - Abortion or childbirth. However, if this is the result of an unforeseen trauma or if, out of medical necessity, an abortion is required, the insured person may apply for corresponding payments.
 - Infertility treatment, artificial insemination, or surgery for contraceptive purposes, such as a vasectomy.

9. The Selection of an Insurance Provider

The selection of an insurance provider conference will be take place every two years, at the beginning of May in the second year. Information on student group insurance, including payment items and amounts, is sent to the TKU Purchasing Committee. After holding an open ballot, the committee selects an insurance provider and a contract of service is signed.

- 10. This set of guidelines will take effect on the date of its publication after being passed in a student affairs meeting and approved by the TKU President. The same applies to any later amendments made.