

Here’s a jargon-free summary of your coverage. So you can spend less time reading and more time shredding.

Eligibility

Pass holders who have paid their premium for Spot Injury Insurance. All participants must be US-Residents.

Covered Activites

Those outlined by your pass type.

Policy Details

ACCIDENT

A sudden unexpected and unintended event, independent of sickness and all other causes.

TREATMENT TIMEFRAME

Benefits paid up to 52 weeks from the date of the accident.

ACCIDENT MEDICAL EXPENSE (AME):

Full excess medical expense. First covered expenses must be incurred within 30 days of Covered Accident.

ACCIDENTAL DEATH & DISMEMBERMENT (AD&D):

Coverage is for death or severe dismemberment as the result of an accident while participating in a covered activity. First covered expenses must be incurred within 365 of Covered Accident.

HEART OR CIRCULATORY MALFUNCTION:

Coverage is for injury or death that is the result of heart failure while participating in a covered activity. No coverage for pre-existing heart conditions. First symptoms must be medically diagnosed within 72 hours of participation.

Policy Benefits

COVERAGE	AMOUNT
Accident Medical Expense	\$25,000
Accidental Death or Dismemberment	\$10,000
Heart or Circulatory Malfunction	\$10,000

Policy Exclusions

We will not pay benefits for a loss due to or expenses incurred for:

1. This coverage will not be in effect during any sports activity unless it is sponsored, organized, supervised, scheduled or otherwise provided by the Sports Organization named in the Schedule of Benefits.
2. Heart and Circulatory accidental malfunction benefits will not be payable if, in the 12 months immediately preceding the Covered Accident, the Covered Person was medically diagnosed as having, or received treatment for:
 - a. A heart or circulatory malfunction; or
 - b. hypertension, angina, or other heart or circulatory condition.
3. Any service, treatment, or supply that is not considered Appropriate Treatment as defined in this Policy.
4. Expenses Incurred after the end of the Benefit Period, even if Incurred for continuing services or treatment of a Covered Injury.
5. Cosmetic surgery or care, or treatment solely for cosmetic purposes, or complications therefrom. This exclusion does not apply to:
 - a. cosmetic surgery resulting from a Covered Accident, if initial treatment of the Covered Person is begun within 12 months of the date of the Covered Accident;
 - b. reconstruction incidental to or following surgery resulting from a Covered Accident;
 - c. any unplanned and unintended adverse consequences that may result during the treatment of a Covered Accident.

Policy Exclusions (Continued)

6. Any elective or routine treatment, surgery, health treatment, or examination, including any service, treatment or supplies that: (a) are deemed to be experimental or investigational; and (b) are not recognized and generally accepted medical practice in the United States.
7. Examination or prescriptions for, or purchase, repair or replacement of, eyeglasses, contact lenses, hearing aids, wheelchairs, braces, appliances, orthopedic braces, or orthotic devices.
8. Treatment in any Veteran's Administration, Federal, or state facility, unless there is a legal obligation to pay.
9. Services or treatment provided by persons who do not normally charge for their services, unless there is a legal obligation to pay.
10. Rest cures or custodial care.
11. Repair or replacement of existing dentures, partial dentures, braces or bridgework.
12. Personal services such as television and telephone or transportation.
13. Orthopedic appliances are used mainly to protect an injury so that the Covered Person can take part in recreational sports.
14. Expenses payable by any automobile insurance policy without regard to fault.
15. Services or treatment provided by an infirmary operated by the Policyholder.
16. Treatment of an injury resulting from a condition that the Covered Person knew existed on the date of a Covered Accident unless we have received a written medical release from his Physician.
17. Intentionally self-inflicted injury, suicide or any attempt thereat while sane;
18. commission or attempt to commit a felony or an assault;
19. commission of or active participation in a riot or insurrection;
20. parachuting, mountaineering, professional racing, participation in semi-professional and professional sports;
21. declared or undeclared War or act of War;
22. flight in, boarding or alighting from an Aircraft or any craft designed to fly above the Earth's surface: being flown by the Covered Person or in which the Covered Person is a member of the crew;
23. travel in or on any on-road and off-road motorized vehicle that does not require licensing as a motor vehicle; an Accident if the Covered Person is the operator of a motor vehicle and does not possess a valid motor vehicle operator's license, unless:
 - a. the Covered Person holds a valid learners permit and
 - b. the Covered Person is receiving instruction from a Driver's Education Instructor;
25. Sickness, disease, bodily or mental infirmity, bacterial or viral infection or medical or surgical treatment thereof, except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food;
26. the Covered Person being legally intoxicated as determined according to the laws of the jurisdiction in which the Covered Accident occurred;
27. voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a Physician and taken in accordance with the prescribed dosage;
28. injuries compensable under Workers' Compensation law or any similar law;
29. a Covered Accident that occurs while on active duty service in the military, naval or air force of any country or international organization. Upon Our receipt of proof of service, We will refund any premium paid for this time. Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days;
30. aggravation, during a Covered Activity, of an injury the Covered Person suffered before participating in that Covered Activity, unless We receive a written medical release from the Covered Person's Physician;
31. operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant including any prescribed drug for which the Covered Person has been provided a written warning against operating a vehicle while taking it. Under the influence of alcohol, for purposes of this exclusion, means intoxicated, as defined by the law of the state in which the Covered Accident occurred.
32. In addition, benefits will not be paid for services or treatment rendered by any person who is:
 - a. employed or retained by the Policyholder;
 - b. living in the Covered Person's household;
 - c. an Immediate Family Member of either the Covered Person or the Covered Person's spouse;
 - d. the Covered Person.

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