WILSON COUNTY SCHOOLS 2016-2017 <u>ALL STUDENTS</u> ACCIDENT INSURANCE

Schedule Of Benefits:

Maximum Benefit\$25,000Accidental Death Benefit\$10,000Accidental Paralysis Benefit\$10,000

Crisis Death Benefit \$10,000 up to \$100,000 aggregate

Deductible \$6

Coverage Secondary to other insurance, primary if none

Benefit Period One Year from the date of injury

Initial Treatment Within 60 days of injury Room & Board 100% to \$150 per day

Inpatient Hospital Miscellaneous 100% to \$500 Outpatient Day Surgery Miscellaneous 100% to \$750

Physician's Visits \$30 first visit then \$25 thereafter

Physiotherapy \$30 first visit then \$20 thereafter 5 visits maximum

 Medical Emergency
 100% to \$150

 X-Rays
 100% to \$200

 CAT Scan or MRI
 100% to \$200

 Laboratory
 100% to \$50

 Prescription Drugs
 100% to \$50

 Orthopedic Braces & Appliances
 100% to \$75

 Surgeon's Fees
 100% to \$750

Anesthetist/Assistant Surgeon 20% of surgical benefit

Ambulance 100% to \$200

Dental 100% to \$100 per tooth

Special Notes:

- -This Accident Insurance policy is secondary and pays on accident claims after other insurance has paid. If there is no other available insurance this accident insurance policy becomes primary.
- -This Accident Insurance provides limited benefits. Parents may wish to consider purchasing optional 24 hour Student Accident Insurance available online at www.k12studentinsurance.com.
- -This Accident insurance is on all Pre K-12 Students involved in school sponsored and supervised activities.
- -If a student has an accident a school administrator must complete and sign the designated area on the accident claim form. Then it is the parent or guardian's responsibility to complete the remainder of the claim form and return it, along with all itemized bills, to the claims office address found on the claim form.
- -For questions pertaining to a claim contact the claims office at 1-866-409-5734 or at K12claims@hsri.com.

