

- Accidents happen! When they happen to your child, someone must pay the bills.
- Here are Accident only insurance plans to help cover your child either 24 hours a day (24-Hour Plan) or while in school (School-Time Plan).
- These plans provide benefits to help meet the cost of medical and Hospital charges.
- If you have other insurance, these plans can help offset the deductibles and coinsurance for those plans.
- If you have no other insurance, these plans will provide basic coverage.
- Any benefits payable by the Policy as a result of medical, surgical, dental, Hospital or nursing service will be paid directly to the Hospital or person rendering such service unless proof of payment in full is provided.

24-HOUR	SCHOOL TIME	IMPORTANT PROTECTION FACTS
✓	✓	Becomes effective the date premium payment is received by Guarantee Trust Life Insurance Company (GTL) or its representative (but not prior to the opening day of school). Students participating in preschool practice or play for interscholastic sports sanctioned by the High School Athletic Association will be covered as of the date of actual premium payment but only while engaged in actual practice or game sessions. Other aspects of coverage will not start sooner than the first date of regular school session.
✓	✓	Provides coverage during the hours that school is in regular session.
✓		Provides 24-Hour-A-Day protection.
✓	✓	Provides coverage during the time necessary for travel between the insured's home and the beginning or end of regular school sessions.
✓	✓	Provides coverage while participating in (or attending) activities organized, sponsored and supervised by the school. Coverage is also provided for travel directly to and from such activities in a Designated Vehicle furnished by the school.
	✓	Coverage expires at the close of the regular school term. (Coverage will be extended while attending academic classes for credit in the summer, when classroom sessions are exclusively sponsored and solely supervised by the school; however, no coverage will be provided for travel to and from classes).
✓		Coverage continues without interruption all summer until school re-opens for the following term.

Optional Football Only Accident Coverage begins on the date of premium receipt by GTL, its representatives or school officials, but not prior to the first official date of practice; and continues through the date of the last official game of the current season including playoffs.

To file a claim: Report accidents to the school official. Simplified forms will be furnished through the principal's office (during vacation time contact the administrators of the plan). Complete proof of loss and accumulated bills must be received by the Plan Administrator within 90 days.

24-HOUR-A-DAY ACCIDENT COVERAGE

24-Hour-A-Day Protection for each Covered Accident

Helps protect your child for the entire school year and extends **throughout the summer** - right up to the day school opens.

Your child's coverage is good **WORLDWIDE, 24-HOURS-A-DAY**. This includes covered accidents:

- 🔑 At home 🔑 At play 🔑 At school 🔑 On vacation 🔑 Scouting, camping etc. 🔑 During covered travel
- 🔑 While engaged in sports, except those specifically excluded or for which optional coverage is required*

***See OPTIONS for available optional sports coverage, if any.**

SCHOOL-TIME ACCIDENT COVERAGE

Helps protect your child while attending regular school sessions. Includes coverage for travel directly to and from your residence to attend regular school sessions. In addition, coverage is provided while participating in (or attending) covered activities exclusively organized, sponsored and solely supervised by the school and school employees, including travel directly to and from the activity in a Designated Vehicle furnished by the school and supervised solely by school employees. Optional coverage may be required for interscholastic sports. See **OPTIONS** for available optional sports coverage, if any.

EXCESS PROVISION: All Covered Charges over \$100 will be considered for payment on an Excess basis if any Other Valid and Collectible Insurance or Plan covers the Insured person. GTL will pay the first \$100 in Covered Charges regardless of other insurance.

2020-2021 STUDENT ACCIDENT INSURANCE PLANS

What's Covered? *Up to \$25,000.00 as described under Coverage and Benefits for:*

- ACCIDENTS OCCURRING WHILE COVERAGE IS IN FORCE
- LOSS FROM ACCIDENTAL BODILY INJURY RESULTING DIRECTLY AND INDEPENDENTLY OF ALL OTHER CAUSES
- COVERED MEDICAL CHARGES WHICH BEGIN WITHIN 90 DAYS OF THE ACCIDENT AND ARE INCURRED WITHIN 52 WEEKS OF THE ACCIDENT

Injury means bodily Injury due to an Accident which results directly and independently of disease, bodily infirmity, or any other causes; solely, directly and independently of all other causes, results in medical expense; occurs after the effective date of the Insured's coverage under the Policy; and occurs while the Policy is in force. All injuries sustained in any one Accident, including all related conditions and recurrent symptoms of these injuries, are considered a single Injury.

BENEFITS ARE PAYABLE *UP TO* THE DOLLAR AMOUNTS SPECIFIED BELOW

COVERAGE AND BENEFITS	
R&C means Reasonable and Customary charges	
Maximum Benefit Amount Per Injury	\$25,000.00
Deductible	\$0.00
Hospital room and board and general nursing care, limited to	Semi-private room rate
Intensive Care	100% of R&C
Inpatient miscellaneous Hospital charges, limited to a maximum of	\$5,000.00
Miscellaneous outpatient Hospital charges	100% of R&C
Doctor's charges for surgery, in accordance with the Surgical Schedule using	\$180.00 per unit value
Administration of anesthesia	100% of R&C
Assistant surgeon charge	100% of R&C
Non-surgical inpatient and outpatient Doctors' visits	100% of R&C
Hospital Emergency Care, excluding professional charges, limited to a maximum of	\$400.00
Outpatient imaging procedures and interpretation for MRI/CAT Scan, up to a maximum benefit of	\$650.00
Outpatient X-ray services, limited to a maximum of	\$650.00
Outpatient laboratory services, limited to a maximum of	\$650.00
Ambulance charges	100% of R&C
Urgent Care Center charges, does not include professional surgical charges	100% of R&C
Durable Medical Equipment including orthopedic appliances	100% of R&C
Prescription Drugs	100% of R&C
Replacement expense for broken eyeglasses, lenses, contact lenses, hearing aids resulting from an Injury requiring medical treatment	100% of R&C
Ambulatory Surgical Facility	100% of R&C
Outpatient Physical Therapy, rendered by a Doctor or Hospital, each visit Maximum of 10 visits	\$50.00
Dental Treatment (for Injury to Sound, Natural Teeth), per tooth	100% of R&C
Registered nurse expense	100% of R&C

COVERAGE AND BENEFITS - Continued	
Loss of life	\$5,000.00
Loss of both hands or both feet or entire sight of both eyes or loss of speech or hearing (both ears)	\$20,000.00
Loss of one hand or one foot and entire sight of one eye	\$20,000.00
Loss of one hand or one foot or loss of hearing one ear or entire sight of one eye	\$10,000.00
Loss of thumb and index finger of the same hand	\$5,000.00

EXCLUSIONS

THE POLICY DOES NOT PROVIDE BENEFITS FOR: 1) Treatment, services or supplies which are not Medically Necessary; are not prescribed by a Doctor as necessary to treat an Injury; are Experimental/Investigational in nature; are received without charge or legal obligation to pay; are received from persons employed or retained by the Policyholder or any Family Member, unless otherwise specified; or are not specifically listed as Covered Charges in the Policy; (2) Intentionally self-inflicted Injury; (3) Injury received while violating or attempting to violate any duly enacted law; (4) Injury by acts of war, whether declared or not; (5) Injury received while traveling or flying by air, except as a fare paying passenger on a regularly scheduled commercial airline; (6) Injury covered by Workers' Compensation or the Occupational Disease Law; (7) Treatment of Mental or Nervous Disorders, whether or not caused by Injury; (8) Suicide or attempted suicide; (9) Heart and/or circulatory malfunction resulting from participation in a Covered Activity, such as stroke, heart attack and brain circulatory malfunctions; (10) Repetitive motion injuries, strains, tendinitis, bursitis, spondylolysis, osteochondritis dissecans; (11) Any penalty imposed by Other Valid and Collectible Insurance or Plan for failure to follow plan procedures; (12) Re-Injury or complications of an Injury which occurred prior to the Policy's Effective Date; (13) Dental treatment, except as specifically stated; (14) Hernia, any type; (15) Injury sustained fighting or brawling, except as an innocent victim; (16) Injury sustained while committing or attempting to commit a felony; (17) Loss resulting from being legally intoxicated or under the influence of alcohol as defined by the laws of the state in which the Injury occurs; (18) Loss resulting from the use of any drug or agent classified as narcotic, psycholytic, psychedelic, hallucinogenic, or having a similar classification or effect, unless prescribed by a Doctor; (19) Injury sustained scuba diving; (20) Any expense for which benefits are payable under a Catastrophic Accident Insurance Program of the State Interscholastic Activities Association; (21) Injury sustained while participating in or practicing for senior high interscholastic tackle football, including travel, unless optional coverage has been purchased; (22) Injury which occurs while the Insured is on active duty service in any armed forces. Reserve or National Guard active duty for training is not excluded unless it extends beyond 31 days; (23) Injury sustained flying in an ultra-light, hang gliding, parachuting or bungee-cord jumping; (24) Cosmetic or plastic surgery, except for reconstructive surgery on an injured part of the body; (25) Treatment of illness, disease or infections, except infections which result from an accidental Injury or infections which result from accidental, involuntary or an unintentional ingestion of a contaminated substance; (26) Charges for treatments, services or supplies which exceed reasonable and customary charges; (27) Losses directly or indirectly arising out of any chemical or biological release and/or contamination which results from Terrorist Activity; (28) Any loss as the result of Terrorist Activity and/or non-detonating weapons of mass destruction; (29) Any loss directly or indirectly arising out of any nuclear explosion, detonation, release and/or contamination whether in time of peace or war, and regardless of any other causes or events contributing concurrently or in any other sequence thereto.

Blanket Accident insurance products are issued on Form Series, GP-2030, GP-2020 or GP-1200 by Guarantee Trust Life Insurance Company, Glenview, IL. These products and their features are subject to state availability and may vary by state. Certain exclusions and limitations may apply. The exact provisions governing the insurance are contained in the Policy issued to the Policyholder and certain provisions may be administered to conform to state requirements. The Policy shall control in the event of any conflict between the Policy and this brochure. For complete details of coverage please contact the agent administering the program.

Underwritten by: **GUARANTEE TRUST LIFE INSURANCE COMPANY (GTL)**, 1275 Milwaukee Avenue, Glenview, Illinois 60025
Administered by: **FIRST AGENCY**, 5071 West H Avenue, Kalamazoo, Michigan 49009-8501 (269) 381-6630

2020-21 PREMIUM RATES AND ENROLLMENT INSTRUCTIONS

ONE-TIME PREMIUM PAYMENT	
OPTIONS	ANNUAL RATES
24-HOUR-A-DAY COVERAGE Grades Pre K-12- Includes all activities <u>and</u> interscholastic sports, except football..... Grades Pre K-12- Includes all activities <u>except</u> all interscholastic sports.....	 \$131 \$114
SCHOOL-TIME COVERAGE Grades Pre K-12- Includes all activities <u>and</u> interscholastic sports, except football..... Grades Pre K-12- Includes all activities <u>except</u> all interscholastic sports.....	 \$76 \$53
OPTIONAL FOOTBALL ONLY COVERAGE (2020 Season only) Grades 6-12	 \$198
NO REFUNDS ARE AVAILABLE	

To purchase coverage please visit us online at:
www.1stagency.com/voluntaryaccidentcoverage
Follow directions by choosing STATE and SCHOOL DISTRICT.
Visa and MasterCard credit cards are accepted.