

Help keep your bank account healthy while you heal.

Accident Insurance

Lake Travis ISD

Accident Insurance, which we call Accidental Injury Benefits put money in your pocket in the event of a covered accident, helping alleviate financial stress so you can focus on getting better. Covered incidents include things like broken bones, lacerations, emergency transportation needs and more.

If you have any questions about your benefit options, visit https://ltisdschools.pasito.ai/r/benefits_package_page

What are Accidental Injury Benefits?

To support your financial well-being, Lake Travis ISD is offering Accidental Injury Benefits for all eligible employees. This coverage is paid by you and is available for yourself and your eligible dependents. It offers cash payments for a range of accidental injuries and the services incurred as a result. Cash benefits put you in control. You must be actively at work with your employer on the day your coverage takes effect. Use it for things like:

- **Childcare**
- **Utilities**
- **Groceries**
- **Medical Expenses**

Our Accidental Injury Benefits cover over 200 types of injuries. Here are some commonly covered benefits.

Benefit	Amount	
	Plan 1	**Plan 2**
X-ray	$100	$150
Follow-up Care	$100	$150
Diagnostic Exam	$300	$400
Initial Physician Visit	$150	$200
Therapy	$75	$100
Urgent Care	$150	$200
Medical Appliance	Up to $1,500	Up to $2,000
Ground Ambulance	$750	$1,000
Hospital Observation/ Short Stay	$300	$400

Stay proactive about your health and get rewarded.

Health Screening Benefit: When you or a covered family member complete an eligible preventive screening like an annual physical, mammogram, colonoscopy or biometric blood test, you'll receive $50 per person, per calendar year directly to you. It's a simple way to offset the cost of routine check-ups while maximizing your benefits.

The Hartford

Accident Prevention Benefit: An accident prevention benefit provides cash to cover exams, tests, screenings, and preventative care programs. These services, ranging from eye exams to driver's safety and training programs, help maintain your health and prevent serious illnesses or injuries. Each covered individual under your plan can claim their own benefits.

How Accidental Injury Benefits work:

Jayden's Story[1]

Jayden played basketball all through high school and still played as often as he could. One Saturday during a pickup game he tripped and went down hard. When his wrist swelled up and he couldn't stand without feeling dizzy, his friends called an ambulance to transport him to the ER.

He went home with an arm in a cast and instructions on healing from a concussion. It took him some time to recover, but Jayden was able to rest easy. He'd checked the box for Accident insurance, which we call Accidental Injury Benefits, during open enrollment at work. It paid him a cash benefit he used to help cover medical expenses, food and rent while he was recovering.

The plan pays a benefit amount for each covered service as a result of Jayden's accident.

Service	Accident Plan Pays
Ground Ambulance	$1,000
ER	$300
X-ray	$150
CT Scan (Diagnostic exam)	$400
Wrist Fracture	$1,500
Accident Follow-up	$450 ($150/visit x 3)
Chiropractor	$750 ($75/visit x10)
Physical Therapy	$1,000 ($100/visit x10)
Total	**$5,550**

If you have any questions about your benefit options, visit https://ltisdschools.pasito.ai/r/benefits_package_page

The Hartford

The Hartford Insurance Group, Inc., (NYSE: HIG) operates through its subsidiaries, including underwriting company Hartford Life and Accident Insurance Company, under the brand name, The Hartford® and is headquartered at One Hartford Plaza, Hartford, CT 06155. For additional details, please read The Hartford's legal notice at www.TheHartford.com. All benefits are subject to the terms and conditions of the policy. Policies underwritten by the underwriting company listed above detail exclusions, limitations, reduction of benefits and terms under which the policies may be continued in force or discontinued. This brochure explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this brochure and the policy, the terms of the policy apply. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy as issued to the policyholder. Benefits are subject to state availability. © 2025 The Hartford

THE ACCIDENT POLICY IS A LIMITED ACCIDENT ONLY BENEFIT POLICY. IT PROVIDES COVERAGE ONLY FOR THE LIMITED BENEFITS OR SERVICES SPECIFIED IN THE POLICY. This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

Accident Form Series includes GBD-3300, GBD 3500, GBD-2000, GBD-2300, or state equivalent.

Not available in all states.

In New York: This Accident policy provides ACCIDENT insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services. IMPORTANT NOTICE—THIS POLICY DOES NOT PROVIDE COVERAGE FOR SICKNESS.

1This case illustration is fictious and for illustrative purposes only.

2940287 05-25

Lake Travis ISD Accident Benefits

INITIAL & EMERGENCY CARE BENEFITS		PLAN 1 BENEFITS	PLAN 2 BENEFITS
Initial Accident	Once per accident	$150	$200
Initial Medical Professional/Physician Visit	Once per accident	$150	$200
Urgent Care	Once per accident	$150	$200
Emergency Room	Once per accident	$250	$300
Hospital Observation/Short Stay	Once per accident	$300	$400
Ambulance - Air	Once per accident	$1,500	$2,000
Ambulance - Ground/Water	Once per accident	$750	$1,000
X-Ray	Once per accident	$100	$150
Diagnostic Exam	Once per accident	$300	$400
FOLLOW-UP CARE BENEFITS		**PLAN 1 BENEFITS**	**PLAN 2 BENEFITS**
Follow-Up Medical Professional/ Physician Visit	Up to 3 visits per accident	$100	$150
Therapy Services	Up to 10 visits each per accident	$75	$100
Acupuncture/Chiropractic Care	Up to 10 visits each per accident	Up to $50	Up to $75
Home Health Services	Up to 10 visits each per accident	$75	$100
Medical Travel	Up to 4 days per accident	$400	$600
Companion Lodging	Up to 15 nights per accident	$150	$200
Follow-Up Medical Transportation/ Rideshare	Up to 3 trips per accident	$25	$50
Mobility Aid	Once per accident	Up to $1,500	Up to $2,000
Prescription Drug	Once per accident	$25	$50
Pain Management	Once per accident	Up to $600	Up to $800
Family Care	Up to 30 days per accident	$50	$75
Pet Care	Up to 30 days per accident while insured is confined	$50	$75
Health Screening Benefit or Accident Prevention Benefit	Once per year for each covered person	$50	$50
HOSPITAL/CONFINEMENT CARE BENEFITS		**PLAN 1 BENEFITS**	**PLAN 2 BENEFITS**
Hospital Admission	Once per accident	$1,500	$2,000
Hospital Confinement	Up to 90 days per accident	$250	$500
Step Down Unit Confinement	Up to 30 days per accident	$400	$800
ICU Admission	Once per accident	$3,000	$4,000
ICU Confinement	Up to 15 days per accident	$500	$1,000
Continuous Care Facility Confinement	Up to 90 days per accident	$200	$400
SPECIFIC INJURY BENEFITS		**PLAN 1 BENEFITS**	**PLAN 2 BENEFITS**
Concussion	Once per accident, up to 3 per year	$250	$500
Burn	Once per accident	Up to $20,000	Up to $25,000

Burn - Skin Graft	Once per accident for third degree burn(s)	50% of burn benefit	50% of burn benefit
Dental	Once per accident	Up to $300	Up to $600
Dislocation	Once per accident	Up to $8,000	Up to $10,000
Eye Injury	Once per accident	Up to $500	Up to $750
Fracture	Once per accident	Up to $8,000	Up to $10,000
Laceration	Once per accident	Up to $500	Up to $1,000
Ear Injury	Once per ear per lifetime	$250	$250
Gunshot Wound	Once per accident	$500	$1,000
Puncture Wound	Once per accident	$100	$150
Organized Amateur Sports Injury	--	25% increase of non-catastrophic benefits	25% increase of non-catastrophic benefits
SURGERY BENEFITS		**PLAN 1 BENEFITS**	**PLAN 2 BENEFITS**
Exploratory or Debridement	Once per accident	$150	$200
Minimally Invasive Surgery (Scope Based)	Once per accident	$500	$750
Abdominal/Cranial/Thoracic Surgery	Once per accident	$3,000	$4,000
Hernia Repair	Once per accident	$500	$750
Herniated Disc Repair	Once per accident	$1,000	$2,000
Joint Replacement	Once per accident	$2,500	$5,000
Knee Cartilage	Once per accident	$1,000	$2,000
Other Non-Specified Surgery	Once per accident	$500	$750
Tendon/Ligament/Rotator Cuff	Once per accident	Up to $2,000	Up to $3,000
Outpatient Surgery Facility Fee	Once per accident	$300	$400
Blood Products (Blood/ Plasma/ Platelets)	Once per accident	$500	$750
General Anesthesia	Once per accident	$150	$300
CATASTROPHIC		**PLAN 1 BENEFITS**	**PLAN 2 BENEFITS**
Basic Death	Within 90 days; Spouse @ 50% and child @ 25%	$50,000	$80,000
Common Carrier Death	Within 90 days	$150,000	$240,000
Transportation of Remains	Once per lifetime	$2,000	$3,000
Dismemberment/Functional Loss	Once per accident; Spouse @ 50% and child @ 25%	Up to $50,000	Up to $80,000
Paralysis	Once per accident	Up to $50,000	Up to $80,000
Coma	Once per accident	$10,000	$15,000
Prothesis	Once per accident	Up to $3,000	Up to $4,000
Residence/Vehicle Reasonable Modifications	Once per accident	$5,000	$7,500