Chapel Hill-Carrboro City Schools
ACCIDENT INSURANCE ON ALL STUDENTS
Summary of Insurance Benefits:

Plan Choice:	Standard Plan
Accidental Death Benefit	$10,000
Accidental Dismemberment	Single Dismemberment - $5,000 Double Dismemberment - $15,000
Accidental Paralysis	$10,000
Accident Medical Expense – (excess) (This **Benefit Amount** is not subject to Section IV - Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract)	Maximum Benefit Amount: $25,000 Deductible: $0 Coinsurance Percentage: 100% 60 days Incurral Period 52 week Benefit Period
Intensive Care Room and Board:	R&C up to $200 per day
Private/Semi-private Room and Board:	R&C up to $200 per day
Hospital Miscellaneous Services	R&C up to $500 per day
Surgeon's Fees	R&C up to $750
Assistant Surgeon Fees	20% of surgery benefit
Second Opinion or Consultation Fees:	R&C up to $200
Anesthesiologist Fees:	20% of surgery benefit
Emergency Room Treatment	R&C up to $200
Ambulatory Medical Center Fees	R&C up to $750
Office Visits (other than for Physical Therapy)	R&C up to $30 first visit, up to $25 for subsequent visits
Physical Therapy:	R&C up to $30 for first visit, up to $25 for subsequent visits up to 5 Maximum Visit(s)
X-rays:	R&C up to $200
MRI/CT Scan:	R&C up to $200
Laboratory Services:	R&C up to $50
Dental Services	R&C up per tooth: $100
Prescription Drugs	R&C up to $50
Registered or Licensed Nurse:	75% of R&C
Emergency Transportation Vehicle:	R&C up to $200 for ground and air ambulance
Durable Medical Equipment	R&C up to $50

Additional Benefits:

Loss of Life: Heart or Circulatory Malfunction (This **Benefit Amount** is subject to Section IV – Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract)	Benefit Amount: $10,000 Malfunction Occurs within: 24 hours
Loss of Life Heatstroke (This **Benefit Amount** is subject to Section IV – Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract)	Benefit Amount: $10,000
Medical Expense - Heart or Circulatory Malfunction (This **Benefit Amount** is not subject to Section IV – Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract)	Benefit Amount: $10,000 Medical Expense Deductible: $0 Incurral Period: 52 weeks
Random Act of Violence II (This **Benefit Amount** is not subject to Section IV – Maximum Payment for Multiple Losses and Multiple Benefits, of the Contract)	Benefit Amount: $10,000

SPECIAL NOTES (R&C stands for Reasonable &Customary Charges):

- This Accident Insurance policy is **SECONDARY** coverage 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 the voluntary student Accident Insurance available online at http://www.k12studentinsurance.com
- If a student has an accident a school administrator must complete and sign the designated area on the accident claim form-Questions 17-20. The staff completes their part and gets the form to the parent to follow the step-by-step submission process directly on the claim form (page 3).
- It is the parent or guardian's responsibility to complete the remainder of the claim form and submit it, along with all itemized bills, to the claims office by email, fax or mail (addresses are on the claim form).

For questions pertaining to a claim contact the HSRI claims office at 1-866-409-5734 or at K12claims@hsri.com.

This is only a summary of the benefits available under your district's student Accident Insurance policy. For complete details refer to the master policy on file at your district office. Any discrepancies between this summary and the master policy, the master policy shall prevail.