

2016-17

STUDENT ACCIDENT INSURANCE QUOTES

REVISED

Coverages are Secondary to Family Insurance Plan			
BENEFITS	CRAWFORD (SCHOLASTIC INSUROR)	ROBERTS INS (K&K Plan 4)	ROBERTS INS (BERKLEY Plan 3)
Maximum Benefit per Insured per Injury	\$25,000	\$25,000	\$25,000
Room & Board Semi-private	Covers semi private room	100% U&C	100% U&C
Hospital Misc Expenses(nursing care/testing)	\$2,000 Maximum/Injury	\$5,000 Maximum/Injury	100% U&C
Outpatient Hospital Surgical Charges	\$2,000 Maximum/Injury	\$1,000 Maximum/Injury	100% U&C
Physician Surgery Fees	\$3,000 Maximum/Injury	100% U&C	100% U&C
Physician non surgical visits	\$35/visit	100% U&C	100% U&C
Anesthetist Services and Asst Surgeon	up to 25% of benefit paid	100% U&C	100% U&C
Physical Therapy	\$35/visit, Maximum \$175	\$40/visit, Maximum \$400/Injury	\$1,000 Maximum/Injury
Xrays, Diagnostic	\$400/injury	\$500 Maximum/Injury	100% U&C
Dental	\$200/injured tooth	\$500/Tooth/Injury	100% U&C
Orthopedic Appliances	\$100 Maximum/Injury	\$500 Maximum/Injury	100% U&C
Outpatient Drugs	\$50/injury	100% U&C	100% U&C
Ground Ambulance Service	\$100/injury	100% U&C	100% U&C
Catastrophic Coverage	\$5,000,000 insurance policy	\$7,500,000 Maximum	\$7,500,000 Maximum
All Rates Based on 938 ADA			
QUOTE FOR STUDENTS P-12	\$15.00/ADA = \$ 14,070.00	\$13,889.97	\$16,441.97
OR	\$16.00/ADA = \$ 15,008.00*		
	<i>*This rate has a 2 year rate guarantee</i>		

Current Year Rate: \$15,955.50 (ADA 967)