SCHOLASTIC INSURORS, INC.

John Joy, *President*P. O. Box 3194 • Johnson City, Tennessee 37602
1-800-872-1953
FAX (423) 928-2761

SERVING: Kentucky Tennessee Virginia

February 5, 2020

Mr. Tete Turner Newport Independent Schools 30 W. 8th Street Newport, KY 41071

RE: Student Accident Insurance Proposal - - - 2020-21

Dear Mr. Turner:

THANK YOU for allowing us, for the past several years, to provide your students with accident insurance.

Because your claim history is currently favorable, I'm pleased to advise you that we can renew your current program with a 2% RATE DECREASE (from \$21,541.00 to \$21,110.00), contingent upon our receipt of your authorization to renew, prior to February 28, 2020. Also, we can increase your Physical Therapy benefits from \$50.00 per visit (10 visit limit per injury) to \$75.00 per visit (15 visit limit per injury).

Further, we can "lock-in" your rate decrease and physical therapy benefit increase for two years (2020-21 & 2021-22), contingent upon our receipt of your authorization to renew, prior to February 28, 2020.

The payment(s) of premium will not be due until the beginning of the new policy term.

To confirm continuation of your student insurance program, please complete and forward, to us, the EXTENSION REQUEST form. If you have questions regarding your program, please contact me.

I appreciate your business and we look forward to continuing to work with you and the Newport Independent Schools.

Sincerely,

John Joy

SCHOLASTIC INSURORS, INC.

JMJ/cs

Enclosures

PC: Mr. Jim Crawford

NEWPORT INDEPENDENT SCHOOLS

STUDENT INSURANCE EXTENSION REQUEST

Please respond by checking one of the following boxes and mail, fax, or email prior to February 28, 2020			
☐ TWO YEAR EXTENSION AND RATE GUARANTEE			
		hools elects to extend benefits and hrough the 2020-21 school year and coverage level:	
Group All School Plan \$5,000,000 Maximum Medical Benefits Coverage For All Students, Grades PK-12 \$21,110.00 (Same Plan As Used In 2019-20 except the Physical Therapy Benefit will be increased to \$75.00 per visit with a 15 visit limit per injury)			
	ONE YEAR EXTENSION AND RATE GUARANTEE		
	~ ~		coverage under our current student the following annual rate and coverage
Group All School Plan \$5,000,000 Maximum Medical Benefits Coverage For All Students, Grades PK-12 \$21,110.00 (Same Plan As Used In 2019-20 except the Physical Therapy Benefit will be increased to \$75.00 per visit with a 15 visit limit per injury)			
	Newport Independent Sch	hools declines extension of coveraș	ge and rate guarantee at this time.
aan maanan ka a	Name	Title	· Date
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