

# IMPORTANT NOTICE To Sarasota County Parents

A one time payment per school term protects your student all year long!  
Even if you have insurance this can help pay your high deductibles and co-pays.

✓ SCHOOL TIME PLAN FOR ONLY \$15 PER SCHOOL TERM.

✓ 24 HOUR EXTENDED PLAN FOR ONLY \$45 PER SCHOOL TERM.

## Dear Parents:

Accident insurance protection is made available as a public service to full-time students enrolled in the Sarasota County School District. The School Board is not responsible for payment of medical expenses due to school-related injuries or any medical expenses not covered by this plan or any other insurance plan. We encourage all parents to read this information and decide whether or not to enroll their child in this voluntary insurance program.

## Choice of **TWO** Student Accident Insurance Plans

### OPTION

#### SCHOOL TIME ACCIDENT PLAN

Effective during the regular school term for:

- School Classes and Covered School Activities
- Summer School Educational Classes
- Interscholastic School Sports (except varsity tackle football)\*

\*NOTE: Contact the school's athletic director or the athletic department if you want to purchase insurance for FHSAA sanctioned tackle football.

### OPTION

#### SCHOOL TIME PLUS 24-HOUR FULL TIME ACCIDENT PROTECTION PLAN

Effective during:

- School Classes and Covered Activities
- School Sports (except varsity tackle football)\*

#### PLUS ADDED PROTECTION WHILE:

- At Home and Weekends
- Summer Vacation Periods
- 24 hours a day, seven days a week. Additional exclusions apply.

## Choose from one of the following Accident Policy Benefit Levels

Policy Benefit Description	PLAN A Basic Benefits	PLAN B Enhanced Benefits
<b>Maximum Medical Benefit payable per Covered Accident</b>	\$25,000	\$25,000
<b>Accidental Death Benefit</b>	\$1,500	\$2,500
<b>Initial Physician's Visit (Non-Surgical)</b>	\$45	\$60
<b>Physician's Follow-Up Visits (Non-Surgical)</b>	\$35	\$45
<b>Outpatient Therapy or Similar Treatment Visits</b>	Up to 10 visits @ \$45 per day	Up to 10 visits @ \$55 per day
<b>Surgeon Fee Schedule (based on Florida 2008 Work Comp Fee Schedule, Part A)</b>	Not to exceed Workers Comp. maximum benefit	Not to exceed Workers Comp. maximum benefit
<b>Anesthesiologist Fees (One fee will be paid per surgery)</b>	Not to exceed Workers Comp. maximum benefit	Not to exceed Workers Comp. maximum benefit
<b>X-Rays, EEG, CAT Scans (Includes Reading Fees)</b>	Up to \$250	Up to \$450
<b>MRI (Includes Reading Fees)</b>	Up to \$600	Up to \$750
<b>Inpatient Hospital Room Charges per Day of Confinement - Including all miscellaneous Charges per Diem, supplies, operating room, implants, etc..</b>	Up to \$1,000 per day	Up to \$1,250 per day
<b>Hospital Outpatient, Surgi-Care Center or "Same Day" Surgery Facility Charges when Major Surgery is performed requiring general anesthesia</b>	Intensive Care \$1,200/day	Intensive Care \$1,500 per day
<b>Emergency Room Charges: (applies to injuries requiring emergency treatment within 72 hours of a covered accident)</b>	Up to \$1,000 for all charges, services and supplies	Up to \$2,250 for all charges, services and supplies
<b>Orthopedic Devices, Braces, Implants or Appliances (Crutches \$100)</b>	Up to \$225	Up to \$475
<b>Dental Treatment, (for accidentally injured sound, natural teeth)</b>	Up to \$250	Up to \$450
<b>Emergency Ambulance Service (initial air or ground trip)</b>	Up to \$250	Up to \$450/injured tooth
<b>Lab Testing</b>	Up to \$75	Up to \$100

## SICKNESS OPTION 3

### Optional In-Hospital Sickness Benefit Plan

The Accident Insurance Plans mentioned above do not cover any medical expenses due to an illness, sickness or disease. However, if your child is enrolled in Option 3, the In-Hospital Sickness Benefit Plan, the policy will pay up to \$500 for each day your child is hospitalized overnight as an in-patient due to a covered illness, sickness or disease up to a policy maximum of \$5,000 for up to a 12 month period of coverage. No other sickness benefits are payable for any outpatient expenses or doctor's services. The one-time cost to add the In-Hospital Sickness Benefit Option is \$40.00 for coverage starting from the date this application is received by the insurance company and continuing through the summer months until August, 2021.

**COVERAGE EFFECTIVE AND TERMINATION DATES:** Coverage becomes effective on the first day of school or practice, or at 11:59 P.M. according to the U.S. Postal postmark date on the enrollment envelope or the date payment is received in School Insurance of Florida's office, whichever is the later date. The 24 Hour Basic Accident Plan coverage terminates at 12:01 A.M. on the last day of summer, August, 2021. The At School Basic Accident Plan Coverage terminates at 11:59 P.M. on the last day of school, May, 2021. The In-Hospital Sickness Benefit Option Plan coverage terminates at 12:01 A.M. on the last day of summer, August 2021. Enroll online and coverage will become effective at 11:59 pm, that day, and you will receive an ID card immediately.

## ENROLLMENT FORM FOR STUDENT ACCIDENT INSURANCE

STUDENT'S FIRST NAME (one letter in each box) M.I.

STUDENT'S LAST NAME

Please Print Address (Street) (City) (State) (Zip)

Name of School Student Attends

Grade Email Address (Date)

(Signature of Parent or Guardian) CHECK #

School Board of Sarasota County 21-FSL

### CHECK (✓) YOUR SELECTION BELOW BY CHOOSING OPTION 1 OR 2 AND YOUR BENEFIT PLAN

Options	Plan A Basic Benefit	Plan B Enhanced Benefits
OPTION 1 School Time Coverage Only	<input type="checkbox"/> \$15	<input type="checkbox"/> \$26
OPTION 2 School Time PLUS 24 HOUR COVERAGE	<input type="checkbox"/> \$45	<input type="checkbox"/> \$88

If you have enrolled in one of the above plans you are eligible for Option 3 the In-Hospital Sickness Benefit Plan Below.

OPTION 3 In-Hospital Sickness Benefit	<input type="checkbox"/> \$40
TOTAL PAYMENT ENCLOSED	\$ _____

## ENROLL ONLINE!

Visit our website [www.schoolinsuranceonline.com](http://www.schoolinsuranceonline.com) to enroll online.