



# Trustmark Accident - Group insurance

## Benefits and Sample Rates for Warren County R-III School District

High Plan

24 Hour Coverage

### Monthly Rates

(assumes deductions of 12 times per year)

|             | Employee Only | Employee + Spouse | Employee + Child | Family   |
|-------------|---------------|-------------------|------------------|----------|
| <b>Rate</b> | \$ 17.76      | \$ 27.19          | \$ 35.05         | \$ 47.54 |

### Hospital Care Benefits

#### Amount

|                                   |          |
|-----------------------------------|----------|
| Hospital First Day Stay Benefit   | \$2,250  |
| Hospital Daily Stay Benefit       | \$500    |
| Hospital Daily Stay Benefit - ICU | \$600    |
| Blood Plasma Platelets Benefit    | \$600    |
| Coma Benefit                      | \$10,000 |
| Pain Management/Epidural Benefit  | \$100    |

### Initial Care Benefits

#### Amount

|                                  |         |
|----------------------------------|---------|
| Initial Doctor's Office Benefit  | \$150   |
| Urgent Care Benefit              | \$150   |
| Emergency Room Treatment Benefit | \$250   |
| Ambulance Benefit - Air          | \$2,500 |
| Ambulance Benefit - Ground       | \$600   |
| Major Diagnostic Testing Benefit | \$250   |
| X-Ray Benefit                    | \$200   |

### Follow-Up Care Benefits

#### Amount

|                                                         |         |
|---------------------------------------------------------|---------|
| Accident Follow-Up Treatment Benefit                    | \$150   |
| Therapy Benefit (Includes Chiropractic & Acupuncture)   | \$75    |
| Appliance Benefit - Major                               | \$225   |
| Appliance Benefit - Minor                               | \$225   |
| Prosthetic Device or Artificial Limb Benefit - Single   | \$1,000 |
| Prosthetic Device or Artificial Limb Benefit - Multiple | \$2,000 |
| TrekCheck - Lodging                                     | \$200   |
| TrekCheck - Transportation                              | \$500   |

### Surgical Care Benefits

#### Amount

|                                                  |         |
|--------------------------------------------------|---------|
| Arthroscopic Surgery                             | \$750   |
| Cranial Surgery                                  | \$2,000 |
| Hernia Surgery                                   | \$750   |
| Herniated Disc Surgery                           | \$1,000 |
| Open Abdominal and Thoracic Surgery              | \$2,500 |
| Open Abdominal or Thoracic Surgery Exploratory   | \$250   |
| Tendon/Ligament/Rotator Cuff Surgery (> 1)       | \$1,800 |
| Tendon/Ligament/Rotator Cuff Surgery (1)         | \$1,200 |
| Tendon/Ligament/Rotator Cuff Surgery Exploratory | \$300   |
| Torn Knee Cartilage                              | \$1,000 |
| Torn Knee Cartilage Exploratory                  | \$200   |
| Other (General Anesthesia)                       | \$500   |
| Other (Conscious Sedation)                       | \$200   |

### Dislocation Benefits continued

#### Amount

|                                                   |         |
|---------------------------------------------------|---------|
| Open Reduction                                    |         |
| Hip                                               | \$8,000 |
| Knee                                              | \$4,000 |
| Ankle Bone or Bones of the Foot (Other Than Toes) | \$3,200 |
| Collarbone (Sternoclavicular)                     | \$2,000 |
| Lower Jaw                                         | \$1,200 |
| Shoulder (Glenohumeral)                           | \$1,200 |
| Elbow                                             | \$1,200 |
| Wrist                                             | \$1,200 |
| Bone or Bones of the Hand (Other than Fingers)    | \$1,200 |
| Collarbone (Acromioclavicular and Separation)     | \$400   |
| One Toe or One Finger                             | \$400   |

### Fracture Benefits

#### Amount

|                                     |          |
|-------------------------------------|----------|
| Closed Reduction                    |          |
| Skull (Depressed)                   | \$6,250  |
| Skull (Simple, Non-depressed)       | \$2,500  |
| Hip / Thigh                         | \$3,750  |
| Body of Vertebrae                   | \$2,000  |
| Pelvis                              | \$2,000  |
| Leg                                 | \$2,000  |
| Bones of Face or Nose               | \$875    |
| Upper Jaw                           | \$875    |
| Upper Arm                           | \$875    |
| Lower Jaw                           | \$750    |
| Shoulder Blade, Collarbone, Sternum | \$750    |
| Vertebral Processes                 | \$750    |
| Forearm, Hand                       | \$750    |
| Wrist                               | \$750    |
| Kneecap                             | \$750    |
| Foot (Except Toes)                  | \$750    |
| Ankle                               | \$750    |
| Rib                                 | \$625    |
| Coccyx                              | \$500    |
| Finger, Toe                         | \$125    |
| Chip Fracture                       |          |
| Percent of Closed Benefit           | 25%      |
| Open Reduction                      |          |
| Skull (Depressed)                   | \$12,500 |
| Skull (Simple, Non-depressed)       | \$5,000  |
| Hip / Thigh                         | \$7,500  |
| Body of Vertebrae                   | \$4,000  |
| Pelvis                              | \$4,000  |
| Leg                                 | \$4,000  |
| Bones of Face or Nose               | \$1,750  |

(Continued)

| Injuries Benefits                              | Amount   |
|------------------------------------------------|----------|
| 2nd Degree 9% - 18% BSA or 3rd Degree < 9% BSA | \$1,125  |
| 2nd Degree > 18% BSA or 3rd Degree 9%-18% BSA  | \$2,250  |
| 3rd Degree > 18% BSA                           | \$15,000 |
| Skin Graft Benefit                             | 25%      |
| Concussion Benefit                             | \$200    |
| Emergency Dental Benefit - Crown               | \$450    |
| Emergency Dental Benefit - Extraction          | \$150    |
| Eye Injury Benefit                             | \$400    |
| Laceration Benefit                             |          |
| Not Requiring Repair                           | \$75     |
| Less Than 2 in                                 | \$200    |
| 2 in - 6 in                                    | \$400    |
| Greater Than 6 in                              | \$800    |

| Dislocation Benefits                              | Amount  |
|---------------------------------------------------|---------|
| Knee                                              | \$2,000 |
| Ankle Bone or Bones of the Foot (Other Than Toes) | \$1,600 |
| Collarbone (Sternoclavicular)                     | \$1,000 |
| Lower Jaw                                         | \$600   |
| Shoulder (Glenohumeral)                           | \$600   |
| Elbow                                             | \$600   |
| Wrist                                             | \$600   |
| Bone or Bones of the Hand (Other than Fingers)    | \$600   |
| Collarbone (Acromioclavicular and Separation)     | \$200   |
| One Toe or One Finger                             | \$200   |
| Partial Dislocation                               |         |
| Percent of Closed Benefit                         | 25%     |

| Fracture Benefits continued         | Amount  |
|-------------------------------------|---------|
| Lower Jaw                           | \$1,500 |
| Shoulder Blade, Collarbone, Sternum | \$1,500 |
| Vertebral Processes                 | \$1,500 |
| Forearm, Hand                       | \$1,500 |
| Wrist                               | \$1,500 |
| Kneecap                             | \$1,500 |
| Foot (Except Toes)                  | \$1,500 |
| Ankle                               | \$1,500 |
| Rib                                 | \$1,250 |
| Coccyx                              | \$1,000 |
| Finger, Toe                         | \$250   |

| Accidental Death Benefits                          | Amount    |
|----------------------------------------------------|-----------|
| Accidental Death Benefit - Child                   | \$20,000  |
| Accidental Death Benefit Common Carrier - Employee | \$200,000 |
| Accidental Death Benefit Common Carrier - Spouse   | \$80,000  |
| Accidental Death Benefit Common Carrier - Child    | \$40,000  |

| Wellness Benefits                    | Amount |
|--------------------------------------|--------|
| Routine Screening Benefit - Employee | \$50   |
| Routine Screening Benefit - Spouse   | \$50   |
| Routine Screening Benefit - Child    | \$50   |

*This is a brief description of benefits under forms AO 620 C and AO 620 C MET. Sample rates are shown for illustrative purposes only; rates may vary. An application for insurance must be completed to obtain coverage. Benefit amounts shown are samples and not a guarantee. Benefit amount payable varies by injury/service and may vary by state. Benefits are payable only as the result of a covered accident. Most benefits are paid once per person per covered accident according to the provisions of the certificate. Your certificate will contain a complete schedule. Coverage issued may differ from what is described here; your certificate and outline of coverage, if applicable, will contain complete information. Elimination periods may apply. Benefits, definitions, exclusions and limitations and form numbers may vary by state. For exact costs, coverage details and terms, see your agent or write the company. Underwriting conditions may vary, and determine eligibility for the offer of insurance. Trustmark® is a registered trademark of Trustmark Insurance Company. NOTE: If you have previously elected Trustmark accident coverage, your existing policy may differ from what is described here.*