



STATE COLLEGE AREA SCHOOL DISTRICT
Office of Finance and Operations
240 VILLA CREST DRIVE • STATE COLLEGE PENNSYLVANIA • 16801
TELEPHONE: 814-231-1021

LOW COST STUDENT ACCIDENT INSURANCE AVAILABLE

Dear Parents or Guardian,

The State College Area School District does not provide accident insurance for students. The School District does provide you with the opportunity to purchase an Accident Insurance Plan through K&K Insurance Group, Inc. Underwritten by AXIS Insurance Company an A (excellence) rated company. Due to an injury from an accident, this \$25,000. Maximum Benefit applies after your other insurance, if any, is exhausted. Coverage includes:

<u>Hospital Services</u>	<u>Low Option</u>	<u>High Option</u>
Hospital Room and Board - Semi-private	Upto \$150/day	80% of Usual & Customary
Hospital-Misc Services during hospital confinement Incl. X-Ray, CTI scan, MRI & lab tests	\$600 Max/day	\$1,200 Max/day
Emergency Room Charges	\$150 Maximum	\$300 Maximum
<u>Doctor's Services</u>		
Surgery	\$1,000 Maximum	\$1,200 Maximum
Anesthesia	100% Usual & Customary Charges	
In Patient Doctor's Visit	\$40 1 st day/ \$25 each Subsequent day	\$60 1 st day/ \$40 each Subsequent day
<u>Additional Services</u>		
Outpatient Physician Visits	\$40 first day/ \$25 each Subsequent day	\$60 1 st day/ \$40 each Subsequent day
Outpatient X-Ray	\$200 Maximum	\$600 Maximum
Outpatient Diagnostic Imaging Services	\$300 Maximum	\$600 Maximum
Outpatient Laboratory	\$50 Maximum	\$300 Maximum
Outpatient Physiotherapy	\$30 1 st day / \$20 each Subsequent day	\$60 1 st day / \$40 each Subsequent day
Ambulance Service (Air and Ground)	5 days maximum	5 days maximum
Medical Equipment Rental	\$300 Maximum	\$800 Maximum
Dental Services	\$75 Maximum	\$140 Maximum
Prescription Drugs	\$10,000 Max per policy	\$10,000 Max per policy term
Consultant	\$75 Maximum	\$200 Maximum
Replacement of Eye Glasses, Contact Lenses or Hearing Aids:	\$200 Maximum	\$400 Maximum
	100% Usual and Customary Charges	
Maximum Benefit:	\$25,000 (for each Injury)	\$25,000 (for each Injury)
Deductible:	\$0	\$0

Choose Your Coverage Plan: One-Time Payment For Accident Coverage

PLEASE NOTE – FOR COVERAGE PLANS LISTED

Coverage Effective Date: A person's coverage takes effect at the later of the date his or her completed Student accident enrollment form and premium is received by the company or the effective date of the policy issued to his or her school or school district.

Coverage Termination Date: Coverage ends on the earlier of the date his or her coverage has been in force for twelve months or the first day of the next school year. All coverage ceases if the policyholder cancels the policy or when the person ceases to be an eligible person per the definition below. Termination of coverage for any reason will not affect a claim which occurs before coverage ends.

	Low Option	High Option
24-Hour Accident Around-the-clock, before, during and after school, Weekends, Vacation and all summer including summer school. School Sponsored and extracurricular sports excluding High School Football.	\$112.00	\$165.00
24-Hour Accident (Summer ONLY Coverage) Summer begins on the first day after the school year ends. Summer ends on the first day of the next school year.	\$39.00	\$51.00
At-School Accident During the regular school term, on school premises while school is in Session. Direct and uninterrupted travel to and from home and scheduled Classes. School sponsored and supervised activities and sports excluding High School Football. Travel to and from school sponsored and supervised Activities and sports while in a school furnished and approved vehicle.	\$30.00	\$38.00
High School Football (Full Year) Play or practice of regularly scheduled football.	\$176.00	\$293.00
High School Football (Spring only Rates) For new players who participate in spring training and not already insured Under Football Coverage. Sports seasons are defined by your state high School athletic association	\$76.00	\$124.00
High School Football and At-School Accident (Covers all Athletics)	\$206.00	\$331.00
High School Football and 24-Hour Accident (Cover all Athletics)	\$288	\$458.00

Enroll online at:

www.StudentInsurance-kk.com

or by mail using enrollment form in the packet provided.