

**MANDATORY COVERAGE SCHEDULE OF BENEFITS
KANKAKEE SCHOOL DISTRICT #111**

Maximum Benefit	\$25,000
Injuries Involving Motor Vehicles	\$10,000
Accidental Death Benefit	\$20,000
Single Dismemberment	\$10,000
Double Dismemberment	\$20,000
Loss Period	
For Hospital and Professional Services	Treatment must begin within 60 days after the date of Injury.
For Accidental Death, Dismemberment or Loss of Sight	Loss must be sustained within 365 days after the date of the Accident.
Benefit Period	Two Years
Excess Coverage Applicability	\$100 Primary Excess
Other Plan Reduction Percentage	Non-compliance with primary HMO/PPO plan will reduce this plans benefits by 50%.
Hospital/Facility Services	
Inpatient	
Hospital Room and Board	100% RE* up to the semi-private room rate
Hospital Intensive Care	100% Reasonable Expenses
Inpatient Hospital Miscellaneous	100% RE* / \$800 per day maximum
Outpatient	
Outpatient Hospital Miscellaneous (Except physician services and x-rays paid as below)	\$1,100 Maximum
Hospital Emergency Room	\$200 Maximum
Day Surgery Miscellaneous	\$2,000 Maximum
Physician's Services	
Surgical	80% RE* / \$2,000 Maximum
Assistant Surgeon	RE* to 25% of surgical benefit paid only if surgeon is paid
Anesthesiologist	RE* to 25% of surgical benefit paid only if surgeon is paid
Physician's Non-surgical Treatment (Except as below)	100% of RE* / \$40 per day maximum
Physician's Outpatient Treatment in connection with Physical Therapy and/or Spinal Manipulation	100% of RE* / \$40 per visit / \$500 Maximum
Other Services	
Registered Nurses' Services	100% Reasonable Expenses
Prescriptions - outpatient	\$200 Maximum
Laboratory Tests - outpatient	\$300 Maximum
X-rays (Includes Interpretation) - outpatient	\$500 Maximum
Diagnostic Imaging (MRI, CAT Scan, etc) Includes interpretation	\$800 Maximum
Ground Ambulance	\$750 Maximum
Air Ambulance	\$750 Maximum
Durable Medical Equipment (Includes Orthopedic Braces & Appliances)	\$400 Maximum
Replacement of eyeglasses, hearing aids, contact lenses, if medical treatment is also received for the covered Injury.	\$300 Maximum
Dental Services	\$1,000 Maximum
Treatment, repair or replacement of injured natural teeth, includes initial braces when required for treatment of a covered Injury, as well as examination, x-rays, restorative treatment, endodontics, oral surgery and treatment for gingivitis resulting from trauma.	

***RE means Reasonable Expense**

This has been designed to illustrate the highlights of this insurance. All information is subject to the provisions of the Policy. If there is any conflict between this and the Policy, the Policy will prevail.

How to Enroll

Enrolling is easy and only takes a few minutes.

Go to www.k12specialmarkets.com

Cómo Matricularse

Matricularse por internet es fácil y lleva sólo unos minutos.

Vaya a www.k12specialmarkets.com

1. Click on Coverage Details at top
2. Select State and click "Look Up"
3. Click on School or District
4. Click on link to display plan details

Parents can either print and complete the enrollment application to mail with check or money order

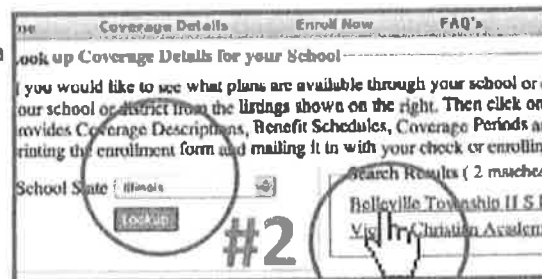
OR

You can enroll online:

1. Enroll online by clicking "Enroll Now"
2. Select State and click "Look Up"
3. Choose your school or district
4. Select school location name (if applicable)
5. Check the plan options
6. Complete online application (more than one child can be enrolled on same application)
7. Pay by credit/debit
8. Print ID card



1. Haga clic en "Coverage Details" en la parte superior
2. Seleccione su estado y haga clic en "Look Up"
3. Haga clic en su escuela o distrito escolar
4. Haga clic en el nombre para mostrar detalles del plan



Parents pueden imprimir y completar la aplicación para mandarla por correo o por orden de pago.

O TAMBIEN:

Pueden inscribirse via web:

1. Inscribese via web haciendo clic en "enroll now"
2. Seleccione su estado y haga clic en "look up"
3. Elija su escuela o distrito
4. Seleccione el nombre de su escuela (si es posible)
5. Verifique las opciones del plan
6. Complete la aplicación via web (dos o mas niños pueden ser inscriptos en la misma aplicación)
7. Pague con tarjeta de debito o credito
8. Imprima su tarjeta de identificación

